Index

Note: Page numbers followed by “f,” “t,” and “b” refer to figures, tables, and boxes, respectively.

7-dehydrocholesterol (7-DHC), 104, 169
15-methyl PGF2α, 233
20–24 weeks of gestation, stillbirth at, 7
28 weeks of gestation, stillbirth prior to, 7–8
28–36 weeks of gestation, stillbirth at, 8
37 weeks of gestation, stillbirth beyond, 8
abdominal wall defects, 177–8
Aberdeen classification system, 43, 93
abruption, chronic, 153
abruptio placenta, 10, 153
achondrogenesis, 175
achondroplasia heterozygous, 175, 176
homozygous, 176
adenosine triphosphate metabolism, 164
adverse childhood events (ACEs), 71
Afghanistan, stillbirth rates in, 23, 24, 25
Africa, stillbirth rates in, 26
African-Americans, stillbirth risk for, 67–8
African sleeping sickness, 92, 93
tage-associated stillbirth risk, 66
Agrobacterium radiobacter, 87
alcohol consumption, 13, 72
information bias on, 63
alloimmunization, 196
alpha fetoprotein (AFP), 115
alpha-thalassemia with hydrops, 168–9
alpha-thalassemia with hydrops, 168–9
amino acid disorders, 169
amniotic band syndrome, 179
amniocentesis, 232, 234–5
aneuploidy, 163–5, 178
aneuploidy cells, 102
anhydramnios, fetal renal causes of, 174
animal- and vector-borne infections, 92–3
animal-derived maternal infections, 93
antepartum fetal surveillance tests, 248
anthrax, 87, 92, 93
anti-beta2-glycoprotein antibodies, 198
anti-cardiolipin antibodies, 198
anti-phospholipid antibodies (aPL), 125, 136
anti-phospholipid syndrome (APLAS), 114, 136–7
testing for, 198–9
antithrombin (AT), deficiency of, 133
Arizona Republic, 205
array comparative genomic hybridization (array CGH), 102, 166, 194
ascending bacterial infections, 84t, 85f, 87–8, 110
asphyxia in labor, 5
aspirin, 138, 139
assisted reproductive technologies (ARTs), 74
ATTEND model, 203
attunement, 212–13
death education, 222–3
egalitarianism, 218
and interdisciplinary team, 223–4
nuance, 219–22
patient- and relationship-centered caring model of, 210–12
therapeutic touch, 217
trust, 213–17, 218
attunement, 212–13
Australian and New Zealand Antecedent Classification of Perinatal Mortality (ANZACPM), 46
autosomal recessive disorders, 168
alpha-thalassemia with hydrops, 168–9
amino acid disorders, 169
lysosomal storage diseases causing hydrops, 169
peroxisomal disorders, 169
Smith-Lemli-Opitz syndrome, 169
autosomal recessive polycystic kidney disease, 174
bacterial infections
ascending bacterial infections, 84t, 85f, 87–8, 110
spirochetal infections, 86–7
syphilis, 83–6
transplacental infections, 87
bacteroidaceae, 84t
Bacteroides, 197
Bangladesh, 24, 25f, 28
Beckwith-Wiedemann syndrome, 178
birth and death, collision of, 203–4
birth certificate, standard, 61, 62
body mass index (BMI), 73, 113
bone alterations, 105
Borrelia burgdorferi, 84t, 86, 198
Borrelia duttonii, 84t, 86
Borrelia recurrentis, 84t
brucellosis, 92, 93
caffeine consumption and stillbirth, 72
Canada, 5
stillbirth causes in, 6
Candida albicans, 85f, 92
Candida glabrata, 85f, 92
cardiac anomalies, 170
associated syndromes, 171
“Cardiff” method, see “count to 10” method
causal data, for stillbirths, 32–5
cause of death (COD), 43, 47, 49, 51, 53, 147
causes of death and associated conditions (CODAC) system, 50–51
causes of stillbirth evaluation for, see evaluation for causes of stillbirth by gestational age
20–24 weeks, spontaneous preterm losses at, 7
28 weeks, stillbirth prior to, 7–8
28–36 weeks, stillbirths at, 8
at and beyond 37 weeks, 8
Centre for Maternal and Child Enquiries (CMACE) classification, 43–6
cerebral ventricular enlargement, 169
cerebrohepatorenal syndrome, 169
Certificate of Birth Resulting in Stillbirth (CQRS), 205, 224
cesarean delivery, 237
fetal death, in women, 235–7
indications for, 237
and labor induction, 74–5
prior cesarean delivery, fetal death in, 235–7
Chagas disease, 92, 93
chickenpox, 89
Child Health and Nutrition Research Initiative (CHNRI), 37
China, 24, 31
chlamydia, 95
Chlamydia trachomatis, 84t

Note: Page numbers followed by “f,” “t,” and “b” refer to figures, tables, and boxes, respectively.
