

EP05.36: Transitional approach to fetuses with life-limiting diagnoses in the prenatal palliative care program

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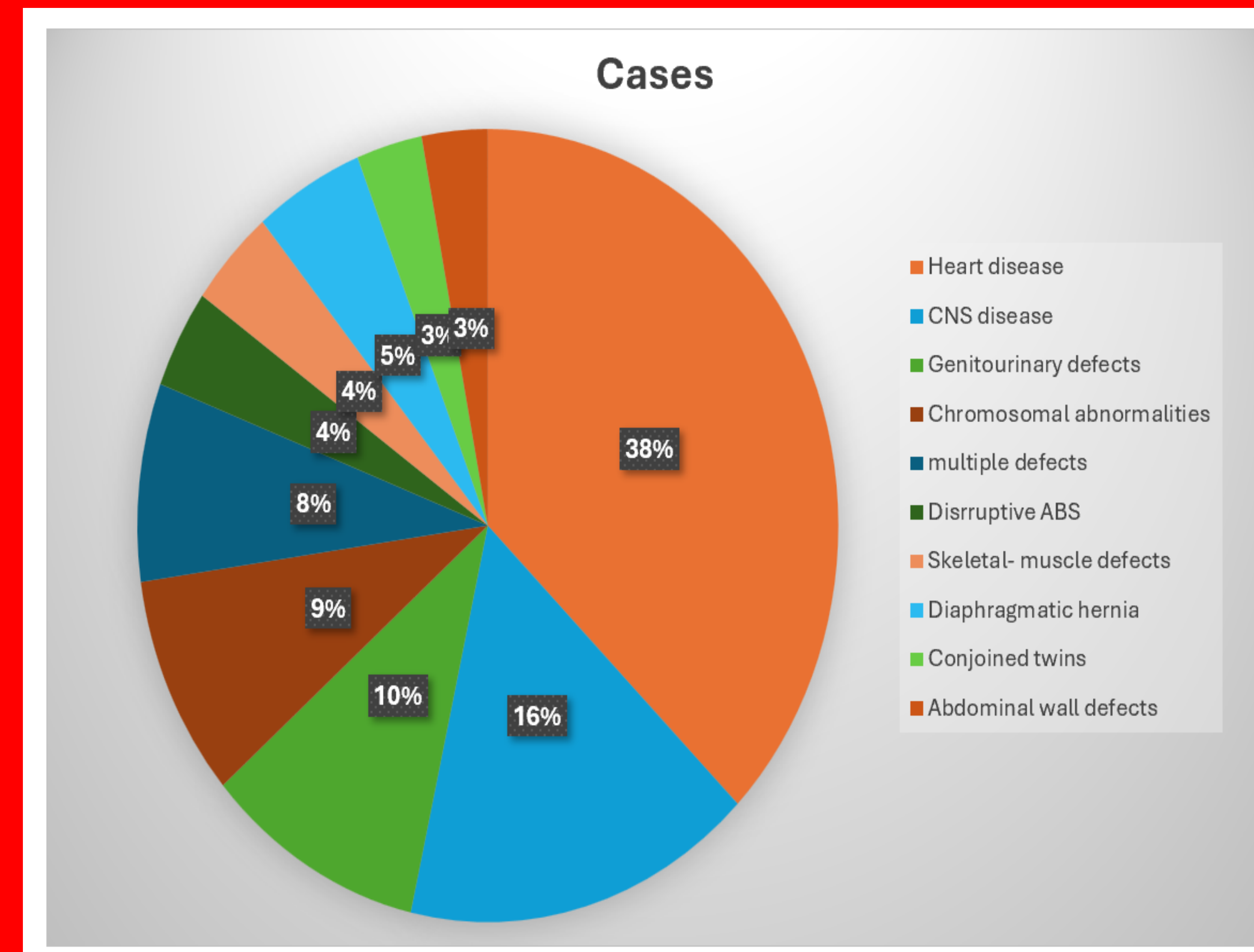
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Objectives: To outline the transitional approach for fetuses diagnosed with a life-limiting condition who have joined the prenatal palliative care program at the National Institute of Health's Department of Fetal Medicine.

