

Keeping Women Informed Following Pregnancy Termination for Fetal Abnormality

Dear Editor,

I read the article “ Termination of pregnancy for fetal anomalies: A qualitative study of the informational and educational needs of women” by Kamranpour *et al.*^[1] with great interest but also with dismay, particularly about the weight given to these women’s informational needs. I could not help but ponder, was this gap related to the time constraint, was information shared arbitrarily determined, or was it related to a degree of familiarity where healthcare professionals treated such needs as the least priority?

Many parents, understandably, do not want to consider the risk of prenatal abnormalities before giving birth.^[2] It is plausible that anticipating grief is painful. For this reason alone, such failure to help the women understand the journey during and after termination is unwarranted and hurtful. Not only this timely paper shares a first-hand account of a woman’s reflection on the reality of processing pregnancy termination, but it also serves as a wake-up call to healthcare professionals to refocus tangible and coherent strategies on what matters most to these women: creating a calm, empathetic, and ethically sensitive environment that encourages women to engage in their decision-making while also ensuring that they have a thorough understanding of the procedure throughout, particularly when it comes to discussing future pregnancies. Healthcare professionals are best positioned to keep the women well-informed with balanced and sensible information about what will happen. It is, therefore, crucial to address the reported results^[3] that health professionals lacked knowledge of the women’s long-term coping processes, which is consistent with women’s reports of a lack of aftercare after termination.

Meanwhile, it is also critical to allow the women’s partners to express any concerns as they are faced with difficult decisions.^[4] This “enhanced” psychological support could be one of the most fundamental measures in bridging the salient gaps of information giving. In essence, it is troubling to expect women to merely move on from their “termination” experience and manage their vulnerable situation. Furthermore, keeping them in the dark will only make this life-changing experience much more traumatic. As importantly, while it is essential to develop culturally unique approaches to care, it is deeply significant to adopt a concerted and organized approach to addressing such informational and educational needs as they occur.

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Conflicts of interest

Nothing to declare.

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