

New study on maternity care published

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(Medical Xpress) -- The result of a major study comparing two methods of maternity care, commissioned by the HSE and conducted by the School of Nursing and Midwifery, Trinity College Dublin, has been published recently in the journal *BMC Pregnancy and Childbirth*.

This study involved 1,653 women having babies in the HSE Dublin North-East region from 2004 to 2007, and compared the usual consultant-led [maternity care](#) with a new model of care provided by [midwives](#) in two integrated Midwifery-led Units (MLUs) in Our Lady of Lourdes Hospital, Drogheda and Cavan General Hospital. The two MLUs, the first such units in [Ireland](#), were opened in response to recommendations made in the Kinder Report in 2001, to provide more choice in maternity care in the North East.

The ‘MidU’ (‘Midwifery Unit’) study showed that midwifery-led care, as practised in these units, is as safe as consultant-led care but uses less intervention in [pregnancy](#) and [childbirth](#). The number of babies needing resuscitation at birth, or admission to the special care baby unit, was the same in both groups. Almost 6 in 10 women in the CLUs (57%) had their labours speeded up by either having their ‘waters’ broken or having oxytocin, given intravenously by ‘drip’, compared with only 4 in 10 women in the MLUs (40%).

Cecily Begley, Professor of Midwifery in Trinity College Dublin and principal investigator of the project said the results demonstrated the high quality of maternity care in this country. “Safety is our primary concern”, she said, “and this study has shown conclusively that low-risk

women receive safe care from both midwives and obstetricians. Midwifery-led care uses fewer interventions, however, and most women prefer that.”

In the midwifery-led model of care, midwives, working in partnership with women, are the lead professional. They provide care in pregnancy, shared with the woman’s general practitioner if desired, and refer any problems to the GP or obstetrician as necessary. When the woman commences labour, she comes to the MLU, a separate unit within the maternity hospital, and is welcomed into her private room where she stays for the labour, birth and postnatal resting time. Each room has a bed, pull-out couch for her partner to sleep on, a birthing pool, television, and tea/coffee-making facilities available.

In labour, fewer women in the MLU group chose to have epidurals (18%) than did those in the CLU (24%). Other methods of pain relief chosen included immersion in warm water in a birthing pool (23% in MLU compared with 3% in CLU). Despite having fewer epidurals, 83% of women in the MLUs expressed satisfaction with their pain relief, compared with 68% of women in the CLU. “When women are supported by one-to-one midwifery care, are encouraged to labour gently at their own pace and have the pain-relieving benefits of relaxing in warm water, they are far better able to tolerate pain, and labour more effectively,” said Professor Begley.

Women’s satisfaction was apparent in the study and 85% of those attending the MLUs said they would recommend the care they had received to a friend, compared with 70% of those having usual care. Although facilities in the MLUs were quite luxurious, the cost of care for each woman was €332.80 less than in the usual hospital system. In addition, this model of care enabled consultant obstetricians to devote more time to caring for women with pregnancy complications, who really need their input.

The results of this study agree with those from international research, and the Cochrane review of midwifery-led care concludes that most [women](#) should be offered midwife-led models of care. A recent KPMG report on maternity care in the Greater Dublin Region also recommended the introduction of midwifery-led units throughout the country.

Provided by Trinity College Dublin

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