

Is home management by remote self-monitoring an alternative for women with intermediate- and high-risk pregnancies?

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Credit: Dr. Zizzo

In a study published in *Acta Obstetrica et Gynecologica Scandinavica* that included 400 women with intermediate- and high-risk pregnancies, self-

monitoring—in which the women themselves collected blood pressure, temperature, cardiotocography and other parameters (including blood samples in selected cases) and transferred the information to healthcare professionals using a mobile device platform—was a viable substitute for in-person visits.

Outcomes were comparable to or better than reported with inpatient care. No severe maternal complications were observed. Nine fetal or [neonatal deaths](#) occurred, all secondary to malformations, severe fetal growth restriction, extreme prematurity, or lung hypoplasia. None of the deaths were attributable to the self-monitoring program.

"Home-monitoring including remote self-monitoring of fetal and maternal well-being in intermediate- and high-risk pregnancies seems to be a safe alternative in selected cases to inpatient or frequent outpatient care," said lead author Anne Rahbek Zizzo, MD, Ph.D. of Aarhus University Hospital, in Denmark.

More information: Anne Rahbek Zizzo et al, Home management by remote self-monitoring in intermediate- and high-risk pregnancies: A retrospective study of 400 consecutive women, *Acta Obstetrica et Gynecologica Scandinavica* (2021). [DOI: 10.1111/aogs.14294](https://doi.org/10.1111/aogs.14294)

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