

Well-child visits are effective time to help moms, study shows

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In an effort to improve birth outcomes, well-child visits provide an opportune time to deliver basic screenings and health care interventions for new mothers between pregnancies, according to a new study led by UPMC.

Developed by the IMPLICIT Network (Interventions to Minimize Preterm and Low birth weight Infants through Continuous Improvement Techniques), the IMPLICIT interconception care (ICC) model uses regularly scheduled pediatric appointments to screen new moms for four evidence-based risk factors that impact birth outcomes - tobacco use, depression risk, contraception use and use of a multivitamin with folic acid - and provide them with interventions as needed.

Implemented in 11 IMPLICIT Network family medicine residency practices from February 2015 until April 2017, the model encourages providers to discuss these risk factors with [mothers](#) at their baby's checkups during their first two years of life. The family medicine residency programs at UPMC McKeesport, UPMC St. Margaret and UPMC Shadyside used the model and contributed data to the findings, which were published today in the *Journal of the American Board of Family Medicine*.

"Interconception care aims to improve the health of both mothers and babies, but many women are so focused on their newborns that they do not seek health care for themselves between pregnancies," said Sukanya Srinivasan, M.D., M.P.H., community faculty, UPMC St. Margaret

Family Medicine Residency, and lead author of the study. "By the time women enter prenatal care, it often is too late to influence [birth outcomes](#), but the IMPLICIT ICC model allows modifiable [risk factors](#) to be addressed prior to pregnancy, regardless of whether women are seeking care for themselves or for their child."

After analyzing more than 5,900 children across more than 17,600 well-child visits, researchers found that [new mothers](#) attended 92.7 percent of their babies' appointments, creating a significant window of opportunity to discuss their own health. The frequency of maternal screening at participating sites varied, with women receiving ICC screenings at an average rate of 69.1 percent of visits across all study sites.

Clinicians identified tobacco use in 16.2 percent of visits, delivering an intervention 80 percent of the time. Depression was identified in 8.1 percent of visits, with 92.8 percent of mothers receiving an intervention. Lack of contraception use was identified in 28.2 percent of visits, with 76 percent of those mothers receiving an intervention to promote adequate birth spacing. Multivitamin use was lacking by women in 45.4 percent of visits, with an intervention documented for 58.2 percent of those women.

"This model of care demonstrates the feasibility of incorporating ICC screenings for mothers into visits that were traditionally intended for their children," said Lisa Schlar, M.D., director of women's health, UPMC Shadyside Family Medicine Residency. "This is a promising [intervention](#) strategy that can be easily implemented on a broad scale by family medicine and primary care practitioners."

More information: Sukanya Srinivasan et al. Delivering Interconception Care During Well-Child Visits: An IMPLICIT Network Study, *The Journal of the American Board of Family Medicine* (2018). [DOI: 10.3122/jabfm.2018.02.170227](https://doi.org/10.3122/jabfm.2018.02.170227)

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