Perinatal Loss

Lucy Hutner, MD Jeanne Coulehan, CNM, MPH Melisa Olgun, BA



MLB: perhaps the title should be perinatal and maternal loss

Disclosures/Acknowledgments

Lucy Hutner MD: Co-founder and advisor, Phoebe, Inc., and consultant/strategic advisor for Gemma, Inc.



MLB: need to add disclosures

How to use this material

- Review slides individually or as a self study group.
- For questions, go to normal view and read the notes.



Learning Objectives:

- Develop an understanding of the mental health impact of perinatal loss
- Discuss the clinical approach to mental health impact of the patient with perinatal loss
- Appreciate unique factors in the management of perinatal loss as it relates to normal grief, anxiety, depression and other acute psychiatric presentations



Perinatal Loss: Definition

Either the non-voluntary end of pregnancy or death of the infant from conception until twenty-eight days postpartum, including:

- (1) miscarriage
- (2) stillbirth
- (3) neonatal death



(Bhat and Byatt 2016)

Perinatal Loss: Definition

- Spontaneous abortion (miscarriage): loss of pregnancy prior to twenty weeks gestation
- Intrauterine fetal demise (IUFD; stillbirth): loss of pregnancy after either twenty weeks gestation or after the the fetus reaches fourteen ounces in weight
- Early neonatal death: death of an infant prior to seven days of life
- Late neonatal death: death of an infant between seven and twenty eight days of life



(Barfields 2011)

Perinatal Loss: Definition

- Termination of pregnancy for fetal abnormalities and/or genetic indication is included in definition (termination for elective reasons is not)
- Recurrent perinatal loss (RPL): two or more losses
 - Primary RPL, defined as pregnancy loss in women who have never had a viable pregnancy
 - Secondary RPL in women that have had a previous live birth



(Barfield 2011; Bhat and Byatt 2016)

Aspects of perinatal loss

- Common
- Highly distressing
- Can be associated with significant psychiatric sequelae



Epidemiology

- Approx 12-20% of pregnancies end in loss prior to 20 weeks
- Age is a determinant for overall incidence of perinatal loss (27% of women age 25-29 vs 75% of women age over 45 years)
- Many early first trimester losses are never recognized as a pregnancy, and thus spontaneous abortion may be as common as in up to one-third of all pregnancies



Hemels et al. 2005; Hemminki and Forssas 1999;

Robinson 2014; Wilcox et al. 1988

Epidemiology

- Approximately 50-80% of patients who experience perinatal loss will have a subsequent pregnancy
- Recurrent perinatal loss occurs in 2-3% of pregnancies
- IUFD is rare, affecting an estimated 4.6 per 1000 births
- Risk is highest in adolescent pregnancies and in patients over
 40 years



Bhat and Byatt 2016; Kolte et al. 2014; Obstetrics

Care Consensus Statement 2020

Risk Factors

- Increased maternal age
- History of prior miscarriage
- Infertility and fertility treatment
- Thrombophilias
- Parental cytogenetic abnormalities



Maconochie et al. 2007

Risk Factors: considerations

- Some studies indicate higher rates of loss in Black women compared to white; may be related in part to socioeconomic challenges
- Non-Hispanic Black women have the highest risks for IUFD and early infant death as compared to other populations
- Some of this difference is likely attributable to the higher rates of preterm birth and pregnancy morbidities as well as disparity in access to quality health care



Price 2006; MacDorman and Gregory 2015; Muglu et al.

2019; Mukherjee et al. 2013; Martin, Hamilton,

Osterman and Driscoll 2019

Mental health impact of perinatal loss

- Perinatal loss at any point in gestation can have a devastating impact
- Bereaved mothers are four times more likely of developing depressive symptomatology and are seven times more likely of developing post-traumatic stress disorder as compared to non-bereaved mothers (Gold K.J. 2016)
- Empathetic psychological support is pivotal in a compassionate care plan



MLB: may be helpful to discuss relationship between perinatal loss and psychiatric comorbidities before loss as well as a slide on SSRIs and how to answer question regarding risk of perinatal loss with SSRI use as I imagine patients with history of perinatal loss may ask their OBs this question. Consider adding a slide with a table on grief vs MDD

