Peer Reviewed

Congress Moves to Reduce Stillbirths

Josie Cooper

The Alliance for Patient Access (allianceforpatientaccess.org), founded in 2006, is a national network of physicians dedicated to ensuring patient access to approved therapies and appropriate clinical care. AfPA accomplishes this mission by recruiting, training and mobilizing policy-minded physicians to be effective advocates for patient access. AfPA is organized as a non-profit 501(c)(4) corporation and headed by an independent board of directors. Its physician leadership is supported by policy advocacy management and public affairs consultants. In 2012, AfPA established the Institute for Patient Access (IfPA), a related 501(c)(3) non-profit corporation. In keeping with its mission to promote a better understanding of the benefits of the physician-patient relationship in the provision of quality healthcare, IfPA sponsors policy research and educational programming.

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A bipartisan group of senators recommitted (2) to prevent stillbirths in September 2023 when the Maternal and Child Health Stillbirth Prevention Act passed the Senate. (3) If the legislation passes the House of Representatives, it would fund research on stillbirth prevention. Previously introduced bills, such as the Stillbirth Health Improvement and Education (SHINE) for Autumn Act, have attempted to improve data collection and increase education about stillbirth. (4)

Stillbirth is defined as the death of a fetus after 20 weeks gestation. Though progress has been slow, congressional leaders seem interested in addressing the issue. (5)

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Australia's Approach Reduced Tragic Outcomes

Congress might look to Australia's approach as a template.

The commonwealth implemented a $40 million national stillbirth plan in 2020, uniting the medical and policy communities to address the issue. The plan's measures encompass research, education, public awareness, and support services for stillbirth. Since implementing the plan, Australia has reduced stillbirths more than twice as quickly as the U.S. has.

More than one in four such deaths (6) may be preventable, and in the final weeks of pregnancy, that number rises still higher. Prevention requires clinical research, patient support, and active programming, all of which take the investment of national resources.

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Disparities Reflect Lack of Access, Education

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Experiencing a stillbirth brings complications of its own, particu-

larly to the grieving mother's physical and mental health.

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The Centers for Disease Control tracks stillbirths (7) and develops recommendations (8)for healthcare providers, but most of that information does not reach patients who need it.

A national plan to coordinate education strategies and research into the causes of stillbirth would help bridge that gap.

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