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Safety, effectiveness, and feasibility of funic potassium chloride injection to induce fetal demise prior to dilation and evacuation

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Project abstract

The Partial-Birth Abortion Ban Act of 2003 prohibits practitioners from performing a procedure with the intent of extracting a live fetus past defined anatomical landmarks. Abortion providers are in compliance with the law if fetal demise, whether incidental or induced, occurs prior to performing a dilation and evacuation (D&E) procedure.

There is a need to study safe, effective techniques to induce fetal demise that are acceptable to women undergoing D&E. Various doses and routes of potassium chloride (KCI) injection have been reported in the literature and are effective, expedient, and safe for the woman. However, fetal intracardiac injection or ultrasound-guided injection into the umbilical cord (funic injection) requires specialized skill and an additional procedure, which may cause distress if not done under sedation in conjunction with D&E.

Funic injection under direct observation at the time of D&E addresses these limitations, but the safety, effectiveness, and feasibility of this procedure have not been formally evaluated. We propose a study to address these knowledge gaps, and to explore acceptability among women undergoing this procedure. We will develop a protocol for both dosing and for teaching this technique. Pilot data from this project will be used to compare funic KCI injection to other feticidal methods currently in use.

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