

## Are four antenatal visits enough?

## April 11 2013

Reanalysis of the World Health Organization's Antenatal Care Trial (WHOACT) shows that there is an increased risk of fetal death at between 32 and 36 weeks for women who have a reduced antenatal care package, finds research published in BioMed Central's open access journal *Reproductive Health*.

Original analysis of the WHOACT concluded that reducing antenatal visits of low risk women from eight to four was not detrimental to their or their babies' health and could cut costs. Based on this advice some countries have lowered the number of routine antenatal visits .

However, in light of the 2010 <u>Cochrane review</u>, which suggested that reduced antenatal visits was in fact detrimental to health, the WHOACT data was reanalyzed by an international group of researchers. Once the data was adjusted for maternal risk (such as smoking, age, education) the group found that there was an increased risk of <u>fetal death</u> for the women who had reduced numbers of antenatal visits. Specifically, for high risk women the risk of fetal death at 36 weeks of less was 80% higher while for low risk women it increased by 50%.

The increase risk of fetal death was highest between 32 and 36 weeks. Discussing the impact of their results Dr Joshua P Vogel from the <u>World</u> <u>Health Organization</u> explained, "This increased risk of fetal death is linked to a reduced number of antenatal visits, but this may be due to differences in settings, content and quality of care. The timing and quality of visits is also important – reduced numbers of visits may miss important windows when fetuses are still at risk."



"After a century of blind faith, this paper provides probably the first direct evidence from a <u>randomized trial</u> that routine antenatal visits for healthy pregnant women do make a difference" finds Prof Justus Hofmeyr from University of the Witwatersrand/Fort Hare. He continued, "An increased number of routine visits may detect asymptomatic conditions such as pre-eclampsia, <u>fetal growth restriction</u> or reduced fetal movements earlier, allowing more timely intervention. The importance of the content and quality of routine antenatal care should not be lost to policymakers when decisions about numbers of visits with the available resources are being made."

**More information:** Antenatal care packages with reduced visits and perinatal mortality: a secondary analysis of the WHO Antenatal Care Trial. Joshua P Vogel, Habib Abu Ndema, João Paulo Souza, A. Metin Gülmezoglu, Therese Dowswell, Guillermo Carroli, Hassan S Baaqeel, Pisake Lumbiganon, Gilda Piaggio and Olufemi T Oladapo. Reproductive Health 2013, 10:19 <u>doi:10.1186/1742-4755-10-19</u>

Commentary: Antenatal care packages with reduced visits and perinatal mortality: a secondary analysis of the WHO antenatal care trial - Comentary: routine antenatal visits for healthy pregnant women do make a difference. G Justus Hofmeyr and Ellen D Hodnett. Reproductive Health 2013, 10:20 <u>doi:10.1186/1742-4755-10-20</u>

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