Mental health and perinatal loss

- Clear impact of perinatal loss on mental health
- But may be bidirectional: patients with pre-existing depressive or anxiety disorders have higher rate of perinatal loss, but mechanism unclear
- Might relate to the impact of mental illness, specifically depression, on the functioning of the hypothalamic-pituitary-adrenal (HPA) axis
- Release of maternal glucocorticoids with stress response: promote placental prostaglandins and upregulate pro-inflammatory cytokines



Farren et al. 2018; Gold et al. 2007; Klock, Chang, Hiley and Hill 1997; Li et al. 2012

Mental health and perinatal loss

- Many patients experience perinatal loss as very emotionally difficult
- · Range of depressive, anxiety, and/or stress-related symptoms
- Different perspectives exist regarding severity and course of symptoms: normal emotional reaction vs.a psychiatric condition once symptoms pass a certain threshold or disrupt functioning
- The risk of psychiatric illness is elevated in the first year following loss,
 particularly for IUFD

REPRODUCTIVE PSYCHIATRY

Gold 2016; Lewkowitz et al. 2019

Common mental health conditions related to perinatal loss

- Grief/complicated grief
- Depressive disorders (including suicide)
- Anxiety disorders
- Acute stress disorder/post-traumatic stress disorder



Impact of perinatal loss on subsequent pregnancies

- Higher prevalence of anxiety (22%) and depression (20%) in patients
 with a history of stillbirth as compared to patients without it
- Symptoms can persist up to 6 -18 months after the birth of a live infant
- Perceived low levels of support can increase the risk of depression and anxiety in a subsequent pregnancy, as can pregnancy within the first year following the loss

REPRODUCTIVE

Gravensteen et al. (2018); (Armstrong, Hutti and Myers 2009).

Treatment

- No published psychopharmacology treatment studies of psychiatric conditions associated with perinatal loss
- However, it is common to be prescribed a medication--usually an antidepressant--in the year following perinatal or neonatal loss



(Lacasse and Cacciatore 2014).

Psychotherapy: general approach

- Perinatal loss considered a highly personal; grieving patients often feel alone
- Perinatal loss has been called "disenfranchised grief," a grief that occurs when a loss is not generally recognized by society
- Many psychotherapy modalities studied; interpersonal psychotherapy
 (IPT) has been adapted to perinatal loss



(Markin and Zilcha-Mano 2018); (Doka 1989)

Importance of Language

HELPFUL

- I am here for you
- I'm here to listen
- I wish I could take the pain away, but at least I can be here with you

HURTFUL

- Everything happens for a reason
- It's going to be okay
- You are young and can have more children
- At least you can get pregnant
- Don't blame yourself



MLB: I love this but wondering if the language can be modified to be coming from a healthcare provider

Resources

- March of Dimes: Dedicated to dealing with grief and perinatal loss
- <u>Return to Zero (HOPE)</u>: Engages with a global community of bereaved parents and their health care providers to improve mental health outcomes while also advancing pregnancy and infant loss awareness.
- <u>Share Pregnancy and Infant Loss Support</u>: Provides information for families and professionals about early pregnancy loss, stillbirths, and neonatal loss
- <u>International Stillbirth Alliance</u>: A coalition of stillbirth awareness groups and organizations that work to promote stillbirth research and awareness. The Alliance provides support resources for parents.
- The Miscarriage Association (UK): Support group that offers resources
 for families to cope with miscarraiage and spreads awareness of
 miscarriage. The Association has a ntwork of support volunteers and
 provides information to help people better understand miscarriage including post-miscarriage tests and information on "trying again"
 after loss.



Resources

- The Compassionate Friends: Though not exclusively focused on pregnancy loss, the Friends provides support for families who are grieving the death of a child.
- <u>Grief Out Loud</u>: Offers online support for grieving families affected by pregnancy loss, stillbirth, or infant loss.
- Star Legacy Foundation: Supports research, education, and advocacy regarding pregnancy loss and neonatal death. The Foundation has counselors who are available 24/7.
- <u>Faces of Loss, Faces of Hope</u>: A place to share your story with others who understand.
- <u>Black Mamas Matter Alliance</u>: An advocacy organization focused on improving the health and well-being of Black women through research, policy, and cultural shifts.
- Grieving Dads To the Brink and Back: A forum for dads to connect.



MLB: would also add "core references"