Intrauterine pregnancy of uncertain viability: qualitative & quantitative analysis of knowledge of prognosis and information offered to women

K. Lawson¹, C. Bottomley¹, T. Bourne²

¹Chelsea and Westminster Hospital NHS Foundation Trust, London ²Tommys’ National Centre for Miscarriage Research, Imperial College, London, UK

Introduction

10-28% of women seen in the early pregnancy assessment unit (EPAU) are diagnosed with an intrauterine pregnancy of uncertain viability (IPUV). Studies have shown significantly heightened anxiety levels where uncertainty in early pregnancy exists and it has been suggested that healthcare professionals (HCP) underestimate the psychological impact upon women and their partners.

Objective

To assess variation in knowledge and information provided by the HCP to the patient, where initial early ultrasound demonstrates an IPUV around 7 weeks’ gestation.

Methods

A semi-structured questionnaire was issued to HCP’s who regularly perform early pregnancy ultrasound at three inner city London early pregnancy units. Simulated ultrasound scenarios were: 1) empty sac <25mm diameter, 2) sac and visible yolk sac but no embryo and 3) embryo <7mm but no heartbeat.

Results

- Estimates of ongoing viability beyond 12/40 were 10-80% (median 50%) - 25% HCP were “unsure”
- 33% discuss potential risk of miscarriage
- 19% would offer reassurance “could be normal”
- Follow-up (FU) intervals varied (7-14d)
- 71% HCP did not use a single standard interval

Variance amongst HCP exists in knowledge of prognosis and information provided with the potential for inconsistent and conflicting information and FU. The results support a need for more objective prognostic information in early pregnancy where uncertainty and waiting times are inevitable.

Conclusion

Yes 78%
No 22%

Is offering a personalised prediction of ongoing viability likely to be of benefit?

To the woman

Yes 70%
No 30%

For the HCP

“too early to tell” and “pregnancy in the right place” most commonly reported explanations

Who took part?

Sonographers Nurses Doctors

7 5 15

To the woman

For the HCP