Right-Sizing Prenatal Care

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https://ihpi.umich.edu/news/right-sizing-prenatal-care

During her training, OB-GYN Alex Peahl noticed a recurring theme among some of her pregnant patients. After their 20-week ultrasound to check anatomy, health and gender of the baby, she sometimes wouldn’t see them again until weeks before their due date.

“Patients would miss multiple prenatal visits, and the reasons were understandable. Some women had to miss work or needed childcare in order to make appointments. This made me start thinking about how we could right-size prenatal care to more efficiently and effectively serve our patients.”

As it turned out, prenatal care delivery recommendations hadn’t changed since before World War II. Nor do they match what many patients both want and need, Peahl’s two recent studies in Obstetrics and Gynecology suggest.

And just as Peahl’s research on changing prenatal health care models was underway, an unexpected catalyst sped up change: COVID-19. To reduce risk of exposure, clinics began exploring alternative ways to provide care, including virtual visits and consolidated appointments — such as getting the Tdap vaccine and diabetes screening at the same visit instead of separate ones.

“The pandemic has forced us to rethink an outdated system and redesign prenatal care to meet patients’ needs. We are focused on delivering care around services rather than an arbitrary schedule. In doing so, we’ve been able to make plans more flexible, patient-centered and give patients a voice in the care and services they want in pregnancy.”

Pregnancy Care Preferences

Based on Peahl’s study of 300 postpartum patients, the average patient desires 10 visits during pregnancy compared to the recommended 12 to 14. While almost two thirds of patients preferred fewer visits than currently recommended, 15% wanted more visits.

Most patients also reported comfort with home monitoring skills, including measuring weight, blood pressure and fetal heart tones, which [became] more common during the pandemic.

However, the majority of patients also wanted contact with their care teams between their in-person appointments, such as through phone calls or online messages with a nurse.

“Many women said they wanted prenatal health check-ins without the burden of in-person visits. They would also like their care to be delivered differently.”

Some women wanted more postpartum visits, at least two or three. Others showed interest in alternative care models, such as group sessions where pregnant patients could share experiences with providers and each other at the same time.

And providers are finding it’s not just about medical needs … patients also shared interest in seminars with psychiatry, social work or community partners to gain information about coping in pregnancy.

“We usually think of prenatal care as a medical service, but psychosocial support, education and guidance can also improve outcomes. Some people will be comfortable with routine services, but we need to take a flexible, holistic approach to serving patients based on their unique needs during pregnancy.”

It’s important to personalize prenatal care models as well, to fit each patient’s clinical, social, and financial needs. “Tailoring prenatal care to meet patients’ medical and support needs, rather than delivering care in a one-size-fits-all fashion, will improve care value and patient experience. A customized approach to pregnancy-related services can also optimize costs and outcomes.”
The word *postpartum* has negative connotations for many of us, who are used to hearing about *postpartum depression* and other health issues in the news – and living through those issues with our own families and friends. But the word simply refers to the time period spanning just after birth.

Those few months where baby is freshly born and mom is recovering from one of the most intensely demanding physical experiences on earth. In this busy, back-to-business culture, so many women, for a myriad valid reasons, are rushed back in to life after childbirth with little to no special recovery care. Following are excerpts from an important Mama Circle interview with Doula Erica Chidi.

**In our culture, as women and as families, so much of our attention after birth goes straight to parenting this new child and getting mom on her feet quick as can be. But in other cultural traditions, new moms are given official periods of deep care. Tell us more!**

It’s true, in our culture, motherhood is very much child-first, mother-second. In other cultures, after a woman gives birth, both she and her baby are nurtured and she’s gently initiated into her new role as a mother. She’s allowed to do nothing but rest and bond with her baby for at least 40 days.

The healing trajectory for a new mother should be holistic, addressing both her body and her spirit. She should be encouraged to process her birth experience with her partner, rest, and have access to healthful foods that will help replenish her body. Eating well during the early postpartum period can speed up and smooth the recovery process, which in turn will help her be prepared to exercise, when she feels the time is right, which is typically around six to eight weeks after birth.

Immediately after birth, a woman’s body experiences a rapid flux. The hormonal balance is disrupted, there’s significant blood and fluid loss, and milk production begins, all within 24 hours. Plus you now have a lovely new babe to attend to, so it makes perfect sense that these ancient traditions were created solely to help make that transition easier.

In China, they adhere to 40 days of rest after birth, known as the confinement period. During this time, new mothers consume lactation-promoting soups and herbal tonics and stay away from cold fluids.

In Mexico, this is called the cuarentena, and again rest is the rule, and only certain restorative foods are permitted. A new mother’s body is also considered to be “open” and vulnerable to cold, so her abdomen is wrapped in a soft cloth.

*Editor’s note:* Restrictive clothing and heavy-bundling that may overheat mother or baby must be avoided.

In both traditions, new mothers don’t do housework or partake in strenuous activities; female relatives and friends take over errands and chores. The new mothers are also educated as they heal, taught to breastfeed and how to care for themselves and their babies.

**What can new mothers, some working with narrow maternity leaves, do to incorporate healthy traditions into their lives?**

~ Rest, as much as possible. Try sleeping when your baby sleeps. Short power naps during the day will restore your energy quickly. Some sleep is better than none.

~ Up the fluids. Let water, soups, fresh juices and herbal teas be the cornerstone of your diet in the first few weeks.

~ Iron-protein-fiber. Nutrient-dense foods will help you feel get back on your feet faster.

~ Get support. Communicate your needs and practice self-care. Activities like body-work and acupuncture in the early postpartum period can make a big difference.

