

# CWRU nurse researcher finds prescribed bed rest has down side for pregnant women

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Despite lack of evidence about bed rest's effectiveness, doctors annually prescribe it for roughly 1 million pregnant women to delay preterm births.

Judith Maloni, professor at the Frances Payne Bolton School of Nursing at Case Western Reserve University, said a comprehensive review of more than 70 evidence-based research articles challenges whether this is healthy for mothers — or their babies.

She makes her report in the article, "Antepartum Bed Rest for Pregnancy Complications: Efficacy and Safety for Preventing [Preterm Birth](#)," in the special women's health issue of *Biological Research for Nursing*.

In it, she raises concerns about the physical and emotional impact on bedridden mothers and notes that hospital stays deny women the opportunity to rest in the comfort of their homes, with the support of their families.

Maloni points to gaps in the current literature and suggests that more evidence is needed.

Gaps in research also exist if bed rest harms or benefits the baby, Maloni said.

Bed rest for [pregnant women](#) experiencing early contractions or other

pregnancy problems, such as high blood pressure, multiple babies, potential blood clotting or bleeding, can be prescribed for a few days or a few months.

Since 1989, Maloni has been a leader in the study of best rest during pregnancy. Her current research draws from study in the fields of aerospace, nursing, medicine, psychology, social science and biological sciences.

For example, she says, aerospace studies tell us that when a body is in a resting position, a series of physiological changes take places to adjust to this non weight-bearing position.

"Over time, remaining in a resting position can lead to bone loss and muscle atrophy," Maloni said.

But for expectant mothers confided to bed for nearly 24 hours a day, it can also bring on depression, and possibly post traumatic shock disorder as women are left with nothing to do but worry that every contraction could bring about a pre-term birth.

"Nurses can challenge best-rest treatment by functioning as advocates for women and educating them about the evidence for [bed-rest](#) treatment as well as the risks and benefits, if any, of this practice," Maloni says.

Provided by Case Western Reserve University

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