cholestasis of pregnancy, see intrahepatic cholestasis of pregnancy (ICP)
testing for, 199
choioamnionitis, 82, 87, 88, 94, 149
chiorionic stroma, 166
chromosomal mosaicism, 165
classification, of stillbirths, 42
causes of death and associated conditions (CODAC) system, 50–51
Centre for Maternal and Child Enquiries (CMACE), 43–6
classification, of stillbirths, 42
clinical history and evaluation, for causes of stillbirth, 188–9
“cloverleaf skull”, 175
common causes, of stillbirth, 7
communication, 190, 211, 212, 213–14
common context, 217
listening-centered guidelines, 217
nonverbal, 211, 214, 215, 217
styles, 217
comparative genomic hybridization (CGH), 101, 102f, 194
Confidential Enquiry into Maternal and Child Health (CEMACH), see Centre for Maternal and Child Enquiries (CMACE)
confined placental mosaicism (CPM), 101, 102–4, 164
with fetol growth restriction, 165–6
congenital anomalies, 5–6, 162
array comparative genomic hybridization, 166
autosomal recessive disorders, 168
alpha-thalassemia with hydrops, 168–9
amino acid disorders, 169
lysoosomal storage diseases causing hydrops, 169
peroxiosomal disorders, 169
Smith-Lemli-Opitz syndrome, 169
fetal metabolic disorders
inborn errors of metabolism, 179
hydrops fetalis, 166–8
karyotypic abnormalities, 163
aneuploidy, 163–5
CPM with fetol growth restriction, 165–6
unbalanced translocations/deletions, 165
structural anomalies without obvious chromosomal abnormalities, 170
abdominal wall defects, 177–8
amniotic band syndrome, 179
cardiac anomalies, 170
fetal tumors, 176–7
intrathoracic anomaly with hydrops, 173
lethal skeletal dysplasia, 174–6
neural tube defects, 178
neuromuscular disorders, 178–9
pentalogy of Cantrell/ectopia cordis, 178
structural (obstructive), 170–73
urogenital anomaly, 173–4
X-linked disorders, 169–70
congenital diaphragmatic hernia, 173
congenital heart defect, 164
congenital muscular dystrophies, 178
congenital myasthenia gravis, 178, 179
congenital myotonic dystrophy, 179
congestive heart failure, 156, 172
fetal, see hydrops fetalis (HF)
copy number variants (CNVs), 166
databases, 167
cord accidents, 10–11, 192–3
umbilical, see umbilical cord (UC)
accidents
Cornelia de Lange syndrome, 173
corporeal losses, 219
counting stillbirths, in low-income countries
definitions and international comparability, 20–22
policy and program priority, 21
“count to 10” method, 248
Coxiella burnetti, 85f, 91
Coxsackie A and B, 84f, 90
cultural awareness, 216
current global status, for stillbirth regional and national variation, 23–4
within country variation, 24–6
cystic hygroma, 165, 169
cytogenetic abnormalities, of fetus, 100–101
cytogenetic causes, of stillbirth, 100
cytomegalovirus (CMV), 10, 84f, 89, 90, 148, 172, 197
Danish National Birth Cohort, 64, 66, 123
Danish registries, 63
data availability and quality, 61–5
data count making, of stillbirth causal data for stillbirths, 32–5
estimation, improving, 32
reducing stillbirths, action in, 35–6
death categories, causes of, 43
definition of stillbirth, 3, 60
Deltaparin, 138
Democratic Republic of Congo, 86
Demographic Health Surveys (DHS), 32, 36
demographics and exposures, 57
changing, 57–8
