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14th October 2025

Deputy O'Flynn
Dáil Éireann,
Leinster House
Dublin 2

PQ 49168/25: To ask the Minister for Health to provide details of the number of cases which occurred in which a baby was born alive following a termination of pregnancy by gestational age, cause of termination, place of termination, and outcome, in each of the years 2023, 2024 and to date in 2025; and if she will make a statement on the matter.

PQ 49175/25: To ask the Minister for Health the role of parents in decision-making when a baby is born alive following a termination of pregnancy; and if she will make a statement on the matter.

PQ 49177/25: To ask the Minister for Health if her Department will publish an anonymised report on cases of babies born alive after terminations of pregnancy, including lessons learned to ensure that every child born alive is afforded full protection and care; and if she will make a statement on the matter.

Dear Deputy O'Flynn,

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 matter and the following outlines the position on the various areas and issues you raised.

PQ 49168/25 and PQ 49177/25

As per our previous response to you in **PQ 42659/25**, the Perinatal Mortality National Clinical Audit in Ireland - Annual Reports, published by the National Perinatal Epidemiology Centre (NPEC) include data on perinatal deaths following termination of pregnancy. The reports can be accessed on the [NPEC website](#). Our previous response to **PQ 42659/25** also provides you with the most recently published data.

PQ 49175/25

It is important to note that it is rare for a baby to be born with signs of life following a medical termination of pregnancy before 21 weeks +6 days gestation. It is important that parents receive supportive, empathetic, non-judgemental care and information with respect to decisions around termination of pregnancy. As per our response to PQ's **49347/25** and **49350/25**, where a major congenital anomaly is diagnosed antenatally, fetal medicine specialists provide support alongside

ongoing standard antenatal care for as long as the pregnancy continues. Bereavement support is offered throughout the pregnancy, following the baby's death, and beyond. Parents who choose termination of pregnancy are supported sensitively and given access to appropriate resources to help them through their grief.

Prior to any termination, informed consent is obtained. This includes counselling on the risks, benefits, potential side effects, and possible complications of the procedure. When a medical termination is planned after 21 weeks and 6 days of gestation, feticide may be performed beforehand to prevent any possibility of live birth. Parents must receive compassionate counselling both before and after the feticide procedure.

Plans regarding induction, labour, and delivery should be clearly documented and communicated to all members of the hospital team involved in the woman's care. Agreement should be reached on who will be present at the delivery. Parents are counselled in advance about the rare possibility of the baby being born with signs of life, particularly in later gestations or when feticide has not been performed. The care plan will include provision for perinatal palliative care, ensuring that, if a live birth occurs, appropriate and compassionate comfort care is provided.

I trust this clarifies the matter.

Yours sincerely,

Davinia O'Donnell, General Manager, National Women and Infants Health Programme