

Clár Sláinte Náisiúnta do Mhná & do Naíonáin

Feidhmeannacht na Seirbhíse Sláinte, Aonad 7A, Áras Dargan, An Ceantar Theas, Baile Átha Cliath 8 T: 076 695 9991

National Women and Infants Health Programme

Health Service Executive, Unit 7A, The Dargan Building, Heuston South Quarter, Dublin 8 T: 076 695 9991

14th December 2020

Deputy Tóibín Dáil Éireann, Leinster House Dublin 2

PQ 40191/20 To ask the Minister for Health the number of miscarriages recorded in Ireland in each of the years 2015 to 2019; and if the number or rate of miscarriages is an outlier in terms of other EU or European countries.

PQ Ref 40192/20 To ask the Minister for Health if an investigation into the number of miscarriages in Ireland has taken place; if these investigations have taken place on a purely case by case basis; and if a review of underlying factors across a number of cases has taken place.

Dear Deputy Tóibín

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Questions, which you submitted to the Minister for Health for response. I have examined the matters raised and the following outlines the position.

Miscarriage is one of the most common complications in early pregnancy. It is clinically classified as either early miscarriage, within 13 weeks of gestation, or late miscarriage, between 13 and before 24 weeks completed weeks of pregnancy.

It is difficult to quantify the number of miscarriages in Ireland, or any other geographical location. Some miscarriages, particularly early miscarriages, will take place without any medical intervention or interaction with the healthcare system. In scenarios where miscarriages are recorded as part of a hospital's activity data, these will underestimate the true incidence both in terms of women not presenting to hospital for medical support and the hospital system recording activity in relation to women who are admitted for the clinical management of this miscarriage. Not all women will require to be admitted further to presenting to the hospital.

The Irish context is echoed at a European Level whereby the rates of miscarriage are not formally collected in a standardised and uniformed manner. An added complexity with regard to robust data collection is the differences across the countries and studies in distinguishing between miscarriage and stillbirth.

Recurrent miscarriages are a particularly challenging and upsetting event from the women's point of view. If an individual woman does suffer from recurrent miscarriages this may be investigated by the relevant maternity service in order to determine if an explanation and associated solution can be found. The management of women in these scenarios is done on a case by case basis and would not apply or be considered necessary in all cases where a miscarriage occurs.

I trust this clarifies the matter.

Yours sincerely,

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Mary-Jo Biggs, General Manager, National Women and Infants Health Programme