

Stillbirth

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Content :

- ❖ **Definition of stillbirth.**
- ❖ **Risk factors of stillbirth.**
- ❖ **Causes of stillbirth.**
- ❖ **Diagnosis of stillbirth .**
- ❖ **Nursing management .**

Objectives :

➤ **By the end of this lecture the student will be able to:**

❖ **Define stillbirth.**

❖ **Explain risk factors of stillbirth.**

❖ **List causes of stillbirth.**

❖ **Discuss how to diagnosis stillbirth and nursing management .**

Definition :

- **Stillbirth is defined as fetal death at or after 20 to 28 weeks of pregnancy. It results in a baby born without signs of life .**

Risk factors :

➤ Include:

- 1. A mother's age over 35 .**
- 2. Smoking, drug use .**
- 3. Use of assisted reproductive technology, and first pregnancy.**
- 4. Other .**

Causes :

➤ **The causes of a large percentage of stillbirths is unknown.**

➤ **Causes may include :**

- 1. Pregnancy complications such as preeclampsia and birth complications.**
- 2. Problems with the placenta or umbilical cord, birth defects .**
- 3. Infections such as malaria and syphilis .**
- 4. poor health in the mother.**

Diagnosis :

- **Fetal behavior is consistent and a change in the fetus' movements or sleep-wake cycles can indicate fetal distress.**
- **A decrease or cessation in sensations of fetal activity may be an indication of fetal distress or death .**

Count...

- 1. An inability to obtain fetal heart sounds on examination.**
- 2. Kick chart to assist in detecting any changes.**
- 3. Electronic fetal monitoring .**
- 4. Nonstress test .**

Count...

5. ultrasound .

- **If the fetus is alive but inactive, extra attention will be given to the placenta and umbilical cord during ultrasound examination to ensure that there is no compromise of oxygen and nutrient delivery .**
- **Stillbirth may be suspected when no fetal movement is felt. Confirmation is by **ultrasound** .**

Treatment :

- **Fetal death *in utero* does not present an immediate health risk to the woman, and labour will usually begin spontaneously after two weeks, so the woman may choose to wait and bear the fetal remains vaginally. After two weeks, the woman is at risk of developing blood clotting problems, and labor induction is recommended at this point.**

Count...

- **In many cases, the woman will find the idea of carrying the dead fetus traumatizing and will elect to have labor induced. Caesarean birth is not recommended unless complications develop during vaginal birth.**

Nursing management :

- **The period following a fetal death is extremely difficult for the family. For many women, emotional healing takes much longer than physical healing so all nursing management focus on providing emotional support and restore health .**

➤ **Nursing diagnosis ??????????**

➤ **Any questions**
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