Stillbirths in the Obstetrical Departments of Berlin from 2013 to 2014

Original title: Totgeburten der Jahre 2013 und 2014 in den Berliner Kliniken

J. W. Dudenhauzen¹, R. Richter², M. Vogel³

¹ Department of Obstetrics, Charité University Medicine Berlin, Berlin
² Department of Gynecology, Charité University Medicine Berlin, Berlin
³ Institut of Pathology, Charité University Medicine Berlin, Berlin

There were a total of 401 stillbirths, 178 after fetocide or preg-
nancy termination and 223 were spontaneous stillbirths. Of
this group a patho-anatomical diagnosis from the autopsy was
documented in 21 cases. When compared to live births, spon-
taneous stillbirth were more likely to have intrauterine growth
restriction, have maternal age ≥ 35 years, have smoking mo-
thers and have a mother from foreign countries.

The rate of autopsies, placental histologies and patho-
morphological diagnosis (9 % of all spontaneous stillbirths) after
stillbirths is unacceptable low in this study period. The data of
the majority of the spontaneous stillbirth are not suitable for
final analysis and consequences for preventive strategies. We
promote standardization of postmortal examination including
autopsy, placental histology, cytogenetic examination of child
and parents, microbiology of mother's and newborn's blood
and skin, examination of mother's blood for infections, coagu-
alation, fetal-maternal transfusion, illegal drugs.

A stillbirth is defined as the death of a fetus prior or during
birth. Internationally, there are different definitions of stillbir-
th, most of them relate to the gestational age of the pregnancy
or the fetal weight. Some national statistics of stillbirths ex-
clude fetuses with congenital anomalies or termination of
pregnancy. These differences may have an influence at the pre-
cise rate of stillbirth.

Worldwide, on average, 6 stillbirth occur each minute or near-
ly 3 million each year. In the high-income countries, the still-
birth rate has remained constant for the past three decades,
ranging from 3 to 5.3 per 1000 births.

The aim of the study was to collect the anonymous obstetrical
data of all stillbirths in two years (2013 and 2014) at the hos-
pital settings in Berlin. After interpretation of the results the
focus should be the development of prevention strategies.