

Clinical Case

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Neonatal Unit HUG

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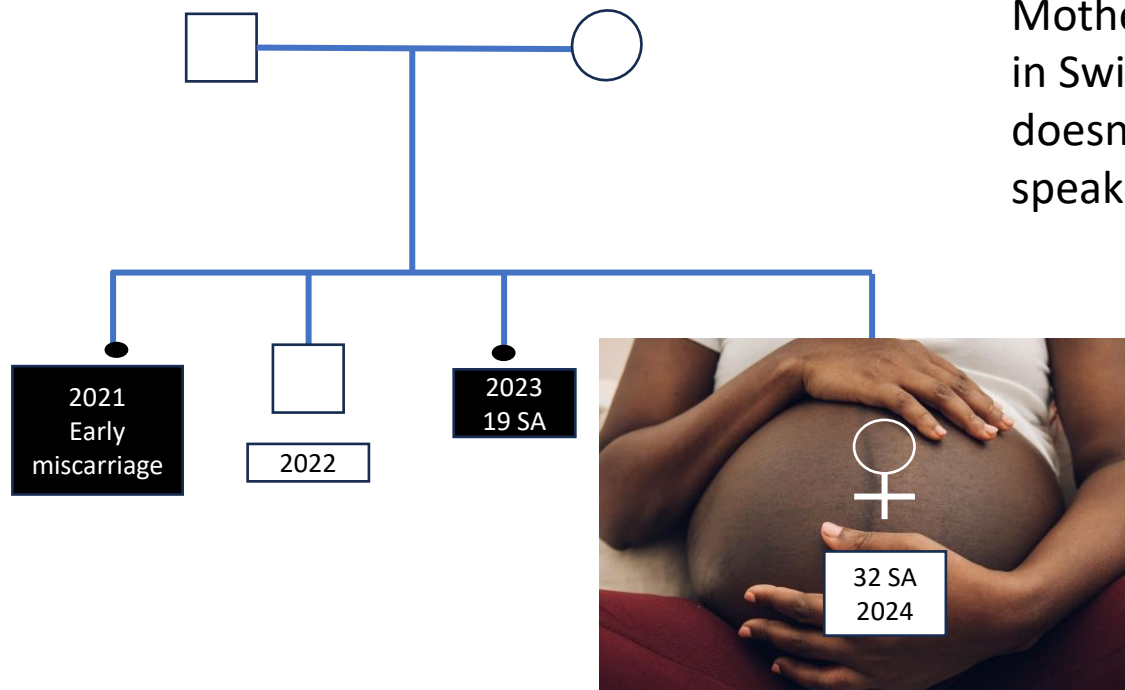
Context



SOMALIA/Muslim Religion

Father
in Switzerland for 7 years
peaks French,
understands < 100%

Mother
in Switzerland for 3 years
doesn't speak French only
speaks Somali



Admission of mother

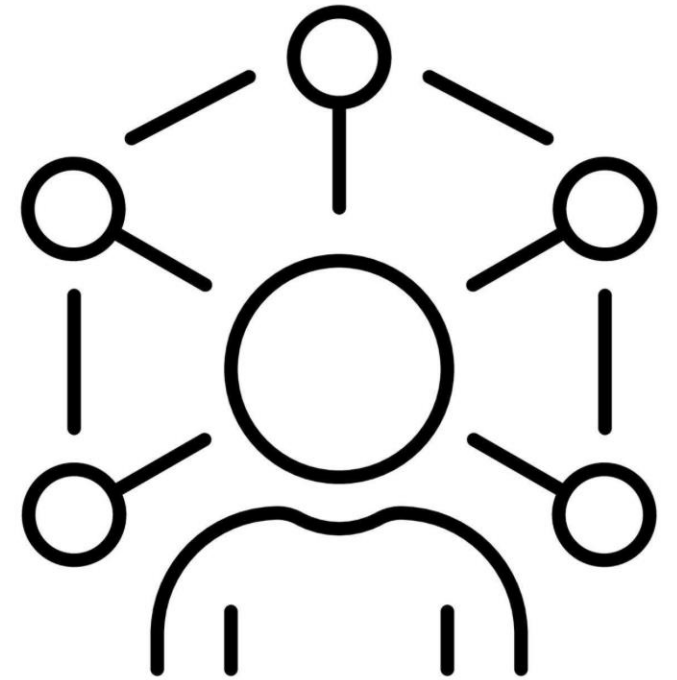
- 27-year-old, G1P4 at 32 1/7 weeks
- Reduced fetal movements since the morning ?

