

Stillbirth – how the placenta tells tales

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SUMMARY

The placenta is a temporary organ that develops solely during pregnancy, functioning as a vital interface between the mother and fetus. In addition to its essential role in physiological exchange, it acts as a biological record, reflecting the intricate interactions and events in the intrauterine environment. Despite its significance, placental examination is still underutilised in clinical practice due to various limitations.

However, evaluating the placenta is crucial when addressing stillbirth, and this assessment is carried out with or without a perinatal autopsy. Since placental morphology changes throughout gestation, it can reflect pathological alterations in response to various intrauterine events. These may include perfusion abnormalities, inflammatory lesions, and conditions with a recurrence risk. Some placental lesions develop gradually, while others may differ in severity depending on the type and duration of the insult. A thorough examination of the placenta can yield critical insights into the causes of perinatal morbidity and mortality and may also reveal maternal conditions, both known and previously unrecognised.

Hence, the placenta serves as an essential diagnostic resource, revealing pathological evidence in stillbirth cases and holding clinical significance in perinatal care. This information is invaluable for guiding clinical management and counselling in future pregnancies.