

EP16.30 Perinatal grief support care model in a third level perinatal center in Mexico

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Objectives

Describe a model of perinatal grief support in a third level perinatal center.

Methods

We designed a model based in the institutional experience in perinatal grief support respecting the fundamental pillars of bioethics.

Eligibility criteria

Fetal death, fetus with a prenatal diagnosis of a lethal pathology or with significant disability that impairs the quality of life

Results

After the diagnosis is made in fetal medicine service, counseling is provided in a private place, considering and respecting the beliefs, values, and culture of the parents; If the case is difficult in terms of diagnosis, management, or prognosis, a multidisciplinary session is held with fetal medicine, genetics, psychology, neonatology, social work, pathology, nursing, fetal cardiology, pediatric neurosurgery, etc. to discuss the case before counseling the parents.

The mother is notified in the company of a family member about the condition of her baby, about the diagnosis and short- and long-term prognosis for life and function, therapeutic alternatives and their consequences.

If the patient wants to continue the pregnancy and is referred to neonatal palliative care if necessary, and her prenatal monitoring is the responsibility of fetal medicine; if she wants to terminate the pregnancy within the legal and ethical limits permitted in accordance with the laws and regulations in force in the country, the patient is supported. Support is provided through psychology and genetic counseling. Pregnancy is resolved in a private and quiet area, designated as “butterfly code,” allowing contact with the baby and comfort measures, with neonatology, and allowing religious and cultural practices.

Conclusions

Perinatal grief support represents the specialized and multidisciplinary care intended for families going through a pregnancy in which the fetus has a condition that potentially leads to its death, either during the fetal period, childbirth or in the neonatal period. This model considers ethical principles, and the psychological and physical needs of the parents with sensitivity and respect.

