



**Hong Kong College of Obstetricians and Gynaecologists Press Statement
to clarify misunderstanding on a case of maternal death caused by amniotic fluid embolism**

(2 Nov, 2021) Following a recent coroner case of maternal death caused by amniotic fluid embolism, the Hong Kong College of Obstetricians and Gynaecologists was aware of the concerns expressed by some pregnant patients about the safety of induction of labour and vacuum extraction, and the fears that induction of labour or vacuum extraction may cause amniotic fluid embolism. The Hong Kong College of Obstetricians and Gynaecologists would like to make the following statements to clarify any misunderstanding or unnecessary concerns:-

- Amniotic fluid embolism is a life-threatening, acute and unexpected birth complication that can affect both the mother and the baby. If such complication occurs, it may cause sudden cardiac arrest and coagulopathy (bleeding disorder) before, during or soon after birth. However, the chance of developing such complication is very low. Some epidemiological studies have suggested that the chance of amniotic fluid embolism is about 1 to 8 in 100,000 pregnant women.
- Currently, the patho-mechanism of amniotic fluid embolism remains unclear. It is possible that such complication is initiated by the entrance of amniotic fluid or fetal squamous cells into the maternal circulation. Therefore, it can occur both in natural birth and assisted birth.
- Some epidemiological studies have suggested that the chance of amniotic fluid embolism may increase slightly with certain medical procedures, such as induction of labour, vacuum or forceps delivery, and Caesarean section. However, these procedures are regarded as weak risk factors only, and they are generally not regarded as the direct causes of amniotic fluid embolism.
- Induction of labour is the use of medications to stimulate uterine contractions during pregnancy before labour begins on its own to achieve a vaginal birth. It is a common and safe obstetric practice. Amniotic fluid embolism after induction of labour is still rare.
- Induction of labour is indicated when the continuation of pregnancy is considered more risky to the mother or the baby than the procedure itself. For instance, when a mother is developing pre-eclampsia, or when the baby is showing a suspicious fetal heart rate pattern or there is a prolonged ruptured membranes, early delivery by induction of labour is medically indicated.
- Similarly, vacuum extraction, a method to assist delivery of a baby using a vacuum device, is a common and safe obstetric practice although it may increase the chance of amniotic fluid embolism slightly. When a prolonged second stage of labour poses more danger to the mother or the baby than the procedure itself, vacuum extraction is medically indicated to hasten the delivery.
- All medical interventions carry benefits and risks. Decisions for any obstetric intervention, including induction of labour and vacuum extraction, should be made when the benefits of these procedures outweigh their risks. Failure to adopt appropriate obstetric intervention may significantly increase the risks of harm to both the mother and the baby.

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