Awareness of fetal movements and care package to reduce fetal mortality (AFFIRM): a plain English summary of a cost-effectiveness analysis

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Sometimes before a baby is stillborn the mother notices a change in the baby's movements. The baby might move less or there might be a change in the way the baby moves. If mothers and healthcare professionals are more aware of this and act upon it, it may be possible to prevent a stillbirth.

In this study (which was called AFFIRM), pregnant women were given a leaflet about noticing their baby's movements and when to seek medical help. Healthcare professionals received training in what to do when women told them about their baby's changed movements. They were told to send the woman for an ultrasound scan if one had not been done recently. The scan can show if a baby is growing as expected. If a woman was over 37 weeks pregnant and had more than one episode where her baby's movements changed, she was offered a drug which would cause labour to start. This is called induction. Altogether these changes are known as the AFFIRM care package. The AFFIRM study compared what had been happening in hospitals before the care package was put in place, with what happened afterwards.

After the AFFIRM care package was introduced, more pregnant women went to hospital because they had noticed a change in their baby's movements. As a result, more ultrasound scans were done, and more women had their labour induced. It also looks like there may have been fewer stillbirths afterwards. On average, there were 5 fewer stillbirths for every 10,000 births, although it is possible that this happened by chance and the care package could have had a better or worse effect than this.

There is only a limited amount of money in the NHS budget. This means that someone needs to decide how this money should be spent. By spending money on one thing, it means that there is less or no money to spend on something else. It is important that these decisions are made fairly and based on good evidence. These choices are based on the number of people who will benefit and the size of the benefit. We also need to think about how much things cost and whether they are good value for money. If someone were deciding whether to roll out the AFFIRM care package across the NHS, they would need evidence about the costs and benefits. This was the aim of this research.

There are around 693,000 births each year in Great Britain. We calculated the cost of providing the AFFIRM care package for one year. This was based on the costs of leaflets, staff training, and extra hospital visits, scans, and labour inductions that happened in the study. The number of perinatal deaths that could be potentially prevented over a year was also estimated using data from the study. Perinatal deaths means both stillbirths and babies who die in the first week of their life.

The best estimate of how much it would cost to provide the AFFIRM care package for one year across Great Britain is just under £62 million. This may sound like a lot of money, but is only a fraction of the

total maternity budget for one year (around £2.5 billion). There are also costs for bereaved families when a baby dies. There are long-term health and financial impacts, which are important but have not been included in this analysis. The best estimate of the benefit of the AFFIRM care package is that it could prevent more than 320 perinatal deaths per year in Great Britain. This means that for AFFIRM, the estimated cost to prevent one perinatal death is around £190,000.

The people who decide what should be funded in the NHS don't have a predetermined amount of money that they consider to be "good value" to prevent perinatal deaths. However, for comparison the costs and benefits of AFFIRM are similar to the <u>Saving Babies Lives Care Bundle</u> which is already being promoted to all Trusts by NHS England.