

Telehealth could improve access to health care for pregnant mothers, their infants

August 4 2022, by Nicole Rideout







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Replacing or supplementing in-person maternal care with telehealth generally results in similar and sometimes better outcomes than in-person care alone, Oregon Health & Science University researchers have found.

The study, published last week in the *Annals of Internal Medicine*, follows the widespread, rapid implementation of telehealth during the coronavirus <u>pandemic</u>, when physicians suddenly relied on video or phone calls for many types of routine appointments.

"The COVID-19 pandemic and the heightened demand for telehealth services we have seen over the past several years puts us in a unique position as clinicians, where we are now able to reevaluate and reimagine how we deliver care," said lead author Amy Cantor, M.D., M.P.H, associate professor of medical informatics and clinical epidemiology, family medicine and obstetrics and gynecology in the OHSU School of Medicine. "The results of this study are encouraging because they indicate that telehealth could improve and expand health care options, especially for underserved communities and those who may face barriers to accessing traditional care."

The health of mothers and their infants is reliant on access to high-quality maternal health care. Attentive care throughout pregnancy allows providers to identify health conditions that may increase the risk for poor outcomes, and provides an opportunity for prevention and treatment of any complications.



There is little evidence to support the idea that the traditional approach to maternal care—relying on in-person visits alone—is best. When the COVID-19 pandemic suddenly limited access to in-person care, physicians turned to telehealth services, providing the opportunity to rethink how care could successfully be delivered. Considering the disproportionately high rates of maternal morbidity and mortality in the United States, as well as extreme health disparities, researchers are now considering the use of telehealth as a strategy to expand and improve the delivery of maternal health care.

Cantor's team conducted a rapid review that included 28 randomized controlled trials and 14 observational studies of nearly 45,000 women. The aim was to understand the effect of telehealth as a supplement to or replacement of in-person maternal health care, compared with in-person care alone, on important health outcomes for <u>pregnant</u> adults and adolescents and their infants.

Researchers found that when telehealth-delivered care was used to supplement or replace in-person maternal care services, <u>clinical</u> <u>outcomes</u> and <u>patient satisfaction</u> were similar to in-person care alone—and sometimes better.

In particular, the study found telehealth strategies were especially promising for certain health services, such as the treatment of postpartum depression and remote monitoring of conditions like diabetes and hypertension during pregnancy. And for low-risk pregnancies, telehealth could replace some general in-person maternity care.

Despite the study's promising findings, Cantor said the effect of telehealth on mothers' access to care remains unclear, highlighting an ongoing need to evaluate and improve health equity. Looking ahead, Cantor said future research should focus on larger studies that examine effects of telehealth on vulnerable populations, such as those living in



rural areas, and evaluate outcomes based on population characteristics in order to better understand the effect of telehealth on health disparities.

More information: Amy G. Cantor et al, Telehealth Strategies for the Delivery of Maternal Health Care, *Annals of Internal Medicine* (2022). DOI: 10.7326/M22-0737

Provided by Oregon Health & Science University

Citation: Telehealth could improve access to health care for pregnant mothers, their infants (2022, August 4) retrieved 26 April 2024 from https://medicalxpress.com/news/2022-08-telehealth-access-health-pregnant-mothers.html

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