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## Considering psychological support for male partners during the management of early pregnancy loss

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### Abstract

**Introduction:** Pregnancy loss is a phenomenon mostly researched from the perspectives of expectant mothers. Nevertheless, the loss is equally a painful experience for the male partners as well. Therefore, excluding them during early pregnancy loss management has created a research gap that needs to be addressed.

**Methodology:** This review analysed international guidelines on early pregnancy loss management to understand the consideration of male partner management during the early pregnancy loss process. The research team reviewed twelve (12) international guidelines written in English from official websites until August 2020. Through this review, the research team answered the study's research question and aim.

**Results:** There are limited guidelines and no clear protocols in involving, care, counselling, or support of male partners during or after the process or even psychological care for males victimised by early pregnancy loss. In general, specific guidelines considering male partners with specifications on each time loss are necessary to provide sufficient emotional and psychological support. Molar and ectopic pregnancies' impact on men must be investigated further. Insufficient recognition and support provided to the grieving couples post an early pregnancy loss for men. Society and healthcare providers and practitioners must pay attention to the lack of support given post-loss, especially male partners.

**Conclusion and Recommendations:** Thorough steps need to be taken to acknowledge the gravity of including male partners in early pregnancy loss management and validating that they are also emotionally affected like their women partners. Specific guidelines, which include male partners, are recommended for the management of early pregnancy loss.

**Keywords:** Early pregnancy loss, male partner support, the guidance of management of early pregnancy loss

### Introduction and Background

Despite pregnancy loss' common occurrence, it is a phenomenon that has been mostly researched from the perspective of the expectant mother. Although, the psychological impact of any pregnancy loss such as abortion, a miscarriage, ectopic or molar pregnancy is equally a painful experience for the father. Naziri (2007) <sup>[1]</sup> and Obst and Due (2019) <sup>[2]</sup> believed that since research heavily focused on observing the woman's experience during an early pregnancy loss, a research gap needs to be addressed. Men's emotional reaction towards early pregnancy loss might have been overlooked as men are expected to be strong for the family and not show any signs of psychological weaknesses. In situations like this, men often face difficulties venting out their emotions due to social pressure and expectations. In cases of early pregnancy loss, men are equally involved psychologically. However, they lack a strong support system from both society and professional caregivers. Therefore, male partners going through a pregnancy loss must be given attention to providing them with the necessary psychological support for grief management (Nguyen *et al.*, 2019) <sup>[3]</sup>.

Early pregnancy loss is defined as less than 24 weeks gestation by the National Health Service (NHS, 2018) <sup>[4]</sup>, and the course and impact of pregnancy loss slowly invite discussions on treatment recommendations in most guidelines (National Institute for Health and Care Excellence (NICE), Royal College of Obstetricians and Gynaecologists (RCOG), Ministry of Health Malaysia (MoH), American College of Obstetricians and Gynecologists (ACOG), World Health Organization (WHO), Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG), Queensland Clinical Guidelines (2019), National Portal India

Guidelines (2018), European Society of Human Reproduction and Embryology (ESHRE) 2018<sup>[13]</sup>, Health Quality Ontario and American Pregnancy Association) for grieving mothers during the period of pregnancy loss.

The following table (see Table 1) summarises each guideline's definition of early pregnancy loss types and the duration of pregnancy.

