Workshop Mindfetalness

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Mindfetalness

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A feeling that something was not right before they were told that their baby had died in utero. Feelings of worry and of premonition were difficult to convey to other including health care professionals.

The staircase of insight

Not feeling any contact with the baby
Worry

Something is wrong
Not understanding the unbelievable
Wanting to be told

Malm M-C, Lindgren H, Rådestad I. Losing contact with one’s unborn baby – mothers’ experiences prior to receiving news that their baby has died in utero. *Omega* 2010-2011;62:353-367.
Today´s question

What can we do to strengthening women's ability to be aware of fetal movements?

Further, should we support structured observation of fetal movements?
Mindfetalness: how to do it

Daily 15 minutes
Baby awake
Left side

Focus:
Strength
Character
Frequency (not counting)

Mindfetalness vs. Count To Ten

40 women gestational week 37+

Uncomplicated, singleton pregnancy

Count To Ten vs. Mindfetalness

A midwife observed

Mindfetalness vs. Count To Ten

The time elapsed for the women to count 10 movements: 1.5 minute - 21 minutes.

39 of 40 (98%) stated one or both of the methods were suitable for them, one woman indicated neither method was suitable for her.

Of the 20 women who preferred one of the methods: 15 (75%) preferred Mindfetalness and 5 (25%) preferred Count To Ten.
Mindfetalness vs. Count To Ten

In total 80 self-assessment sessions

"During the assessment I felt":
  - Calm
  - Relaxed
  - Mentally present
  - Focused

No significant difference was found between the two methods
Structured observation of fetal movements

Positive experience

In contact with their unborn baby

Safe and reassuring

A moment for communication with the unborn baby
Pilot study – Mindfetalness in antenatal care

94 of 105 (90%) positive response

”I feel that I build a relation to my baby”
”I get to know my baby better”
”A good support and useful tool”
”I feel safe and are not so worried any more”

The compliance to the method was high

Pilot study – Mindfetalness in antenatal care

11 of 105 (10%) negative response

- Lack of time (n=6),
- Has no need (n=3)
- Do not like structured methods (n=1)
- Creates more concerns (n=1)
Midwives positive to Mindfetalness

“The woman gets to know her unborn baby better.”

“It is a good method for stressed women so they take time on daily basis to their unborn baby.”

“I have become better to talk about fetal movements with the woman and in a more structured way now.”
Study design, material and methods

40 000 women, gestational week 25+, randomly allocated to guidance in practicing *Mindfetalness* by a midwife or to routine care.

Prevalence of the women with an unscheduled visit to an obstetric clinic for worry about fetal movements.

Apgar score <7 at five minutes (stillbirth=0).

Swedish Medical Birth Register
RCT Stockholm county – antenatal clinics
Today´s question

What can we do to strengthening women's ability to be aware of fetal movements?

Further, should we support structured observation of fetal movements?
Decreased and weaker fetal movements a risk!

The fetal movement pattern unique for each baby

The strength of the movements important

The woman the best person to evaluate the movements
Mindfetalness may be described as an awareness of the fitness of the unborn baby, a mindfulness based focus on fetal movements. The mother-to-be is present in the moment taking note of both strength and frequency (the quality of the unborn baby’s movements). Mindfetalness can also be regarded as a sense of contact that the mother has with her unborn baby.
Mindfetalness

Mindfetalness is directed inwards in order to strengthen the feeling of motherhood during pregnancy. Mindfetalness can also give health-care professionals better tools for information and communication about fetal movements in clinical practice.