Results of Topic Selection Process & Next Steps

- Improving Postpartum Services Uptake for High Risk Women is not feasible for a full systematic review due to the limited data available for a review at this time. This topic could potentially be considered for new research in comparative effectiveness.

Topic Description

Nominator(s): Organization

Nomination Summary: The nominator is interested in interventions to increase uptake of postpartum services for women who have experienced poor maternal outcomes or who have chronic medical conditions. The increased uptake of postpartum services by these women may decrease the risk of complications in the postpartum period or subsequent pregnancies.

Staff-Generated PICO

Population(s): Postpartum women after a high risk pregnancy

Intervention(s): Postpartum supportive services (e.g., educational programming; home visits provided by nursing, social work or other supportive professionals; peer support; telephone, texting, or internet-based supports; screening protocols)

Comparator(s): Usual care

Outcome(s): Maternal outcomes for this and subsequent pregnancies including parenting skills, mental health, quality of life (QoL), physical health, mortality; process outcomes such as use of services, adherence to clinical recommendations and retention or follow-up

Timing: Postpartum, including immediately postpartum up to one year postpartum

Key Questions from Nominator: For high-risk postpartum women receiving public payment for care, does provision of intensive postpartum services improve appointment uptake?

This question was revised to include all women with high-risk: women who have underlying chronic medical conditions or are at other risk for complications following birth. Many of the products and publications located do not specifically address high-risk populations, however, the evidence or recommendations may be relevant to these women.

While the topic nomination was interested initially in the uptake of postpartum appointments, it was expanded to include uptake of postpartum supportive services; and
any additional postpartum support services in addition to routine services. The outcomes were broadened to include all health related outcomes.

Considerations

- Improvements in postpartum care and adherence to follow-up regimens can increase identification of and follow up for potential poor maternal health. It is important that identification of any postpartum risks or conditions happens within approximately 6 weeks, to accommodate time-limited insurance coverage.

- Even with an expanded population and interventions of interest, our search retrieved few studies about interventions to increase uptake of postpartum services and interventions about additional postpartum services for women. Thus this topic will not go forward for further product development as a systematic review by the EHC Program.