**Table 1:** Summary of definition for early pregnancy loss types and pregnancy duration guidelines

Reference	Country	Definitions
<b>Early Pregnancy Loss</b>		
National Institute for Health and Care Excellence (NICE) guidelines (early pregnancy)	United Kingdom (UK)	All women in the first trimester of pregnancy that is up to 13 completed weeks of pregnancy
Ministry of Health (MoH)	Malaysia	unavailable
American College of Obstetricians and Gynaecologists (ACOG)	United States of America (USA); Canada	Non-viable, intrauterine pregnancy with either an empty gestational sac or a gestational sac containing an embryo or fetus without foetal heart activity within the first 12 6/7 weeks of gestation
World Health Organization (early foetal death)	International	Non-viable pregnancy loss <24 weeks
Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)	Australia, New Zealand	unavailable
Health Quality Ontario	Canada	Pregnancy loss up to 13 completed weeks of pregnancy
<b>Miscarriage</b>		
National Institute for Health and Care Excellence (NICE) guidelines (early pregnancy)	United Kingdom (UK)	A miscarriage is the loss of a pregnancy during the first 23 weeks.
Ministry of Health (MoH)	Malaysia	A fetus weighing less than 500gm is considered as a miscarriage, or if it is less than 22 weeks gestation
American College of Obstetricians and Gynaecologists (ACOG)	United States of America (USA); Canada	Loss of pregnancy occurs in the first 13 weeks of pregnancy.
World Health Organization	International	<i>Unavailable</i>
Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)	Australia, New Zealand	A miscarriage occurs when the pregnancy loss has not progressed beyond 20 weeks
<b>Abortion</b>		
Ministry of Health (MoH)	Malaysia	Abortion is defined as the expulsion or removal of an embryo or fetus from the uterus at a stage of pregnancy when it is incapable of independent survival (500grams or 22 weeks gestation). It may be a spontaneous miscarriage or induced for medical or social reasons Termination of pregnancy within the context of this document is confined to procedures to remove an embryo or fetus where the pregnancy is less than 22 weeks of gestation or if the gestation is unknown, where the fetus is estimated to be less than 500 grams.
American College of Obstetricians and Gynaecologists (ACOG)	United States, Canada	Unavailable
World Health Organization	International	Unavailable
Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)	Australia, New Zealand	Unavailable
National Health Service (NHS)	United Kingdom	Abortion is a procedure to end a pregnancy. It is also sometimes known as a termination of pregnancy. The pregnancy is ended either by taking medicines or having a surgical procedure.
<b>Ectopic pregnancy</b>		
American College of Obstetricians and Gynaecologists (ACOG)	United States, Canada	A pregnancy in which the fertilised egg begins to grow in a place other than inside the uterus, usually in one of the fallopian tubes.
Ministry of Health (MoH)	Malaysia	A pregnancy implanted outside the uterine cavity or womb
Royal College of Obstetricians and Gynaecologists (RCOG)	United Kingdom	An ectopic pregnancy is any pregnancy implanted outside of the endometrial cavity
Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)	Australia, New Zealand	Unavailable
<b>Molar Pregnancy</b>		
WHO	International	Unavailable
American Pregnancy Association	United States, Canada	A molar pregnancy results from a genetic error during the fertilisation process that leads to abnormal tissue growth within the uterus.
National Institute for Health and Care Excellence (NICE) Guidelines	United Kingdom	A molar pregnancy is where a foetus does not form properly in the womb, and a baby does not develop.
Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG)	Australia, New Zealand	A molar pregnancy is a type of pregnancy loss as the baby either does not develop at all or develops abnormally and cannot survive 1) partial hydatidiform mole 2) complete hydatidiform mole
Ministry of Health (MoH)	Malaysia	The pregnancy happens when an egg and a sperm meet at fertilisation, but the cells do not grow in a way that can support a pregnancy.

**Rationale of the study**

Most guidelines, local protocols and clinical practice focus mainly on female management for various types of early pregnancy loss, especially on their psychological impact; unfortunately, male partners receive less share of that care.

**Aim:** To establish guidance supporting male partners to go through the challenges related to the management of early pregnancy loss

**Objective:** To send an invitation to medical practitioners to involve male partners in early pregnancy loss management.

**Research question:** Is the psychological impact on male partners considered in the management of early pregnancy loss?

**Methodology**

This descriptive literature review explores what is known from different international guidelines on early pregnancy loss management to understand the consideration of male partner management during the early pregnancy loss process.

The research team reviewed twelve (12) international guidelines, written in English from official websites until August 2020, emphasising the involvement of male partners during different types of early pregnancy loss management. Through this review, the research team answered the research question and aim of the study.

**Summary of evidence on international Guidelines and Early Pregnancy Loss**

A look at the international guidelines concerning early pregnancy loss and whether the male partner has been included

in management or received any psychological management is shown below (See Table 2 and 3). Also, those dealing with that issue from this perspective highlighted specific points written to the corresponding guidelines.

Queensland Clinical Guidelines on Early Pregnancy Loss proposed that grieving couples physically see and/or touch their foetus. They are advised to expect distressing remarks from their loved ones, and administrations are guided to thoroughly inform the parents about the cause of the loss and involvement of the male partner. They can mentally prepare themselves to hear some hurtful comments by well-meaning family or friends. The parents must be informed about what happened to their foetus.

There are some guidelines released by several health organisations such as RANZCOG (2019) <sup>[10]</sup>, stated that the provision of validated statistics such as that 1 in 4 confirmed pregnancies often end in miscarriage are informed to the grieving couples, and this may aid them in understanding that they are not the only ones going through such a loss. Furthermore, Queensland Clinical Guidelines on Early Pregnancy Loss recommends the presence of both parents at the discussion sessions if feasible, and the involvement of a supporting person is deemed suitable. It is also suggested that informing parents of the loss must be overseen with immense care and at the right time. Moreover, the memory creation option may be discussed with the grieving parents subject to the gestational age, circumstances, and cultural presences, and parents must be given a chance to see and/or hold the fetus depending on their desirability. Lastly, ESHRE (2018) <sup>[13]</sup> recommends that men's emotional well-being be considered, and more research is needed to discuss the aspects of men (See Tables 2, 3 and 4).