control group selection, 60–61
data availability and quality, 61–5
definition of stillbirth, 60
marital status, 70
maternal age, 65–6
maternal health care, 74
assisted reproductive technologies (ARTs), 74
induction of labor and elective cesarean section, 74–5
maternal mental illness, 74
maternal nutrition
iron, 73–4
obesity, 73
maternal substance use
caffeine, smoking, and alcohol, 72
illicit drug use, 72–3
occupation, 69–70
overlapping and incompletely described maternal characteristics, 58–9
pregnancy history, 68–9
pregnancy outcomes, competing, 59–60
psychosocial stress, 70–72
race and ethnicity, 66–8
social environment, 69
social position, 69
dengue fever, 85f, 92, 93f
Denmark, stillbirth rates in, 4, 5
developed countries, stillbirths in, see high-income countries, stillbirths in diabetes mellitus (DM), 110, 114, 117, 199, 242, 244
fetal death, mechanism of, 118–19
gestational diabetes mellitus (GDM), 120–21, 122f
identifying compromised fetus and management options, 119–20
risk factors, 119
stillbirth rate in women with, 117–18
diabetic ketoacidosis (DKA), 118–19
diaphragm abnormalities, 164
dichorionic pregnancy, 238
dinoprostone, 232, 233
direct eye contact, 215
disability-adjusted life years (DALYs), 86
disenfranchised grief, 205
distal villous immaturity, see placental maturation defect
DKA-related fetal deaths, 118–19
Down syndrome, 101, 163
DR Congo, stillbirth in, 24, 25f
drug abuse, 114
echovirus, 84f, 90, 197
eytoria cordis, 178
egalitarianism, principle of, 218
Ellis-van Creveld syndrome, 175
encephalocele, 178f
endomyocardial fibrosis, 164
England, stillbirth rates in, 4, 5
enoxaparin, 138
Enterococcus, 84t
enterovirus, 84t, 90, 197
epidemiologic studies of exposures associated with stillbirth, 62f
erythroblasts, 155
Escherichia coli
erythroblasts, 155
erythrocyte, 87, 197
estriol, 115
evaluation for causes of stillbirth, 200
expectant management, for fetal death, 200b, 200t
fetal death certificate, demographics and exposures for, 61
fetal death syndrome, see retained dead fetus syndrome (RFDS)
fetal demise, see fetal death
fetal growth restriction, 10, 12t, 47–8, 110, 132
fetal weight, 112
fetal growth restriction, 10, 12t, 47–8, 110, 132
clinical practice points, 115
CPM with, 165–6
fetal weight based standard, 112
fetal hypokinesia, 169
fetal hypoxia, 122, 126–7, 144f
fetal liver tumors, 176
fetal loss by chromosome, 103
fetal–maternal hemorrhage (FMH), testing
fetal hydrops, 125, 169
conditions associated with, 167f
fetal hypokinesia, 169
fetal hypoxia, 122, 126–7, 144f
fetal liver tumors, 176
fetal loss by chromosome, 103
fetal–maternal hemorrhage (FMH), testing for, 194–6
fetal metabolic disorders, 104t, 105, 164, 168
inborn errors of metabolism, 179
fetal mortality rates, 61, 117, 118, 195–6
gestation period, 7f
by maternal ages, 8f
fetal movements, decreased, 14
fetal tachydysrhythmias, 172
fetal thrombotic vasculopathy (FTV), 144f, 151, 152f
fetal tumors, 176–7
fetomaternal hemorrhages, 137, 144f, 154
fetoplacental abnormalities, 143, 157
fetus, 87, 214, 230
with congenital heart defects, 170
with critical obstructive lesions, 172
cytogenetic abnormalities, 100–101
external examination of, 145–6
