

## Stillbirths: The Global Challenge

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### Introduction

Stillbirths cause considerable distress to parents and healthcare workers. Parents may suffer life-long depressive disorders. According to the WHO, a stillbirth is a baby born without showing signs of life after 28 completed weeks of gestation and weighing  $\geq 500$ g. Stillbirths contribute significantly to perinatal deaths. Reducing stillbirths remains a worrying global challenge.

Globally, annually a staggering and distressing 2.6 million stillbirths occur, with 98% occurring in developing countries [1]. Stillbirth rates remain 10 times higher in low-middle income countries than in high income countries [2]. The low proportion of stillbirths in high income countries suggest that they are largely preventable [3]. These preventable deaths are astonishingly so huge that the world cannot continue to turn a blind eye. Every clinician caring for pregnant mothers must take note of these figures and change their practice to focus on preventing stillbirths. As the evidence from high income countries suggests, they are indeed preventable.

### Discussion

Stillbirths may occur antenatally or intrapartum. The causes of stillbirths can be unexplained or from medical or obstetric factors [4]. The debt burden, low financial and human resources especially in low resourced countries, contributes to the ongoing preventable loss of fetal lives.

Global concerns remain on the issue of stillbirths with the aim to end all preventable stillbirths by the year 2030 [5,6]. Constantly writing about this subject will keep it on the global agenda so that it receives the priority and attention that it deserves.

Stillbirths may occur due to unknown causes, fetal, maternal medical disorders or obstetric causes. Stillbirths may occur in the community or in institutions. Finding out exactly where the problem lies, stillbirths can be appropriately tackled. Solutions can be tailored for changes in the behaviour of the community or health personnel at the health institutions. If low resourced countries could be helped financially to improve on the accessibility and affordability of healthcare facilities, reduction of these huge stillbirth figures.

### Conclusion

The WHO, UN bodies, financial institutions, local governments and compassionate multinational donors must work together to end all preventable stillbirths by the year 2030. Rigorous efforts at dedicated local, national, regional and international levels can be harnessed to save precious lives. Counting every stillbirth and taking concrete steps to improve and prevent stillbirths from happening will help reduce these appalling statistics. The world must turn the corner in this regard.

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