

Midwifery Continuity of Care during Pregnancy, Birth and the Postpartum period: a matched cohort study.

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Abstract

Objective: To compare labour outcomes in a midwifery continuity of care (MCoC) model to standard midwifery care. Design: Matched cohort study. Setting: Public healthcare during pregnancy and childbirth, Stockholm, Sweden. Population: Women giving birth at Karolinska University Hospital site Huddinge in Stockholm between January 1st, 2019 to August 31st, 2021. Methods: Propensity score matching was applied to obtain a matched set from the standard care group for every woman in the MCoC model. Based on the matched cohort, we estimated risk ratios (RR) for binary outcomes with 95% confidence intervals (CI). Main Outcome Measures: Interventions during labor, mode of birth, and preterm birth (<37 gestational weeks). Results: Compared with standard care, women in the MCoC model were more likely to give birth spontaneously (RR 1.06 95% CI 1.02-1.10), and less likely to have an elective caesarean section on maternal request (RR 0.24 95% CI 0.11-0.51). The risk of preterm birth was reduced in the MCoC group (RR 0.51 95% CI 0.32-0.82). Conclusions: The MCoC model was associated with fewer medical interventions and improved maternal and neonatal outcomes.

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