with growth restriction, 164
internal examination of, 146
with long-chain fatty acid oxidation disorders, 179
in ReCoDe categories, 49b, 50f
with spina bifida, 178
tumors in, 176
with turner syndrome, 165f, 193f
with type II Thanatophoric dysplasia (TD), 175
and viral infection, 88–90
Finnish birth registry, 244
Finnish national registries, use of, 63
flow cytometry, 195
fluorescent in situ hybridization (FISH), 101, 194
Foley bulb, 235, 236
Fryns syndrome, 173
fungi, 85t, 92
animal- and vector-borne infections, 92–3
hemophilic infections, 92
gastrochisis, 177
Gaucher disease, 105, 105f
General Health Questionnaire (GHQ), 71
Gaucher disease, 105, 105f
gestational age, 3, 9f, 10, 53, 60, 124f
causes of stillbirth by, 7–8
gestational diabetes mellitus (GDM), 120–21, 122t, 199
gestation-related optimal weight software (GROW), 47–8
Global Alliance for Prevention of Prematurity and Stillbirth (GAPPs), 23
gonorrhea, 88, 95, 189
grief management, 238
group B streptococcal fetal pneumonia, 82
group B streptococci, 10, 149, 197
group B Streptococcus, 84t, 87, 196
Guinea-Bissau, 89
H1N1 virus, 85t, 89, 147
Haemophilus influenzae, 87
haptics, see therapeutic touch
Hardy–Weinberg equilibrium, 169
hemophilic infections, 85t, 92
Hemabate, see 15-methyl PGF2α
hematogenously spread infection, 85f,
87, 148
hemoglobin-associated stillbirth, 73–4
hemorrhages, 61, 153–4, 155
acutewith cranial, 144f
intrapartum, 46
intraocular, 44f
massive pulmonary, 44f
maternal, 137
obstetric, 237
petechial, 146
postpartum, 179, 231
hydrops fetalis (HF), 144
hydrops, 10, 82
human immunodeficiency virus (HIV)
human chorionic gonadotropin
horseshoe kidney, 174
HIV infection, 19, 85
histiocytic intervillositis, chronic, 153
histiocytic intervillositis, chronic, 153
history of hypertension, 122, 123, 242
fetal death, mechanism of, 122
identifying compromised fetus and management options, 122–3
stillbirth rate by type of hypertension, 122
hypofibrinogenemia, 230, 231
hypoplastic lungs, 165
ichthyosisiform, 105
illicit drug use, 13
intra-amniotic prostaglandin F2α, 232, 235
intrahepatic cholestasis of pregnancy
inteplacental, 87, 110, 114
testing for, 197–8
infectious causes of, 147
infections associated with, 146
infections associated with, 146
infectious causes of, 147
major pathophysiologic processes, anatomic localization of, 144
intrahepatic cholestasis of pregnancy (ICP), 126, 157
fetal death, mechanism of, 126–7
identifying compromised fetus and management options to reduce risk, 127, 157, 189
management algorithm for, 128/
intrapartum stillbirths, 5, 26, 30r, 31, 35, 69, 74, 118
by world region, 23
interrater scorer with hydrops, 173
intrauterine fetal death, 133, 139, 229
230, 231, 234, 235
intrauterine fetal demise, 143, 144f, 149, 154, 156, 157–8, 177
common abnormal gross phenotypes associated with, 146
infections associated with, 148f infectious causes of, 147
major pathophysiologic processes, anatomic localization of, 144
intrauterine growth restriction (IUGR), 45–6, 49, 110, 119, 238, 244
and clinical strategies, 114–15
in epidemiological research, 113
and pathological examination, 111
prevalence of, 113
risk factors of, 114
