

Closure of obstetric services in BC did not affect labor and delivery

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The closure of obstetric services at hospitals in British Columbia did not result in an increase or decrease in frequency of adverse events during labour and delivery, according to a new study in *CMAJ (Canadian Medical Association Journal)*.

Almost one-third of hospitals in BC have stopped providing planned obstetric services since 1998, with most closures in hospitals with fewer than 150 deliveries per year.

"Closure of planned obstetric services in 21 communities in BC did not affect the frequency of adverse outcomes or serious adverse outcomes during labour and delivery," writes Dr. Jennifer Hutcheon, University of British Columbia and Perinatal Services BC, Vancouver, BC, with coauthors.

The study included 20 874 deliveries to women living in BC in either a community that experienced a closure of planned obstetric services (11 949) or a similar-sized community without service closure (8925), between 1998 and 2014.

More than 40% of deliveries to women living in these communities occurred elsewhere, even before closure of local services. This may explain why closures did not affect rates of adverse events, because higher-risk deliveries may have occurred at larger hospitals or birthing centres even before closure.

However, service closures can have other consequences for women, their families and their communities; these factors must be considered when deciding to close planned obstetric services.

The authors cite previous research that found that "rural women without access to local maternity services are 7 times more likely to experience moderate to severe delivery-related stress than women with local services." Financial issues related to relocating to a hospital, long travel distances, winter road conditions and separation from children, were identified as reasons.

More information: *Canadian Medical Association Journal*,
www.cmaj.ca/lookup/doi/10.1503/cmaj.160461

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