

Research published about unexpected complications of low-risk pregnancies

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When a woman becomes pregnant or is planning a pregnancy, one of her first decisions is where she will deliver her baby. With options ranging from birthing centers to small community hospitals to regional health networks to academic medical centers, the decision can be confusing.

The question, especially for a [woman](#) with a low-risk pregnancy, is "What is the likelihood that something could go wrong?"

Research on this topic has been published in the *American Journal of Obstetrics & Gynecology*. The research was conducted by Valery A. Danilack, MPH, PhD, postdoctoral research fellow in the Department of Obstetrics and Gynecology at Women & Infants Hospital and the Brown

University School of Public Health; Anthony Nunes, MS, PhD, of Optum Epidemiology in Waltham, MA; and senior author Maureen G. Phipps, MD, MPH, chief of [obstetrics and gynecology](#) at Women & Infants Hospital of Rhode Island, executive chief of obstetrics and gynecology at Care New England Health System, Chair and Chace-Joukowsky Professor in the Department of Obstetrics & Gynecology and assistant dean for teaching and research in women's health at the Alpert Medical School, and professor of epidemiology at the Brown University School of Public Health.

The researchers noted, "Determining appropriate sites of care for any type of medical issue assumes successful matching of patient risks to facility capabilities and resources. In [obstetrics](#), predicting patients who will have a need for additional resources beyond routine obstetric and neonatal care is difficult. Women without prenatal [risk factors](#) and their newborns may experience unexpected complications during delivery or postpartum."

The research reported on the risk of unexpected maternal and newborn complications among pregnancies without identified prenatal risk factors. The research team analyzed data collected between 2011 and 2013 from 10 million birth certificates utilizing U.S. Natality data. Pregnancies were categorized as low-risk (no prenatal risk factors) or high-risk (at least one prenatal risk factor) according to 19 demographic, medical and pregnancy characteristics. From this data, the team evaluated 21 individual unexpected or adverse intrapartum and postpartum outcomes, as well as a composite indicator of any adverse outcomes. The analysis revealed that 29 percent of pregnancies identified to be low-risk had an unexpected complication that would require non-routine obstetric or neonatal care.

The researchers concluded, "This information is important for planning location of birth and evaluating birthing centers and hospitals for

necessary resources to ensure quality care and patient safety."

Provided by Women & Infants Hospital

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