**Table 2:** Guidelines including management of male partners' psychological well-being after pregnancy loss

Guidelines	Types of Early Pregnancy Loss			
	Miscarriage	Abortion	Molar pregnancy	Ectopic pregnancy
UK National Institute for Health and Care Excellence (NICE 2019) <sup>[5]</sup>	X	X	X	X
UK (RCOG 2010/2011/2015/2016)	X	X	X	X
Malaysia (KKM 2012)	X	X	X	X
US (ACOG 2004/2014/2018)	X	X	X	X
WHO 2013/2014	X	X	X	X
RANZCOG 2019 <sup>[10]</sup> (Patient leaflet as no specific guideline other than direct copy from NICE)	✓	X	X	X
Queensland Clinical Guidelines 2018	✓	X	✓	✓
India (National Health Portal 2018)	X	X	X	X
European Society of Human Reproduction and Embryology (ESHRE) 2018	✓	X	X	X

**Table 3:** Guidelines and male partners' psychological management

Guidelines	Types of Early Pregnancy Loss			
	Miscarriage	Abortion	Molar pregnancy	Ectopic pregnancy
UK National Institute for Health and Care Excellence (NICE 2019) <sup>[5]</sup>	X	X	X	X
UK (RCOG 2010/2011/2015/2016)	X	X	X	X
Malaysia (MoH 2012)	X	X	X	X
US (ACOG 2004/2014/2018)	X	X	X	X
WHO 2013/2014	X	X	X	X
RANZCOG 2019 (Patient leaflet as no specific guideline) <sup>[10]</sup>	X	X	X	X
Queensland Clinical Guidelines 2018 <sup>[11]</sup>	X	X	X	X
India (National Health Portal 2018)	X	X	X	X
European Society of Human Reproduction and Embryology (ESHRE)	X	X	X	X

**Table 4:** Review of international guidelines on early pregnancy loss management

Guideline	Country	Mention of the male partners
NICE guidelines 2019 <sup>[5]</sup>	United Kingdom	Yes, but only specifically in information sharing for miscarriage (section 1.1) "Healthcare professionals providing care for women with early pregnancy

		complications in any setting should be aware that early pregnancy complications can cause significant distress for some women and their partners.”
RCOG 2010/2011/2015/2016	United Kingdom	No
MoH Malaysia 2012	Malaysia	No
ACOG 2004/2014/2018	United States	No
WHO 2013/2014	-	No
RANZCOG 2019 <sup>[10]</sup> (Patient leaflet as no specific guideline)	New Zealand	Yes, the emotional aspects of the couple are acknowledged
Queensland Clinical Guidelines 2018	Australia	Yes, include parents in discussion/ counselling (Section 9) EPL = miscarriage, molar & ectopic
National Health Portal, India 2018	India	Yes, parents should be given emotional support (very brief mention)
Health Quality Ontario 2019	Canada	Yes. People who experience an early pregnancy loss and their families are offered information about psychosocial and peer support services and organisations.
European Society of Human Reproduction and Embryology (ESHRE), 2018 <sup>[13]</sup>	Europe	Yes, more research needs to be done for impact on men

Hence, it is evident from the guidelines that current healthcare practices and the wider community need to acknowledge the male partners' grief. To address this gap, this review aims to bring attention to the psychological impact of early pregnancy loss on male partners, their reaction to various types of early pregnancy loss, and their inclusivity for support in the existing clinical management.

### Results

International guidelines show limited guidelines and no clear protocols in involving, care, counselling, or support of male partners during or after the process or even psychological care for males victimised by early pregnancy loss. Specific guidelines considering male partners at early pregnancy loss in general with specifications on each time are necessary to provide sufficient emotional and psychological support. Molar and ectopic pregnancies' impact on male partners must be investigated further.

Insufficient recognition and support provided to the grieving couples post an early pregnancy loss, particularly for men. Therefore, it can be argued that society and the healthcare providers and practitioners must pay attention to the lack of support given post-loss, especially towards the male partners. Guidelines and steps need to be taken indicating the matter's gravity matter: men's inclusion and the validation of their emotional states when experiencing an early pregnancy loss.

### The recommended guidelines are as follows:

- Pre-pregnancy: Male partners with previous experience of early pregnancy loss should receive adequate knowledge about contraception, causes of early pregnancy loss, possibility, signs, and symptoms of recurrence, in addition to awareness on possible loss prevention practices.
- During pregnancy: Involve male partners as much as possible during antenatal care, diagnosis of pregnancy, looking and hearing foetal heartbeats, observing and clarification of ultrasound examination.
- During the pregnancy loss process, involving the male partner would help them know what is going on, why, and how. The male partners should be aware that the loss was not due to something they or their partner did or could do to avoid. Moreover, they should know what to expect at each management step and get involved in decision making. There should be an option for the male partner to be in the room during procedures inducing pregnancy loss with the woman partner's consent.
- Support male partners emotionally throughout the process from diagnosis to loss aftermath.
- Discussion and counselling for the couple on the loss, future

fertility, and sexual life after the loss.

- Long term support to partner still carrying early pregnancy loss burdens.

### Limitations

English or English translated accessible guidelines were selected for review, and the study did not cover all world guidelines and clinical practices.

### Conflict of interest

All authors declare no conflict of interest and agree for publication.

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