When a baby dies before birth

Introduction
Everyone’s experience is individual and every circumstance different, everybody reacts differently, and there is no right or wrong way.

We hope this booklet will offer you some guidance and support. All members of staff are available to answer your questions. Please do not hesitate to ask.

We know it is a very difficult time and throughout your stay with us your husband, a partner, friend or family member can be with you.

This booklet covers the time when a baby is known to have died in the uterus (womb) or if a baby is born with no signs of life after 24 weeks of pregnancy.

When a baby’s death has been confirmed by ultrasound scan, it may come as a total shock or confirm what you had been thinking. We understand everyone’s reaction is very individual. The staff will allow you time to come to terms with what has happened.

If you are medically well you may want to go home and come back to discuss a plan of care at an arranged time. We will give you a 24 hour, seven days a week, number to contact for advice during this time.

The days following your bereavement are difficult. Unfortunately this is a time when a number of decisions have to be made and dealt with. This can prove confusing and overwhelming, so avoid making hurried decisions. Take time to talk to each other, family and professionals before deciding what options you prefer.

If you need to be induced
If your labour has not started spontaneously, we will offer you medication to encourage it to begin. A tablet called Mifepristone will be offered, which allows the uterus (womb) to become more sensitive to other medication we use when you are admitted to hospital.

If you feel sick, you will be asked to take one 5mg tablet of Stemetil (Prochlorperazine) every eight hours. We will give you some of these tablets to take home. If you are sick within two hours of taking Mifepristone please contact the number below – it may not have had time to be absorbed and may need another dose. After taking the tablet you may be able to go home and return 48 hours later.
You may experience some period or contracting type of discomfort or pain. You may take paracetamol, co-codamol or ibuprofen should you need to. (Please follow the manufacturers instructions.)

We have arranged for your return as below.

Date ______________________  Time _______

Place ______________________

Tel: 01206 74

Please contact us if you have any questions or concerns before your admission, and inform us if you have any signs of early labour.

We will ask consent to have some blood tests taken. They are to check your wellbeing and also if there is any indication as to why your baby has died. Some results may not be available until after you have left hospital. They will be discussed at your next appointment.

The length of time it takes to go into labour and deliver a baby varies. Be prepared to stay in hospital at least one night. We have a bereavement suite which may be available. If not you will have a single room. Your partner or supporter is welcome to stay with you. We will offer you as much privacy as possible.

Going into labour and giving birth to your baby

When you are admitted, the midwife will discuss the process of induction with you using prostaglandins, drugs which soften your cervix (neck of the womb) and help your uterus (womb) contract.

Your midwife will discuss the different options available for pain relief.

Occasionally the placenta (afterbirth) may not deliver on its own. It may be necessary to take you to the operating theatre to remove it under anaesthetic (general, spinal or epidural).

There may be questions that come to mind. For example:

• would you like to see and hold your baby straight away?
• would you like to hold your baby wrapped in a blanket?
• do you have your own blanket or clothing that you would like your baby wrapped or dressed in?

Please feel free to discuss these issues.
Your baby may be unexpectedly stillborn so you may not have had time to consider anything prior to delivery. You will be given as much time as you need and staff will discuss various options with you.

**After your baby is delivered**
Please feel able to ask anything (however small it may seem) so we can support you through this difficult time. Below are some suggestions you may wish to consider.

**Seeing and holding your baby**
The thought of seeing your baby may seem frightening but the midwives will support you. You may wish to bathe and dress your baby or you may ask the midwife to carry this out for you. If you would like your baby dressed we have a selection of clothes or you may have brought some in with you. Some parents would rather wrap their baby in a blanket. Remember: the choice is yours.

**Photographs and mementoes**
We can take photographs of your baby for you. These are taken using a digital camera and printer (we do not electronically store any images.) You will be given the memory card. If you do not wish to have the photographs they will be kept in your hospital file in case you may wish to see them at a later date. There is a camera for your use but feel free to use your own.

Staff will offer to take footprints, handprints and a lock of your baby’s hair where possible. You may also like to have the cot namecard and an identity label to keep. A memory box will be offered for their safekeeping.

**Blessing your baby**
You may wish to have your baby named and blessed by a hospital chaplain which will be organised by the midwife. This blessing can occur either with or without you being present. The chaplain will give you a card as a record of this. If you wish to involve your own minister for support for you and your family please discuss this with your midwife.

**Examination of your baby**
Your doctor or midwife will discuss this with you. A post mortem examination may enable the doctors to have more understanding about why your baby died and help with planning for the future. You will receive an information booklet written for parents regarding these procedures to assist in your decision making.

