# Preterm Birth and Continuation of Child's Follow-up Care After Hospital Discharge

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## Background

- Preterm birth is associated with neonatal intensive care unit (NICU) admission and exerts significant physical and emotional toll on immediate family members including the mother.
- Perinatal guidelines by AAP and ACOG requires that preterm babies should be examined weekly or semi-monthly during the immediate period after discharge from the hospital.



# Objectives

• This study examined the factors that are associated with use of child's follow-up care namely attending a well-baby checkup after NICU discharge among women with preterm babies.

#### Research questions:

- a) What is the relationship between preterm birth with subsequent admission into the NICU and continuation of care namely the use of health services such as taking the new baby to a doctor, nurse, or other health care worker during the first week after NICU discharge or for a well-baby checkup postdischarge.
- b) What are the factors that are associated with continuation of the use of health services after NICU discharge?



# Objectives

- To determine the:
  - Percentage of women with preterm birth and NICU admission who took their newborn for hospital first week visit and well-baby checkup after NICU discharge.
  - Factors that may influence mothers' attendance at a well-baby checkup after NICU discharge.



#### **METHODS**

- Pregnancy Risk Assessment and Monitoring System (PRAMS)
  - Cross-sectional surveys of newly delivered moms who had live-born infants within 2 to 6 months before being contacted
  - Multi-state (33 states) data for United States from 2004-2009
  - Linked with birth certificates



#### **METHODS**

- Sample size (combined 2004-2008 PRAMS)
  - Women who had preterm or very preterm babies admitted into the NICU
- Data analysis
  - Weighting of complex survey data
  - Used 'svy' command of STATA 10
  - Analysis
    - Bivariate and multivariate analyses
    - Chi-squared, logistic regressions; p=0.01



#### Results

- Analysis sample = 44,307
  - -Term = 11,915 (26.9%)
  - Preterm = 32,395 (73.1%)
- Population estimate = 980,785

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	Doctor visit 1st week % (p-value)	Well baby check up % (p-value)
Term		
Yes	91.61 (0.00)	98.45 (0.1288)
No	8.388	1.55
Preterm		
Yes	95.19	98.07
No	4.8	1.93



#### Characteristics of the Mothers in the Study

		Percentage	99% CI
Marital <status< th=""><th>Married</th><th>58</th><th>(56, 59)</th></status<>	Married	58	(56, 59)
	Other	42	(41, 44)
Age (13-53)	Less than 18	3.7	(3.2, 4.2)
	18-24	30	(29,31)
	25-29	26	(24, 27)
	30-34	24	(22, 25)
	35-39	13	(12,14)
	40+	3.9	(3.4, 4.5)
Parity	Primigravida One or more prior birth Missing	43.2 55.9 0.9	(42, 45) (55, 57) (.59, 1.2)



#### Characteristics of the Mothers in the Study

		Percentage	99% CI
Income	Less than \$10,000	20.22	(19.19. 21.29)
	\$10,000 to \$14,999	8.96	(8.16, 9.82)
	\$15,000 to \$19,999	6.4	(5.71, 7.17)
	\$20,000 to \$24,999	6.11	(5.52, 6.77)
	\$25,000 to \$34,999	9.42	(8.61, 10.3)
	\$35,000 to \$49,999	9.04	(8.26, 9.88)
	\$50,000 or more	31.18	(29.89, 32.5)
	Missing	8.67	(7.94, 9.47)
Education	Less than high school	4.1	(3.6, 4.7)
Ladeation	High School	45	(44, 47)
	College	51	(44, 47) (49, 52)



### Characteristics of the Mothers in the Study

	Percentage	99% CI
Race		
White	66.77	(65.62, 67.90)
Black	24.39	(23.41, 25.39)
American Indian	0.85	(0.71, 1.02)
Asian	3.18	(2.79, 3.60)
Others	4.42	(3.9, 5.00)
Missing	0.39	(0.26, 0.59)
Ethnicity		
Hispanic	13.6	(12.73, 14.52)
Non-Hispanic	80.86	(79.81, 81.86)
Missing	5.54	(5.00, 6.14)
Prior Medicaid		
No Medicaid before preg.	81.6	(80.51, 82.63)
Medicaid before preg	17.98	(16.96, 19.05)
Missing	0.42	0.26, 0.68)





# Logistic regression predicting attendance at a well-baby checkup

		Odds Ratio	P-value	99% CI
Refe	erence group (younger			
	18-24 25-29 30-34 35-39 40+	12.08 46 12.089 33.71 14.87	0.000 0.000 0.001 0.000 0.004	2.19, 66.76 8.04, 266 1.77, 82.13 3.53, 322.27 1.31, 169.19
Reference group (Very preterm)				
	Preterm	0.31	0.001	0.12, 0.80



#### Conclusion

Relatively young maternal age between 25 and 29 years could predispose women to inadequate maternal attendance at well baby check up post discharge from a NICU.



# Nursing Implications

- Support groups for mothers who are within the age of 25-29 years who have a baby in the NICU
  - Nurses can be advocates for support groups
  - Encourage mom to attend support groups
- Follow-up services at clinics and doctor offices
- Teaching in hospital and in home
  - Understand importance of doctor visits

