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CDC's website is being modified to comply with President Trump's Executive Orders.

About Stillbirth

KEY POINTS

- Stillbirth is more common than people may realize and remains a sad reality for many families.
- If you're pregnant and you experience something that seems unusual or is worrying you, talk to your healthcare provider.



MORE INFORMATION

- For Everyone
- Health Care Providers

What it is

A stillbirth is when a fetus dies in the uterus after 20 weeks of pregnancy. Stillbirth is different from miscarriage. In the United States, a miscarriage is usually defined as the loss of a fetus before the 20th week of pregnancy.

Stillbirth is further classified as early, late, or term:

- **Early** is the loss of a fetus between 20 and 27 weeks of pregnancy.
- **Late** is the loss of a fetus between 28 and 36 weeks of pregnancy.
- **Term** is the loss of a fetus at 37 or more weeks of pregnancy.



CDC works to learn why stillbirths happen and what more can be done.

Who is at risk

Stillbirth occurs in families of all races, ethnicities, and income levels, and to women of all ages. However, stillbirth occurs more commonly among certain groups of people including women who

- Are 35 years of age or older
- Are of low socioeconomic status
- Smoke cigarettes during pregnancy
- Have certain medical conditions, such as high blood pressure

- Are pregnant with more than one baby (such as twins or triplets)
- Have had a stillbirth in the past

Stillbirths also occur more often to women in certain racial or ethnic groups. In 2020, stillbirth occurred among non-Hispanic Black women two times more often than among non-Hispanic White and Asian or Pacific Islander women.[\[1\]](#) [\[2\]](#)

Health disparities in stillbirth are not rooted in biological or genetic differences between races and ethnicities. These disparities can be attributed to many underlying causes, including access to quality health care, pre-existing health conditions, and structural discrimination. Investigating these disparities is an important part of creating programs to reduce them.

Adrian's story



My son Adrian was stillborn due to complications from undiagnosed preeclampsia. [Preeclampsia](#) is a condition that can happen after 20 weeks of pregnancy. No one mentioned the risk of stillbirth, and none of my providers seemed concerned about my symptoms. The night before I hit my 41st week of pregnancy, I went to bed with my son actively kicking in my belly. By the time I woke up the following morning, he was dead. I wish I had known stillbirth is as common as it is. I wish I had known that having symptoms of preeclampsia was a big deal. Most of all, I wish more people talked about stillbirth. My son should be here, and he isn't.

What CDC is doing

CDC works to learn more about who had a stillbirth and explores whether we know why. CDC does this by tracking how often stillbirth occurs and researching what causes stillbirth. Knowledge about the potential causes of stillbirth can be used to develop recommendations, policies, and services to help prevent stillbirth. While we continue to learn more about stillbirth, much work remains.

SOURCES

CONTENT SOURCE:

[National Center on Birth Defects and Developmental Disabilities](#)

REFERENCES

1. Gregory EC, Valenzuela CP, Hoyert DL. Fetal Mortality: United States, 2020. Natl Vital Stat Rep. 2022 Aug;71(4):1-20. PMID: 35947824.
2. Hoyert DL, Gregory EC. Cause-of-death Data From the Fetal Death File,2018-2020. Natl Vital Stat Rep. 2022 Oct;71(7):1-20. PMID: 36301230.