Voluntary Termination in a Large Cohort of Women with Hyperemesis Gravidarum

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Introduction:
Although termination of an otherwise desired pregnancy is a serious complication of hyperemesis gravidarum (HG), the rate and predisposing factors are unknown.

Objective:
Here, we describe the characteristics of women who terminated their pregnancies secondary to HG.

Methods:
- The nonprofit Hyperemesis Education and Research (HER) Foundation administered an on-line survey during 2002-2003, questioning women regarding their HG pregnancy experience.
- Those who terminated at least one pregnancy secondary to severity of HG were compared with those who did not.

Results:
- Study Population
  - Demographics
    - 505 women from 31 countries participated
    - Of these, 344 (68.1%) were American
  - Voluntary terminations secondary to HG
    - 125 (24.7%) reported at least 1 termination
    - 63 (12.5%) reported up to 5 terminations
    - 1 reported having 10 terminations
  - An additional 27 women (5.3%) considered termination because of their HG symptoms

Reports of Voluntary Termination by Country of Residence

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Women Reporting at Least 1 Voluntary Termination</th>
<th>Women Reporting No Voluntary Terminations</th>
<th>Total N=505 (100%)</th>
<th>Relative Risk and 95% Confidence Limits</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N=125 (24.8%)</td>
<td>N=380 (75.2%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospitalization</td>
<td>52 (41.6%)</td>
<td>185 (48.7%)</td>
<td>237 (46.9%)</td>
<td>0.85 (0.68-1.08%)</td>
<td>0.1686</td>
</tr>
<tr>
<td>Intravenous Hydration</td>
<td>26 (20.8%)</td>
<td>98 (25.8%)</td>
<td>124 (24.5%)</td>
<td>0.81 (0.55-1.18)</td>
<td>0.2609</td>
</tr>
<tr>
<td>TPN</td>
<td>10 (8.0%)</td>
<td>28 (7.4%)</td>
<td>38 (7.5%)</td>
<td>1.09 (0.54-2.17)</td>
<td>0.8164</td>
</tr>
<tr>
<td>Negative Health Provider Attitude</td>
<td>75 (60.0%)</td>
<td>145 (38.1%)</td>
<td>220 (43.6%)</td>
<td>1.57 (1.30-1.91)</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Fear of Future Pregnancy</td>
<td>38 (30.4%)</td>
<td>70 (18.4%)</td>
<td>108 (21.4%)</td>
<td>1.65 (1.18-2.32)</td>
<td>0.0046</td>
</tr>
<tr>
<td>Family Dysfunction</td>
<td>0 (0.0%)</td>
<td>14 (3.7%)</td>
<td>14 (2.8%)</td>
<td>NA</td>
<td>0.0295</td>
</tr>
<tr>
<td>Career Dysfunction</td>
<td>5 (4.0%)</td>
<td>51 (13.4%)</td>
<td>56 (11.1%)</td>
<td>0.30 (0.12-0.73)</td>
<td>0.0036</td>
</tr>
<tr>
<td>Decreased Activity</td>
<td>8 (6.4%)</td>
<td>105 (27.6%)</td>
<td>113 (22.4%)</td>
<td>0.23 (0.12-0.46)</td>
<td>&lt;0.0001</td>
</tr>
<tr>
<td>Eating Problems</td>
<td>4 (3.2%)</td>
<td>43 (11.3%)</td>
<td>47 (9.3%)</td>
<td>0.28 (0.10-0.77)</td>
<td>0.0067</td>
</tr>
</tbody>
</table>

Summary:
In this large cohort:
- Nearly 25% of women with HG reported undergoing at least one voluntary termination due to HG
- 30% reported fear regarding future pregnancy
- Women who terminated were more likely to report a fear of future pregnancy and a negative attitude from their healthcare provider.
- Women who terminated were less likely to report family or career dysfunction, decreased physical activity, or eating problems, which in some cases persisted after delivery.

Conclusions:
Although the decision to terminate pregnancy in the setting of HG is complex, these data suggest that the physical and psychological burden of HG has been underestimated.

Affected women's perception of poor interaction with health care providers suggests an opportunity for further education within the medical community.

Lower likelihood of negative social and physical consequences among women who terminated their pregnancy reflects the burden of HG on women's lives.