iron deficiency and stillbirth risk, 73–4
Jeune syndrome, 175
karyotypic abnormalities, 101, 106, 107, 163
aneuploidy, 163–5
Cohort with fetal growth restriction, 165–6
and genetic evaluation, 193–4
unbalanced translocations/deletions, 165
kidney defects, 86, 151, 164, 173, 174
Kinesins, 215
Kleihauer-Betke test, 137, 154, 194–5
Klinefelter syndrome, 165
labor, asphyxia in, 5
labor induction, 230, 236
and elective cesarean section, 74–5
versus expectant management, 231
oral misoprostol for, 233
techniques, 229, 234
amniotomy, 235
surgical evacuation, 235
transcervical catheter placement, 235
Latin America, 24, 31
Leptospira interrogans, 84t, 93r
leptospirosis, 87, 92, 93t, 198
lethal pulmonary hypoplasia, 174f
leukemia, 163, 176
limb abnormalities, 164, 174f
Listeria, 197
Listeria monocytogenes, 84t, 87, 148, 197
listeriosis, 92, 93t, 148
liveborn, 3, 100–101, 163, 164, 166, 169
Ljungan virus, 85t, 92, 93t
long-chain fatty acid oxidation disorders, 179
long QT syndrome (LQTS), 106, 173
low-income countries, stillbirths in, 19
causal data, 32–5
causes, variation in, 26–8
counting stillbirths
definitions and international comparability, 20, 22
policy and program priority, 21r
current global status
regional and national variation, 23–4
within country variation, 24–6
data usage, for stillbirths reduction, 35–6, 38f
global data and policy, stillbirth visibility
in, 19–20
maternal conditions for stillbirths and neonatal deaths, 28–31
stillbirth data count, making, 32–5
timing, of stillbirth, 26
trends, 31
low-molecular-weight heparin (LMWH), 133, 138–9, 245
lupus, 114, 199
lupus anticoagulant, 132, 136, 139, 198
lupus nephritis, 125, 126
lyme disease, 86, 92, 93t, 198
lymphedema, 165
lymphocytic choriomeningitis, 85t, 92, 93t
lysosomal storage diseases, 104, 105
causing hydrops, 169
macrocephaly, 169
macro system, in MISS model, 204, 205t, 225
macro trends, in stillbirth, 205
magnetic resonance imaging (MRI), 107, 146, 162, 191, 238
malaria, 28, 37, 82, 89, 90–91, 92, 93t, 96, 148, 198
Malaysia, stillbirth in, 27
marginal abruptions, 153
marital status, 70, 71
maternal age, 9, 10f, 12, 59, 60, 65–6, 68, 69, 70, 114, 119, 143, 157
older, 66, 75, 114, 143, 157, 158, 189
and parity, 12t, 12–13
singleton pregnancy and multiple pregnancies, fetal mortality rates in, 8f
maternal age, high, 8f, 9f, 13, 74, 114, 189, 190
and parity, 12–13
in United States, 65–6
maternal conditions, 69, 93, 125, 157, 199, 242
for stillbirths and neonatal deaths, 28–31
maternal depression, chronic, 209
maternal floor infarction (MFI), 152–3
maternal health care, 74
assisted reproductive technologies (ARTs), 74
labor induction and cesarean section, 74–5
maternal hemorrhage, 137
maternal infections, 31, 82, 84–5t, 147, 198
see also infections
maternal influenza, 83, 89
maternal medical conditions, 52, 57, 110, 117
chronic hypertension and hypertensive disorders of pregnancy
fetal death, mechanism of, 122
identifying compromised fetus and management options to reduce risk, 122–3
stillbirth rate by type of hypertension, 122
intrapartal cholestasis of pregnancy (ICP), 126
fetal death, mechanism of, 126–7
identifying compromised fetus and management options to reduce risk, 127, 128f
