

A Summary of “Fetal Survival in Second-Trimester Termination of Pregnancy Without Feticide” by The American College of Obstetricians and Gynecologists

The goal of this study was to determine the rate of live birth, and the duration of life, for survivors of pregnancy termination without feticide in the second trimester. The Abortion Survivors Network created the following summary of this research.

Methods: This study retrospectively analyzed 241 abortions performed at a single center in Europe from February 2003 to May 2017. All pregnancy terminations were done between 20 and 24 weeks gestation and performed without feticide (no steps were taken to ensure the death of the infant before induction of labor). All fetuses had severe anomalies, which seems to have contributed to the parents’ decisions the decline feticide. Labor was induced with mifepristone and misoprostol or with gemeprost. Fetal well-being was not monitored during labor induction. A multivariate binary regression model helped evaluate various factors potentially related to live birth.

Results: Live birth occurred in 50.6% of cases at this facility or 122 times out of 241 terminations (95% CI 44.4–56.8). The median survival time was 32 minutes, with a range from 1–267 minutes. Gestational age at labor induction and the presence of specific fetal anomalies affected the likelihood of live birth. Later gestations increased the chance of live birth and fetal anomalies such as skeletal, cerebral, renal, or multiple fetal anomalies decreased the chance of live birth.

Conclusion: Labor induction terminations of infants with fetal anomalies without feticide in the second trimester are likely to lead to live births. However, without life-sustaining care, these infants are unlikely to live beyond a few hours.