~ Key principle: Take it slow, be gentle on yourself and cherish the time you have at home with your loved ones. Also, trust your intuition and don’t be afraid to ask for help if you’re experiencing any difficulties. A session with a postpartum doula or a visit with a lactation professional can make a world of difference during those early weeks.*

*Call the MVPN Perinatal Coordinator at 315-732-4657 to hear up-to-date information on local resources for postpartum parents and newborns.*
Local Resources

Mohawk Valley LACTATION
Anna Mroczek, RN, IBCLC
2200 Genesee St. Suite 204
Utica, NY 13502
315-497-7080
anna@mohawkvalleylactation.com
www.mohawkvalleylactation.com

LACTATION VISIT
IN CLIENT HOME/OFFICE OR TELEHEALTH (1.5-2 HOURS)
A typical consultation includes:
- Complete intake of health history
- Observation of a feed
- Assessment of the feeding issues
- Oral exam and sucking functional assessment of your child
- Discussion of any concerns and questions
- Individualized care plan to address your concerns
- Referrals if needed to local care providers
- Two week follow up via secure messaging system

* Some health insurance plans now cover services *

January - June 2022
Appointments are available
at no cost to eligible families
in Oneida & Herkimer Counties
through a partnership with
MVPN at The Neighborhood Center

Funded by the NYS Department of Health

Double Up Food Bucks NYS
A nationwide fruit and vegetable incentive program that provides SNAP (Supplemental Nutrition Assistance Program) customers with a dollar-for-dollar match to increase affordability and access to fresh healthy foods at farmers markets, corner stores, and grocery stores.

In New York State, Double Up has facilitated sales to more than 32,000 customers at 180+ sites in 29 counties.

Anyone with a SNAP/EBT card can sign up for free!

In Utica, SNAP customers can use the program at Bargain Grocery and Oneida County Public Market.

Customers can just bring their SNAP/EBT card to a participating location, visit the front desk or information booth, and staff will sign them up with a Double Up Card that can be used between locations.

Pandemic EBT cards can also be used with Double Up Food Bucks.

To learn more and to see a list of participating sites, please visit the program webpage
www.doubleupnys.com
or call 1-800-682-5016.

Moheawk Valley Breastfeeding Network
mvbreastfeedingnetwork.com/

- Promoting, encouraging and educating families and health care professionals about the importance of breastfeeding.
- Providing information and training to improve the health of women, children, and families.
- Hosting multi-site BREASTFEEDING CAFÉS for moms to support each other, socialize and receive clinical support.

For in-person Cafés and virtual events, see

Facebook:
Breastfeeding Café by MV Breastfeeding Network

Over 700 women die each year in the U.S. from issues related to pregnancy or delivery. Two thirds of these pregnancy-related deaths could be prevented if people were better informed.

Women know their own bodies better than anyone and can often tell when something does not feel right.

The Hear Her campaign supports efforts to prevent pregnancy-related deaths by sharing potentially life-saving messages about "Urgent Maternal Warning Signs."

The campaign also seeks to encourage everyone who supports pregnant and postpartum women to really listen when she tells you something doesn't feel right. This includes partners, friends, family, co-workers, and providers. Acting quickly could help save her life.

Learn more right now at:
https://www.health.ny.gov/community/pregnancy/hear_her/
Our Mission
To improve birth outcomes and perinatal, child and family health; and to facilitate community collaborations and advocacy

NY State of Health NAVIGATOR PROGRAM

NYS Health Insurance Navigators help individuals, families and small businesses find the right plans for their needs.

Services are free, private and conveniently located.

Language interpretation can be arranged.

* In-person appointments are held at 3 Parkside Court, Utica and other sites in Oneida & Madison Counties.

* Telephone appointments are available.

Contact:
315.732.4657 or 1.877.267.6193 or www.newfamily.org

COMMUNITY HEALTH WORKER PROGRAM
Outreach and Home Visiting in Oneida and Herkimer Counties

Community Health Workers help women of childbearing age to improve their health and the health of their families. CHWs work with women before having babies, during pregnancy, postpartum, or between pregnancies. They educate, refer to services, and follow up to support health and wellness, including help with:

- health insurance
- doctors
- dentists
- baby needs
- family planning
- nutrition/food resources
- counseling
- prenatal planning
- breastfeeding support
- safe infant sleep education
- dental health education
- quitting smoking
- postpartum support
- parenting resources
- and more

Call: 315.737.3474 (Herkimer County) or 315.570.0229 (Oneida County)

www.neighborhoodctr.org/services/child-care-family-services/community-health-worker-services

A “Maternal and Infant Community Health Collaboratives” program funded by the NYS Department of Health

PERINATAL OUTREACH AND EDUCATION
Meetings and Community Collaborations:
- Healthy Babies Consortium
- Infant Safe Sleep Coalition

Trainings for Providers and Consumers:
- Infant Safe Sleep
- Shaken Baby Syndrome
- Cavity-Free Kids
- Healthy Babies Are Worth the Wait
- Perinatal Mood and Anxiety Disorders
- Breastfeeding Essentials for Providers
- Breastfeeding Workshop for Families

Call: MVPN Perinatal Coordinator 315.732.4657

Funded by the NYS Department of Health

INFANT SAFE SLEEP - CRIBS

Expectant moms and new families may be eligible to receive a Pack ’n Play -- if they have no means to obtain an infant crib or bassinette. The crib program requires an application form, a meeting with a Community Health Worker (CHW), and an education session on Infant Safe Sleep.

Contact:
Perinatal Coordinator 315.732.4657
CHW Supervisor 315.801.5010