Post mortem examinations are carried out by specialist perinatal pathologists at Addenbrookes Hospital, Cambridge. Your baby would be transferred to Cambridge and returned to Colchester General Hospital following the post mortem examination. The results usually take 6-8 weeks.
Taking your baby home
Some parents may decide they would like to take their baby home awhile. This is an individual decision. The midwife can advise you regarding the specific care needed for your baby.

Registration of the birth your baby
It is a legal requirement for you to register the birth. A Stillbirth Certificate will be issued to you signed by a midwife or doctor. You will need to register your baby within six weeks of birth. Registration is by appointment by phoning 0845 603 7632. If, when phoning, you inform them that your baby has been stillborn they will try to ensure you are seen promptly.

If you are married, either of you can register your baby. If you are not married, both of you need to attend if your partner wishes to be named as the father. using his surname.

The registrar will give you documentation which needs to be presented to either the hospital bereavement office or your chosen funeral director. This allows your baby to be collected for the funeral service.

Arranging your baby's funeral
There are a number of choices available. You may need time to think and explore what is the right option for you, and may need to leave hospital before making a decision.

The hospital will offer to arrange a service of either cremation in the crematorium or at the graveside for a burial, using the contracted hospital funeral directors and the hospital chaplaincy team. There is not a charge for this service. If you were to request any extra services there may be a fee to pay. You will have an opportunity to discuss these arrangements with the funeral directors when they contact you with the details.

You can arrange everything privately by making contact with a funeral director of your choice. Some companies keep cost to a minimum or do not charge for a baby.

If you are on a low income you may be able to get help towards funeral payment from the Social Fund. You can obtain a form from a Social Security Office or Jobcentre Plus. Your funeral director can advise you.

You need to decide on either a cremation or burial. Locally, arrangements are as follows:
• Colchester Crematorium on Mersea Road, Colchester, ashes can be scattered in Jemima’s Corner or released to you.
• Weeley Crematorium in Tendring, ashes can be scattered in the Garden of the Month or released to you.

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Burial can be in Colchester, Clacton, Kirby Cross, Dovercourt, Walton-on-the-Naze or Halstead cemeteries. You may want to explore church yards or other alternatives – please ask a funeral director or your own minister. We will ask you to sign forms confirming your wishes and ensure the funeral directors make the correct arrangements.

**Your care after discharge from hospital**

We will inform your GP and community midwives so they will be aware of you returning home after delivery.

We encourage you to have a visit from your community midwife who will check your physical wellbeing and give you an opportunity to talk through your feelings.

You will be offered an appointment to see a consultant in 6-8 weeks’ time. This will be to discuss any test results, to talk through events of your pregnancy and, however hard it is to think of the future, discuss a plan if you were to, or want to, have another pregnancy.

It is a good idea to write down any questions that come to mind over the forthcoming weeks and please bring them with you to the appointment, as coming back to the hospital is often difficult and you may find it hard to concentrate. Your consultant may offer to send you a written copy of your discussion with him or her, or you can request this.

It is important that you contact your GP or midwife if you experience any of the following:

- prolonged heavy bleeding with clots.
- vaginal discharge that looks or smells unpleasant
- you have a raised temperature
- pain when passing urine
- feeling generally unwell.

Your body knows that it has delivered a baby, there are many hormonal changes, and for most women the natural consequence of this is that their breasts produce milk.

These following suggestions may help ease the breast pain or discomfort which should settle after 48-72 hours:

- wear a good supporting bra
- apply cold compresses
- take painkillers like paracetamol or ibuprofen, or both. (It is important to follow the manufacturers’ instructions.)
There may be the opportunity to suppress your lactation (milk supply) by taking medication. This is not suitable for all women, eg if there are concerns with your blood pressure being raised. The doctor or midwife can discuss this with you.

**Local contact numbers**

Community Midwives  
Colchester 01206 742473  
Clacton 01255 429690  
Harwich 01255 503700

Bereavement Midwife 07803 187888  
Please leave a message or text and she will respond as soon as possible.

Lexden Ward 01206 742032  
(24 hours – if you have concerns that need immediate attention)

**Useful organisations**

Stillbirth and Neonatal Death Society (SANDS)  
28 Portland Place  
London  
W1B 1LY  
Tel: 020 7436 5881 (helpline)  
www.uk-sands.org

Twins and Multiple Births Association Bereavement Support Group (TAMBA BSG)  
Tel: 0800 138 0509 (helpline)  
www.tamba.org.uk/bereavement

Winston’s Wish  
Help and support for bereaved families and professionals  
Tel: 0845 203 0405  
www.winstonswish.org.uk

Aching Arms  
Provides support and information to anyone affected by pregnancy loss  
Tel: 07876 504042

Child Bereavement UK  
Supports families and educates professionals when a baby or child dies or is dying, or when a child is facing bereavement.  
Tel: 01494 568900  
www.childbereavementuk.org