

Pregnancy of unknown location: women's attitudes and preferences for its management



We read the article by Wu et al. (1) with pleasure because their study sheds light on a critical time for each pregnant woman during which pregnancy may be lost. To our knowledge, this is the first study of patient preferences and priorities for pregnancy of unknown location.

However, we noticed that only detecting priorities is not helpful to understand the attitude and preferences of pregnant women for management, as mentioned in the article.

There are many concerns regarding the sample, which may pose a question about the accuracy of the results. First, the total sample size was limited: only 15 women were chosen intentionally, which may limit the generalizability of the results. Second, 4 women had experienced only 1 previous pregnancy loss, either a pregnancy of unknown location or a spontaneous abortion, and 2 women had recurrent losses. These prior experiences could have affected the perspectives and priorities of these women. Third, all participating women had desired pregnancy, which limits the generalizability of the study results. Fourth, women who are seeking abortion or are ambivalent about the pregnancy would likely have distinct preferences in this regard, which may bias the results, and it would be better if they were excluded from the sample.

Other concerns that require a comment from the investigators are that participants were intentionally recruited from

both the emergency department and a subspecialty fertility clinic, but the contributions of perspectives from these 2 different settings on patient priorities was not adequately considered in the interpretation of the results. One-third of the participants were recruited from a subspecialty fertility practice and may have generated bias toward the prevalent prioritization of future fertility. Other differences may also be observed between patients presenting to the emergency department vs. fertility practice, such as less care continuity after presenting to the emergency department, which would be better if mentioned in the results. Moreover, patients' personal health was universally prioritized in women who had an ectopic pregnancy but was only mentioned by half of the other study participants. Such issues will be clearer if discussed and commented on by researchers.

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<https://doi.org/10.1016/j.xfre.2022.08.010>

REFERENCE

1. Wu J, Sadecki E, Kyweluk M, Senapati S, Flynn AN, Steider E, et al. Patient attitudes and preferences for management of pregnancy of unknown location. *Fertil Steril* 2022;3:246–52.