obesity, 123–4
fetal death, mechanism of, 124
identifying compromised fetus and management options to reduce risk, 124
renal disease, 124–5
systemic lupus erythematosus (SLE), 125–6
thyroid disorders, 126
type 1 and type 2 diabetes mellitus
fetal death, mechanism of, 118–19
gestational diabetes mellitus (GDM), 120–21, 122r
identifying compromised fetus and management options to reduce risk, 119–20
risk factors, 119
stillbirth rate, 117–18
maternal peripheral leukocytes, 169
maternal risk factors, for stillbirth, 12
maternal serum alpha fetoprotein (MSAFP), 247
measles, 84, 89, 95
medical disorders, stillbirth associated with, 199, 244–5
medical labor induction, 231
mifepristone, 234
misoprostol, 233–4
oxytocin, 231–2
prostaglandin agents, 232–3
prostaglandin E2, 232
medical management and delivery, 229
cesarean delivery, 237
clinical considerations, 238–9
expectant management, 230–31
fetal death
management of, 229
in multiple gestation, 237–8
in women, with prior cesarean delivery, 235–7
medical labor induction, 231
mifepristone, 234
misoprostol, 233–4
oxytocin, 231–2
prostaglandin agents, 232–3
prostaglandin E2, 232
surgical induction, 234
amniotomy, 235
and evacuation, 235
transcervical catheter placement, 235
Melnick-Needles syndrome, 106
memento mori, 221
Mendelian disorders, 105–6
mental illness, maternal, 74
mental retardation syndrome, 104, 166
methylene tetrahydrofolate reductase (MTHFR) mutations, 135–6, 199
mezzo system, in MISS model, 204, 205, 209, 224, 225
micro system, in MISS model, 204, 205, 223, 225
individual and familial challenges, 207
traumatic loss and existential angst, 207–9
middle cerebral artery peak systolic velocity (MCA-PSV), 136, 168f
mifepristone, 231
side effects of, 234
mild anemia, 105
Millennium Development Goals (MDGs), 19
mindfulness-based stress reduction (MBSR), 225
misoprostol, 231, 232, 233–4
usage of, 236
m-mode imaging, of fetal heart, 172f
monochorionic pregnancy, 137, 167, 238
multicystic dysplastic kidney disease, 174
Multidimensional Integrative Stillbirth Systems (MISS) model, 204, 209
multiple congenital anomaly (MCA), 104–5, 169
multiple gestation, 11, 12t, 57, 75, 137–8, 189
fetal death in, 237–8
Multiple Indicator Cluster Surveys (MICS), 32
multiple pregnancy, 110, 113, 114
mumps, 84t, 85, 89
*Mycoplasma hominis*, 84t, 197
mycoplasma infections, 83
*Mycoplasma*, 197
myocardial fibrosis, 164
narrative intervention, for stillbirth, 213
National Health and Nutrition Examination Survey (NHANES), 13
*Neisseria gonorrhoeae*, 84t
the Netherlands, stillbirth in, 3
neural tube defects, 59, 178, 191f
neuroblastomas, 176
neuromuscular disorders, 178–9
neuroblastomas, 176
nulliparity, 68
Norway, stillbirth rates in, 4, 5, 14, 20, 23, 70, 86
nuchal cords, 187, 192
nulliparity, 68
nutrition, maternal deficiencies, 67
iron, 73–4
obesity, 73
obesity, 9, 12t, 13, 28, 57, 64, 113, 123–4, 156, 157, 245
associated stillbirth, 73
fetal death, mechanism of, 124
identifying compromised fetus and management options to reduce risk, 124
role of, 67
obstetric history, 10, 13, 114, 189, 245
occupation and stillbirth risk, 63, 64, 69–70
oocysts, 215