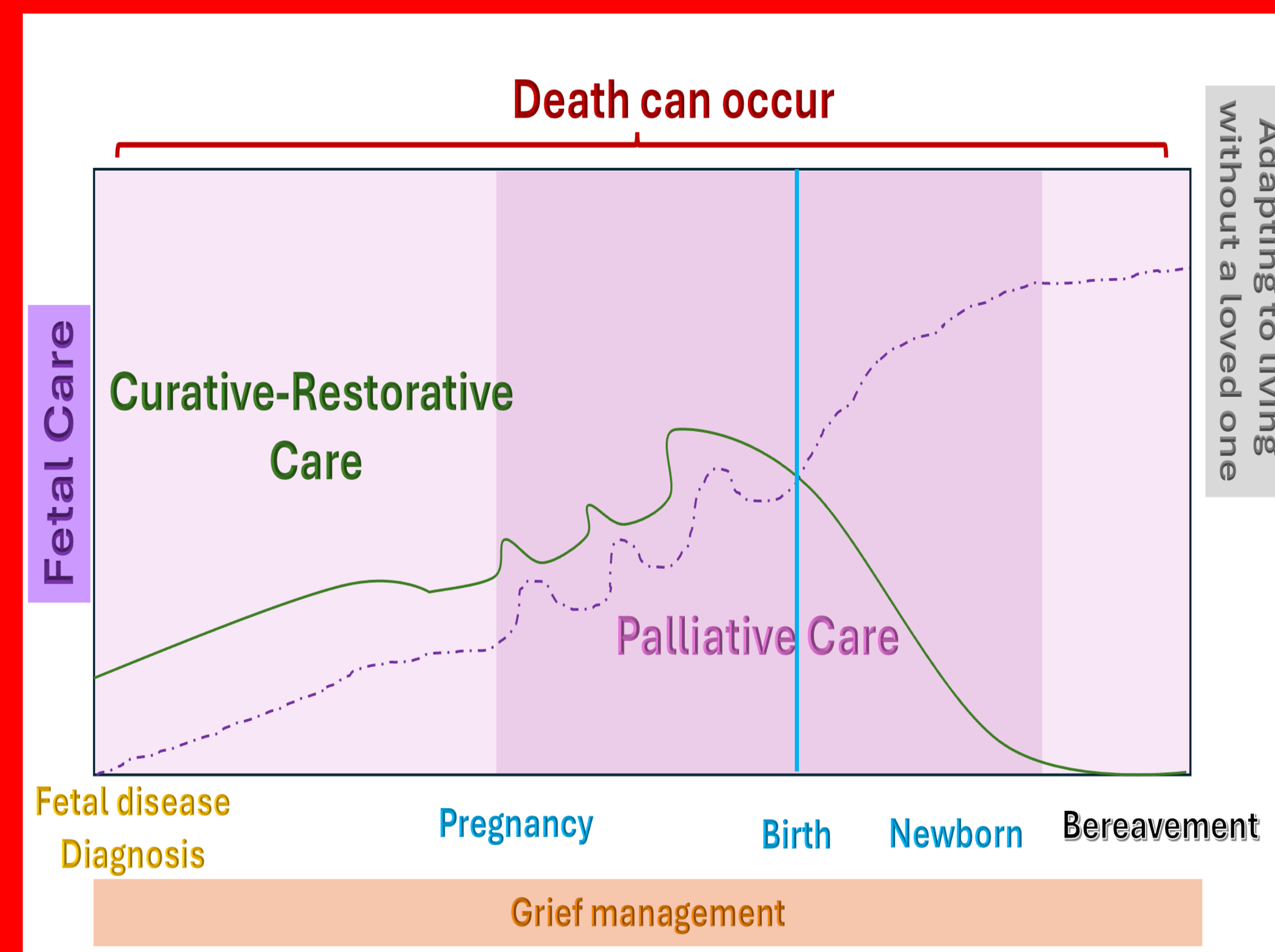
Methods: Observational and descriptive research carried out at a National Institute. Included patients who entered the palliative care program between January 2018, and June 2024. The data collected encompassed demographic information, prenatal diagnoses, the plans established by the interdisciplinary team, details regarding the resolution of pregnancy, duration of hospital stay, type of discharge, and postnatal follow-up.

Conclusions: In cases of life-limiting fetal pathology, a transitional approach is essential to ensure the continuity of palliative care comprehensively from the prenatal to the postnatal stage and to continue supporting the mother, father, and/or family until a dignified death and the best way to grieve.

Results: Over seven years, a total of 2,459 patients were evaluated, of which 220 met the inclusion criteria. All participants entered the palliative care program prenatally after being diagnosed with a life-limiting condition. The average maternal age was 29. Most patients entered the palliative care program during the third trimester of pregnancy. The distribution of fetal pathologies among the cases was as follows: 82 cases had heart disease (37%) 35 cases had central nervous system defects (16%) 22 cases had genitourinary defects (10%) 20 cases had chromosomal abnormalities (9%) All cases were presented in interdisciplinary sessions and underwent genetic assessments. Psychological support was provided, and families signed informed consent forms. Subsequently, they attended the neonatal palliative care clinic, and there were no disputes regarding admission to the clinic following birth. The average age at resolution was 36.2 weeks. Six cases experienced late fetal death. A total of 176 patients were discharged due to death; the remaining patients were discharged home.



Reasons for admission to the perinatal palliative care clinic. Department of Fetal Medicine INPer



Transitional approach as pillars of prenatal palliative care