23h – maternity emergency ward

- CTG showing suspicion of abnormality
- hospitalization

Next morning – high-risk pregnancy ward

- CTG pathologic
- Emergency cesarean section ?
- No time for prenatal discussion (with neonatologist)



? = communication issues

At birth

- AGPAR 2/4/4
- Umbilical pHa 7.23/pHv 7.30
- Hb 57g/dl – lactate 7

no spontaneous breathing

- Easy bag & mask ventilation
- Intubation & mechanical ventilation

normal HR, low BP, small heart

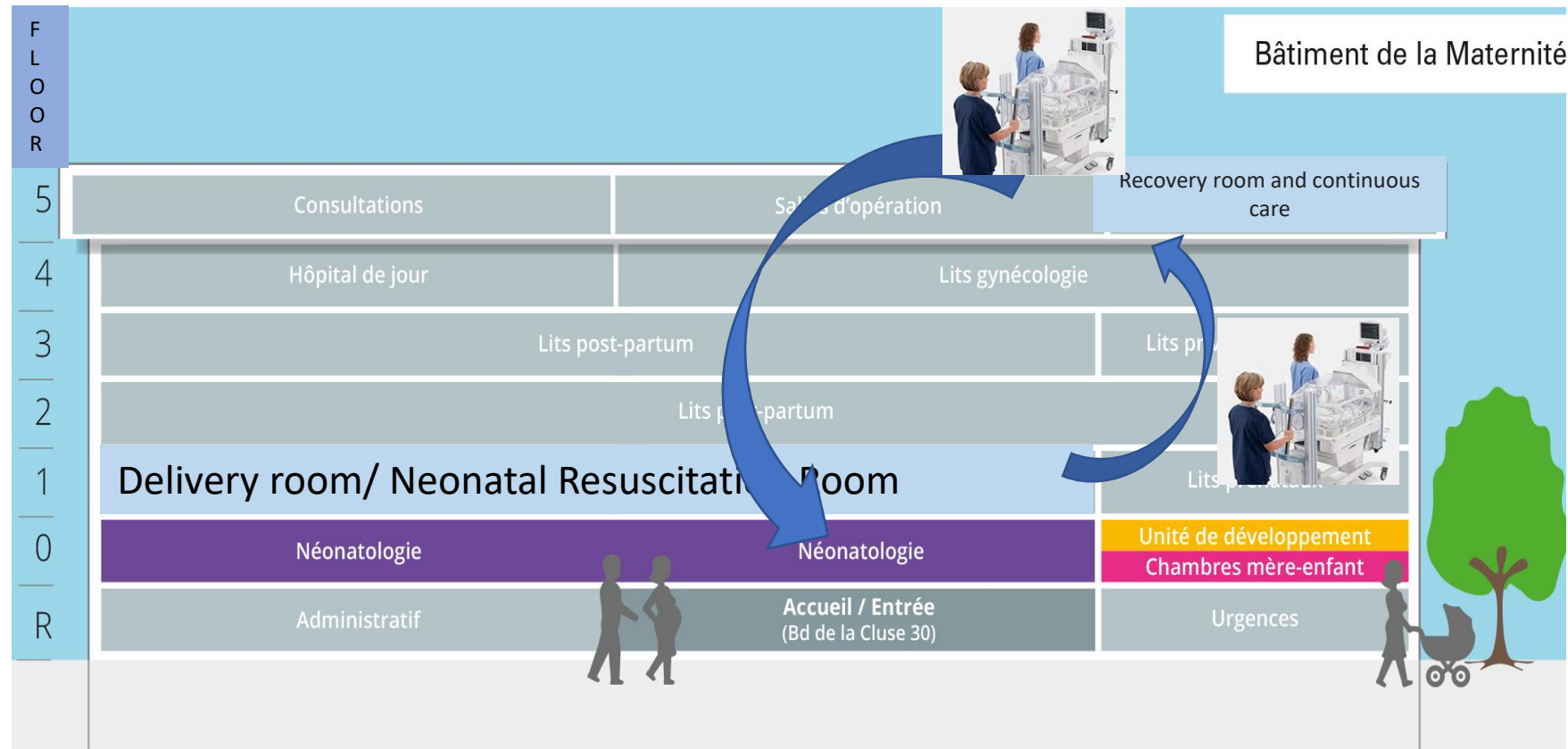
- UVC & UAC
- O_{neg} emergency blood transfusion (20 ml/kg)