oligohydramnios, 150, 157, 177, 199
of fetal renal causes, 173–4, 174t
omphalocele, 177–8
opisthotonos, 105
oral misoprostol, 233, 234, 236
*Oreinhotrdoros moubata*, 86
osteogenesis imperfecta, 175
oxytocin, 229, 230, 231–2, 235, 236
Pakistan, stillbirth in, 23, 24, 25t
PAPP-A, 115, 157, 245, 246t
paralanguage, 215
parvovirus (B19), 10, 82, 83, 84t, 89–90, 94, 95, 196, 197
associated fetal death, 197f
and hydrops fetalis, 155, 156
paternal age, 66
pathologist, responsibilities of, 145–7
pathology of Cantrell, 178
perinatal autopsy, 28, 187, 189–91, 194
perinatal death, 11, 20, 174, 223
and Aberdeen classification system, 43
cause and mechanism of, 47
classification, on fetal and neonatal factors, 44t
due to congenital anomalies, 5
and maternal conditions, 31
Perinatal Society of Australia and New Zealand (PSANZ), 46–7
Perinatal Society of Australia and New Zealand Perinatal Death Classification (PSANZ-PDC), 46, 53
peripheral separation, chronic, 153
perivillous fibrin(oid) deposition, see maternal floor infarction (MFI)
pervious disorders, 169
personal space, 215
placenta and cord, 143
pathologist, general role of, 145–7
research priorities, 158
specific conditions
chronic placental dysfunction, 151–3
hemorrhages, 153–4
hydrops fetalis (HF), 154–6
infections, 147–9
intrinsic fetal, 157–8
intrinsic maternal, 157
placental dysmaturity, 156–7
umbilical cord (UC) accidents, 149–50
placental cytogenetics, 101–4
placental dysfunction, 10, 125, 139
chronic, 151–3, 151f, 152f
placental maturation defect, 156–7
placental pathology, 10, 45, 53, 111, 149, 191–3, 198–9, 200
plasminogen abruption (PA), 137
plasminogen activator inhibitor (PAI-1), 136
Plasmodium falciparum, 85t, 91, 148
Plasmodium vivax, 85t
Poland, stillbirth in, 6
polio, 83, 84, 90, 96
polydactyly, 164, 169, 170f
polyvalvular dysplasia, 164
poor obstetric history, 114
posttraumatic stress disorder (PTSD), 69, 71, 72, 203, 206, 219, 238
preconception care, 13
preecclampsia, 63, 110, 115, 120, 122, 123, 125, 135, 143, 151, 179
preexisting chronic hypertension, 122
pregestational diabetes, 199
pregnancy, adverse outcomes of, 243–4
pregnancy complications, history of, 68
pregnancy-induced hypertension (PIH), 7, 122–3
pregnancy outcome and stillbirth, in low-income countries, 22f
pregnancy outcomes, competing, 59–60
prevention strategies, in high-income countries, 6, 14–16
primary cesarean delivery, see cesarean delivery
prospective fetal mortality rate (PFMR), 60, 61
prostaglandin agents, 232–3, 236
prostaglandin E₂ (PGE₂), 230, 232
prostin, see prostaglandin E₂ (PGE₂)
protein C deficiency, 133–4, 245
protein S deficiency, 133, 134, 245
prothrombin G20210A heterozygous deficiency, 245
prothrombin G20210A mutation, 135
prothrombin gene mutation (factor II), 135
protozoa, 85t
protozoal infections, 90
malaria, 90–91
Q fever, 91–2
toxoplasmosis, 91
proxemics, 214
Pseudomonas pyocyanea, 87
psychological experiences, 205–7
psychosocial care
ATTEND model, 212
attunement, 212–13
death education, 222–3
egalitarianism, 218
insidious seeping into psyche, 205–7
insulating factors, 209–10
and interdisciplinary team, 222–3
nuance, 219–22
