

Prophylactic progestin cuts odds of recurrent preterm birth

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(HealthDay)—Progestin prophylaxis and accelerated access to the first clinic visit decrease the odds of spontaneous preterm birth among women with a history of preterm birth, according to a study published online Dec. 6 in *Obstetrics & Gynecology*.

Kara B. Markham, M.D., from The Ohio State University in Columbus, and colleagues conducted a retrospective cohort study to assess outcomes of 1,066 pregnant [women](#) with one or more previous preterm births who received care in a prematurity clinic. Progestin prophylaxis was adopted in 2004, and accelerated access to the first clinic visit was adopted in 2008.

The researchers found that after adoption of an accelerated appointment process there was a significant decline in the gestational age at initiation

of prenatal care (median, 19.1 weeks before 2003; 16.2 weeks from 2004 to 2007; and 15.2 weeks from 2008 to 2012; P preterm birth before 37 and 35 weeks of gestation decreased significantly in 2008 to 2012 versus 1998 to 2007 (adjusted odds ratio, 0.75 and 0.70, respectively), after adjustment for race, smoking, cerclage, and number of prior preterm deliveries.

"Our report suggests that progestin prophylaxis can reduce the rate of recurrent spontaneous preterm birth when barriers to care and treatment are aggressively removed and that the gestational age at initiation may affect the success of progestin [prophylaxis](#)," the authors write.

More information: [Abstract](#)
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