midwife informs father several times



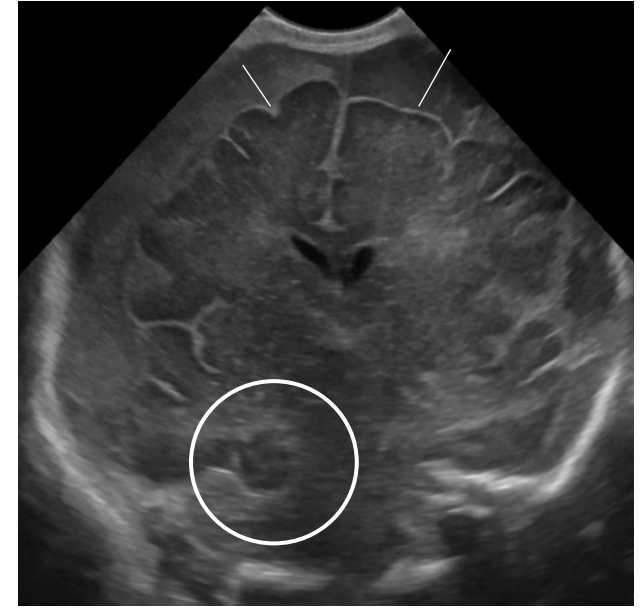
Transfer to the NICU (2 h of life)

- First time the neonatology team directly meets parents
- Mother in pain after CS
- Father present – translates
 - Explanation of severe condition
 - Severe anemia
 - Currently stable condition



In the NICU

- Haemodynamic stable
 - Full fontanel – brain US
- Diagnosis of massive bilateral subdural hemorrhage



- The father had left hospital to take care of his 18-month-old child
- Communication of the situation of his baby
- Explanation of urgent brain surgery.
- Father spontaneously informs mother by phone

In the NICU – day 0

Emergency OP in the NICU

- Bilateral drainage
- Father reached by phone
 - Can't come (18M son)
- Mother called by husband
 - Can't come post CS



In the NICU - day 1 (post intervention)

Physical exam: drains functional, no recovery, dysautonomia symptoms

Brain MRI:
- massive alteration of the cerebral parenchymal signal
- numerous hemorrhagic venous infarctions.
- signs of central, uncal and cerebellar herniation. Midline shift

-> Ethical Team-discussion: discontinuation/withdrawal of life-sustaining treatments (LST)

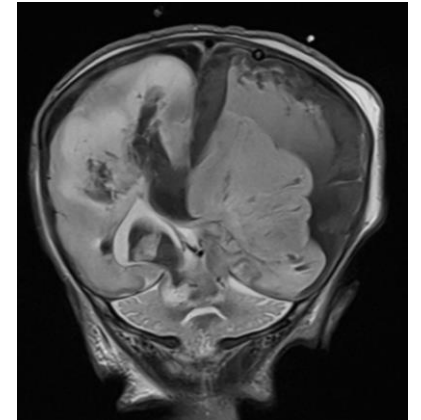
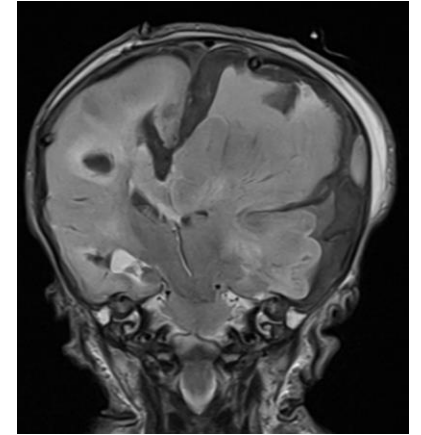
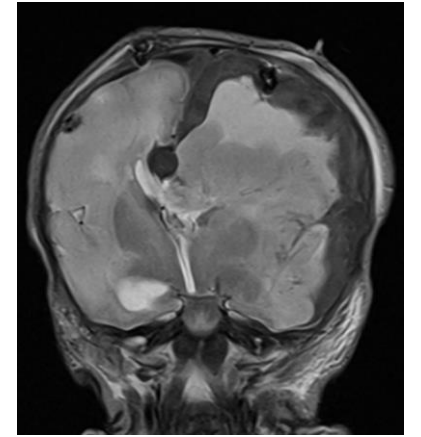
Only the father has been translating to the mother so far,
often via video-call

The father asks for a translator to better understand

Translated discussion with the parents on discontinuation/withdrawal of LST → Accepted

First, the mother did not want to be present during redirection of care

After explanation, the mother accepted presence



Redirection of care

After catecholamine stop and extubation
Baby girl passed away after 3 gasps
Comforted in the father's arms with the mother by her side

