

Where do reproductive-age women receive preventive health care?

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While preventive health care is usually associated with primary care providers, a majority of office visits for preventive services among reproductive-age women happened with obstetrician-gynecologists (OB-



GYNs), a University of Massachusetts Amherst study shows.

Even among reproductive-age women with <u>chronic health conditions</u>, over 40% of preventive care visits were with OB-GYNs. The study's findings also reveal that certain recommended services rarely occurred in any setting. For example, screening for depression happened in only 6% of primary care visits and just under 4% of visits with OB-GYNs.

Health services researcher Laura Attanasio, assistant professor of health policy and management in the University of Massachusetts School of Public Health and Health Sciences, is lead author of the study published in *Health Services Research* that examined services that women—especially those with chronic conditions—received in preventive visits since the Affordable Care Act was passed in 2010.

"Preventive care is important for helping people optimize their wellness," Attanasio says. "There have been various policy measures over the years to try to increase people's use of preventive care, including a provision in the Affordable Care Act, which required that certain <u>preventive services</u> be covered at no cost to patients for that visit or that service."

Typically, these initiatives are "aimed at primary care, which doesn't necessarily account for the fact that, in fact, reproductive-age women are largely seeing OB-GYNs for preventive care," she adds.

Attanasio and team analyzed data from 2011 to 2018 from the National Ambulatory Medical Care Survey of office-based physicians. Specifically, they looked at preventive care visits among reproductiveage women in an OB-GYN office or generalist physician setting—either a <u>family practice</u>, internist or pediatrician.

The data provides a national sample based on visits rather than on the



care individuals received over time.

"When we looked at the services that were provided by physician type, we found not surprisingly that OB-GYNs emphasized more reproductiverelated services—things like pap tests, pelvic exams and provision of contraceptive medications," Attanasio says. "Whereas in general practitioner visits the non-reproductive-related services were more common—things like lipid tests, glucose tests for diabetes and a complete blood count."

The patterns were similar in the overall reproductive-female patient population and when the sample was limited to reproductive-age women with chronic conditions, including depression, diabetes, asthma, high blood pressure and high cholesterol.

Some 30% of visits with generalist physicians included lipid testing for cholesterol levels, compared to an "astonishingly low" 2.8% of visits with OB-GYNs, Attanasio says.

"On the flip side, some reproductive-related services may be underprovided in primary care visits," she says. "We can just see that there are pretty big differences across physician specialty, including for women with chronic conditions."

There are reasons for that, Attanasio points out. Preventive care guidelines are updated frequently, requiring changes in clinical practice, and the guidelines may differ across professional organizations. The study's findings can inform additional research to determine where reproductive-age women—and particularly those with <u>chronic conditions</u> —should optimally receive preventive health care services.

The paper concludes, "Our results provide baseline information about the frequency of services in preventive visits; given the slow and uneven



incorporation of new guidelines into clinical practice, trends in service provision are likely to persist."

More information: Laura Attanasio et al, Preventive care visits with OB / GYNs and generalist physicians among reproductive-age women with chronic conditions, *Health Services Research* (2022). DOI: 10.1111/1475-6773.14100

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