

ILLNESS IN PREGNANCY & 1 YEAR POST PARTUM

Jody Ann
Reece

Background

- In 2013 the WHO constituted a Maternal Morbidity Working Group which defined non severe maternal morbidity as *'any condition that is attributed to or aggravated by pregnancy and child birth which has a negative impact on the woman's wellbeing'* (Firoz 2013).
- Definition Challenges
 - Nebulous
 - No agreed comprehensive and common methodology
- For severe acute maternal morbidity (SAMM) or 'near miss', an internationally agreed criteria is established and is currently being used at secondary and tertiary levels to investigate severe morbidity associated with a high risk of maternal mortality (Souza 2011).

Objective

- This paper describes the estimation of maternal morbidity in Jamaica by using the following measures as proxies:
 - Rate and reason for hospital admission in the antenatal and postnatal period
 - Patient reporting of chronic illness in the postnatal period

Method

- Data on health status of women (as reported by mothers) during and after pregnancy was collected as part of the Jamaican Birth Cohort Study (JA KIDS)
- There were two follow up contact points : 9 - 12 months and 18 - 22 months after giving birth.
 - At 9 - 12 months , the research team attempted to interview all women who had been recruited into the study via telephone with 78.1% interview and 1 .0 % refusal rate s (7,609 / 9,742).
 - At 18 - 22 months, a random subsample of 35% of women (3,409 / 9,742) was targeted with 2,450 (25%) contacted via telephone and 1,013 (10%) in person .

Variables

- *Mothers Reports of Health during current pregnancy*
 - Mothers' self reported symptoms, conditions or complaints during the pregnancy
 - Rates of admission (proxy of severe morbidity during pregnancy)
- *Mothers' Self Reported Health Status at 9 & 18 Months post natal*
 - Chronic Illnesses
 - Hospital Admissions (number and reasons)

Illnesses in Pregnancy

- The most commonly reported conditions were:
 - Frequent urination (64.8%)
 - Oedema (44.5%)
 - Back pain (40.9%)
 - Abdominal pain (40.9%).
- Participants also reported more serious conditions such as hypertension (14.1%), protein in urine (12%) and diabetes (2.7%) and seizures (1%).

Admissions during Pregnancy

- Overall, 19.9% of mothers interviewed reported that they were admitted to hospital while pregnant with the index child. (Not including labour & delivery)
- The majority of respondents (80.8%) reported a single admission while 19.2 reported being admitted between 2 – 4 times.
- No significant differences by Age, SES or Education
- For multiple admissions: mothers were significantly older than mothers with a single admission
- The main reasons for admission during pregnancy were hypertension (19.2%), abdominal pain (16.4%), nausea / vomiting (10.3%), and vaginal bleeding (6.9%).

Chronic Illnesses

Proportion

- When asked at 9-12 months and 18-22 months post natal 22.8% and 20.7 % of all patients questioned reported chronic physical illness respectively.

Most commonly reported

If yes, what type of chronic illness?	9 -12 months	18 -22 months
Hypertension	48.9	49.1
Asthma	23.5	19.8
Diabetes	7.1	8.0
Sickle cell anaemia	3.3	3.9
Seizures	2.7	2.1
Other:	8.2	11.3

Admission 9 & 18 Months Post Natal

- At 9 – 12 months post natal, 5.4% of participants reported that they had been admitted to hospital.
- This compared with 3.5% of the participants interviewed at 18 months.
- At nine and eighteen months post natal, there were no significant differences between the mean age of mothers who were admitted to hospital and those who were not admitted to hospital.
- There were also no significant differences between admission to hospital and level of education and socioeconomic status at 9 and 18 months post natal.

Reasons for Admission 9 – 12 Months

Reasons for Admission @ Nine Months	Responses	
	N	Percent
Hypertension	128	31.2%
Caesarean Section infection	22	5.4%
Appendix / Gallstone surgery	18	4.4%
General infection	15	3.7%
Vaginal) Bleeding	14	3.4%
Trauma	14	3.4%
Abcess	13	3.2%
Cardiac Condition	12	2.9%

Reasons for Admission 18 – 22 Months

Reasons for Admission @ 18 Months ^a	N	Percent
Hypertension	7	16.30%
Other respiratory	3	7.00%
Hepatitis / Other GI	3	7.00%
Foetal Wellbeing	2	4.70%
High Risk	2	4.70%
PV (Vaginal) Bleeding	2	4.70%
UTI	2	4.70%
Depression	2	4.70%
Append / Gallstone surgery	2	4.70%
C/S infection	2	4.70%
General infection	2	4.70%

Summary

- In some instances older, less educated and poorer mothers reported more issues with their health during both the antenatal and postnatal periods.
- The data also indicated that hypertension (both as a pre-existing condition and as a complication of pregnancy) continues to be a major problem in maternal health.
- This data also indicated that it may be important to follow mothers for at least one year post delivery.

Limitations

- Reliance on Maternal Self Report vs. Review of Medical Records
 - Faulty recollection / unawareness of reasons for admission
 - Inability to accurately classify severity of illness
- No standardized measure of classify non severe maternal morbidity