patient- and relationship-centered caring, model of, 210–12
psychosocial intervention, 217
trust, 213–17
macro trends, in stillbirth, 205
micro systems
individual and familial challenges, 207
traumatic loss and existential angst, 207–9
MISS model, 204
vicarious trauma, 224–5
psychosocial stress, 70–71
public space, 215
Q fever, 91–2, 93t
racial factors and stillbirth, 13–14
and ethnicity, 66–8
rates of stillbirth trends, 10, 23, 24, 25, 26, 31, 32, 35, 65, 69, 82, 99, 121t,
126, 137, 164
in high-income countries, 4–5
in low-income countries, 31
ReCoDe classification system, 47–9, 50t, 53, 93
recurrence risk, of stillbirth, 106, 152, 242–3
relevant conditions at death, see ReCoDe classification system
renal disease, 47, 57, 199
maternal, 124–5
ureaplasma infections, 83
Ureaplasmas, 197
Ureaplasma urealyticum, 10, 84t, 197
urogenital anomaly causing severe oligohydramnios/anhydramnios, 173–4
ursodeoxycholic acid (UDCA), 127
U.S. National Center for Health Statistics (NCHS), 4
uterine abnormalities, 199–200
uteroplacental insufficiency, see chronic placental dysfunction
vaginal birth after cesarean (VBAC), 236
vaginal misoprostol, 233, 234t
variation in stillbirth causes in low-income countries, 26–8
varicella (chickenpox), 89
varicella zoster, 84t
vasa previa, 137
vascular/thrombotic events
feto-maternal hemorrhage (FMH), 137
management
acquired thrombophilia, 138–9
inherited thrombophilia, 138
maternal hemorrhage, 137
multiple gestation, 137–8
thrombophilia, 132–3
acquired thrombophilia, 136–7
antithrombin (AT), deficiency of, 133
factor V Leiden mutation, 134
methyltetrahydrofolate reductase (MTFHR), 135–6
plasminogen activator inhibitor (PAI-1), 136
protein C deficiency, 133–4
protein S deficiency, 134
prothrombin gene mutation (factor II), 135
vector-borne maternal infections, 93t
venous thromboembolism (VTE), 133
ventriculomegaly, 172
vicarious trauma, 224–5
vicarious traumatization, 224
villitis, chronic, see villitis of unknown etiology (VUE)
villitis of unknown etiology (VUE), 151–2
viral diseases, 90
common childhood diseases, 89
enteroviruses, 90
hepatitis E virus (HEV), 90
HIV infection, 88–9
influenza, 89
parvovirus, 89–90
visibility, in global data and policy, in low-income countries, 19–20
vocalics, see paralanguage
Wales, stillbirth rates in, 4, 5
Walker-Warburg syndrome, 178, 179
“weathering” hypothesis, 72
Wigglesworth classification, 43
Wisconsin Stillbirth Service Program (WISP), 101
workup of patient with stillbirth, 187
evaluation for causes of stillbirth, 200b
antiphospholipid syndrome testing, 198–9
bacterial infection, 197–8
clinical history and evaluation, 188–9
essential components, 190t
fetal–maternal hemorrhage testing, 194–6
heritable thrombophilias testing, 198–9
indirect Coombs’/antibody screen, 196
infections, testing for, 196
infectious work-up, 198
karyotype and genetic evaluation, 193–4
malaria, 198
maternal medical conditions testing, 199
perinatal autopsy, 189–91
placental pathology, 191–3
syphilis, 198
toxicology screening, 196–8
uterine abnormalities, 199–200
viral infections, 196–7
X-linked disorders, 106, 169–70
X-linked hydrocephalus, 106
XXX syndrome, 165
XYY syndrome, 165
Zellweger syndrome, 169