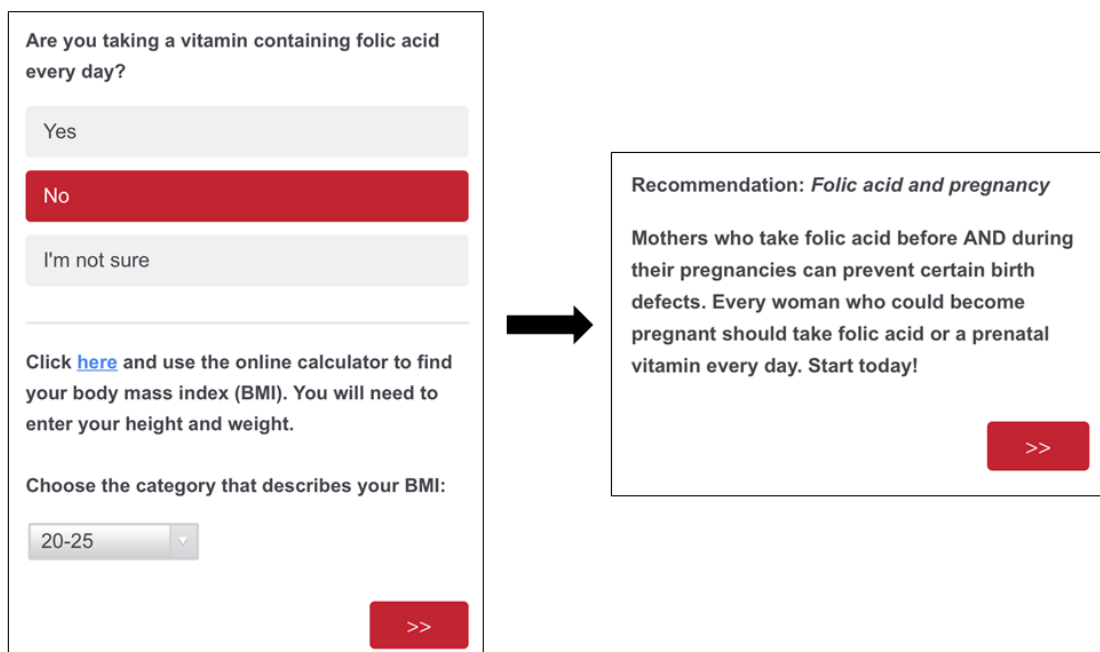


Online preconception health education tool positively impacts patient care

April 19 2017



Are you taking a vitamin containing folic acid every day?

Yes

No

I'm not sure

Click [here](#) and use the online calculator to find your body mass index (BMI). You will need to enter your height and weight.

Choose the category that describes your BMI:

20-25

>>

Recommendation: *Folic acid and pregnancy*

Mothers who take folic acid before AND during their pregnancies can prevent certain birth defects. Every woman who could become pregnant should take folic acid or a prenatal vitamin every day. Start today!

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Screenshot of MyFamilyPlan. Credit: P. Batra, UC Riverside.

Although health education and counseling for women of reproductive age before they conceive can positively affect their health behaviors, few preconception health promotion tools and interventions have been evaluated for their effectiveness.

Now a research team led by Priya Batra, M.D., an assistant clinical professor in residence in the School of Medicine at the University of California, Riverside, has evaluated one such tool and found that it enabled a significant increase in the proportion of [women](#) who reported discussing their [reproductive health](#) with their doctors.

The team created and tested MyFamilyPlan, a web-based preconception [health education](#) module, among women of reproductive age. The module presents patients with questions about their pregnancy plans and [health](#) histories. Responses are then used to generate individualized recommendations regarding preconception care issues for the women to discuss with their health-care providers.

"We found that MyFamilyPlan could improve preconception care delivery, and positively impact patient care," Batra said. "Since MyFamilyPlan is available online, it could be easily accessed by more women planning pregnancies."

Almost half of annual pregnancies in the United States are unwanted or mistimed. Most women do not receive preconception counseling. In 2010, for example, only about one-third of postpartum American women reported receiving preconception counseling before their most recent pregnancy. Alarmingly, women with known risk factors for adverse [pregnancy](#) outcomes were least likely to receive the service.

The randomized trial by Batra and colleagues, published in the *American Journal of Health Promotion*, took place in an urban academic medical center in California. Participants were 292 English-speaking white women, aged 18 to 45 years, who were not pregnant at the time of the study. The participants were also healthy and privately insured. Half of them were allocated to a control group, which received standard preconception care literature in an electronic format.

"We found that 75.3 percent of participants who used the MyFamilyPlan online format liked it," Batra said. "Women who were exposed to the MyFamilyPlan web-based module before their well-woman visits were about twice as likely to discuss preconception health with their doctors. This study shows that a guideline-driven, web-based module can have a measureable impact on the patient-provider interaction in the areas of reproductive health and preconception care. Further, implementing such online interventions is relatively low-burden on health systems' resources and time of providers and staff."

Next, the researchers plan to validate and test a Spanish-language version of MyFamilyPlan for use in a more diverse population.

More information: *American Journal of Health Promotion* (2017).
[journals.sagepub.com/doi/full/ ... 177/0890117117700585](https://journals.sagepub.com/doi/full/.../177/0890117117700585)

Provided by University of California - Riverside

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