

Introduction

Uptake of perinatal post-mortem (PM) has remained static over the last 2 decades, with only half of those offered consenting to the procedure. Standard consent practice for perinatal PM involves provision of written information. In other specialities, use of digital health innovations to facilitate consent for clinical procedures has demonstrated a positive effect on patient understanding when compared to written information. Our objective was to obtain quantitative and qualitative feedback following introduction of an interactive digital intervention designed to facilitate patient comprehension and improve perinatal PM uptake.

Methods

This was a retrospective study including all individuals offered a PM after a pregnancy loss (July 21'-Aug. 22'). Informed consent for PM was obtained through standard consent procedure (discussion with a healthcare professional and written information), or with the additional use of an interactive digital tool. Patient comprehension and satisfaction with the digital intervention was assessed using an online/telephone questionnaire.

Results

96 women met the inclusion criteria of which 49 (51.0%) were offered use of the interactive digital intervention. Of this cohort, the intervention was declined by 2 women having already decided not to proceed with a PM. Uptake of a PM was significantly higher amongst those who were offered the digital intervention (67.3% vs 34%, $p<0.001$). There were no significant differences between the two groups in maternal/pregnancy characteristics. A feedback questionnaire was completed by 12 (24.4%). Prior to using the digital intervention, 66.7% of the responders felt that they would consent to a PM, 16.7% were undecided and 16.7% would decline. Overall, 91.7% agreed that the digital intervention helped to inform them of the different methods of PM and 66.7% found the videos and illustrations to be helpful in their decision-making. In those who consented, use of the digital intervention directly impacted upon this decision in 58.3% of responders, including the two participants who were originally undecided. (Table 1)

Conclusion

Rates of perinatal PM uptake were significantly higher amongst those exposed to an interactive digital intervention.

Table 1: Quantitative data obtained from 12 participants on use of the digital intervention.	Total cohort (n=12)
1. Prior to using the webpage, how would you describe your feelings towards a PM?	n (%)
- I felt I would likely consent for a post-mortem	8 (66.7)
- I felt I would likely not consent for a post-mortem	2 (16.7)
- I felt unsure as to whether I would consent for a post-mortem	2 (16.7)
2. I felt well informed by the webpage about the different types of PM available.	
Strongly agree	6 (50.0)
- Agree	5 (41.7)
- Neither agree nor disagree	1 (8.3)
- Disagree	0
3. I felt the illustrations and video were useful in understanding what PM involved.	
- Strongly agree	5 (41.7)
- Agree	3 (25.0)
- Neither agree nor disagree	4 (33.3)
- Disagree	0
4. I felt that the webpage was both easy to access and navigate.	
- Strongly agree	6 (50.0)
- Agree	3 (25.0)
- Neither agree nor disagree	3 (25.0)
- Disagree	0
5. Overall, I felt that the webpage aided my decision to proceed with a PM.	
- Strongly agree	0
- Agree	7 (58.3)
- Neither agree nor disagree	3 (25.0)
- Disagree	0
- Not applicable, I have decided not to proceed with a post-mortem	2 (16.7)