



The Silent Morbidities: Early Results of the MAMMI study (Maternal health And Maternal Morbidity in Ireland)

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<u>Maternal health</u> <u>And</u> <u>Maternal</u> <u>Morbidity in</u> <u>Ireland</u>



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Sincerest thanks to

- The women who are taking part
- The midwives and midwifery students who circulate information
- The Rotunda Hospital for their collaboration
- The team members:

Margaret Carroll (MAMMI 2), Deirdre O'Malley (sexual health), Francesca Wuytack (pelvic girdle pain)

- Rebekah Maguire and Sophie Clare who worked with us on the MAMMI study summer 2012 and Eleanor Russell and Marie O'Shea who are working with us April-June 2013
- The Health Research Board (**HRB**) for funding the MAMMI study (UI strand) and MAMMI 2, commencing soon in Galway).



Context (1)



- Image: selection of the selection of the
- There are no publically available data on maternal health and health problems following discharge from the maternity hospitals in Ireland
- Women's attendances at health services or readmissions to hospitals are not linked to their maternity records (i.e. there is no connectivity between their records)



Context (2)



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- A confidential enquiry into maternal deaths commenced in 2009
- Data collection on severe maternal morbidity commenced in 2011
- A national maternity record (computerised in all hospitals) is planned

However

 General health morbidities (incontinence, perineal pain, and sexual health problems) are not captured therefore the MAMMI study is timely and may identify risk factors for morbidities that may be amenable to intervention



<u>Maternal health</u> <u>And</u> <u>Maternal</u> <u>Morbidity in</u> <u>Ireland</u>



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- Aim and objectives of MAMMI study
- Brief overview of study methodology
- Preliminary findings

(from women recruited up to March 2013, n=725)

Key points and future work



<u>Maternal health</u> <u>And</u> <u>Maternal</u> <u>Morbidity in</u> <u>Ireland</u>



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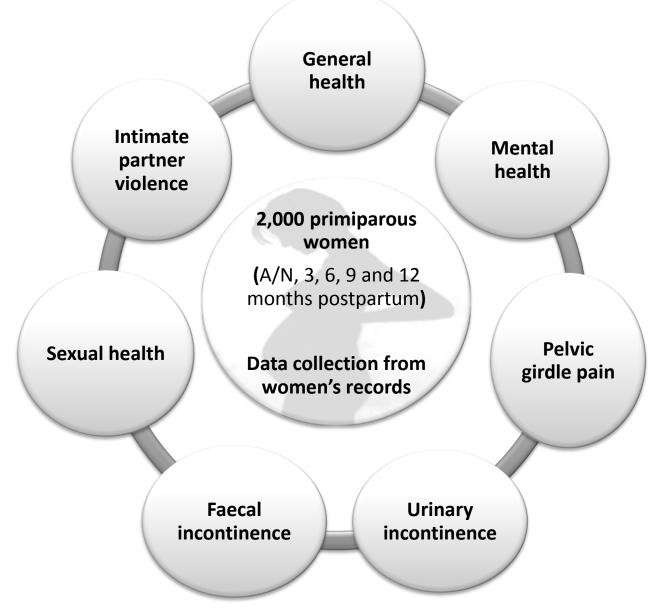
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Key points and future work









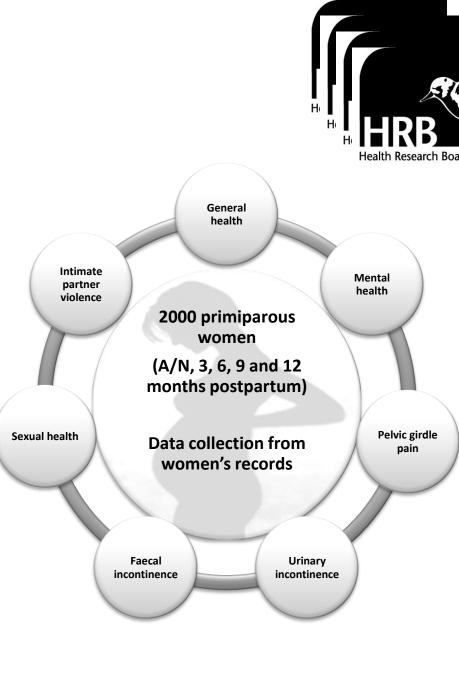
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Objective (i)

to identify prevalence of morbidities up to 12 months postpartum for women having their first baby

Objective (ii)

to identify associated factors e.g., age; Body Mass Index (BMI); mode of birth; birth weight





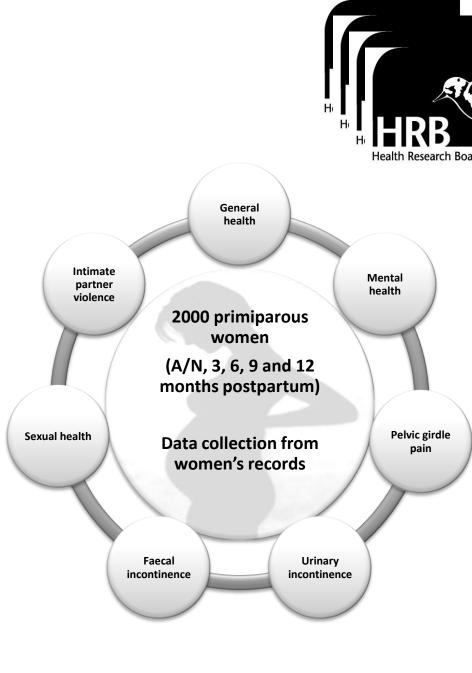
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Objective (iii)

to identify the health service-seeking and selfhelp behaviours of subsamples of women experiencing morbidities

Objective (iv)

to identify the risk factors for morbidities that may be amenable to intervention





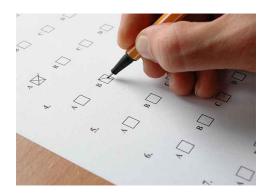
Mixed methods design



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A cohort study with 2,000 first-time mothers: public, private, semiprivate. Women are recruited at booking visit in one large maternity hospital (2nd site to follow)

- Self completion survey
 - antenatally and at 3, 6, 9
 and 12 months after birth
- Data collection from women's records
- Interviews with sub-samples (n=20-30) of women experiencing morbidities











- Preliminary data
 - (~40%) of primiparous women are being offered information on the MAMMI study
 - Of those given the information, about two in five complete the survey
 - Response rate (~40%)





Participant profile- age

Age group	The MAMMI Study (n = 724)	%	Site Hospital 2011 (n = 4151)	%
Up to 24	62	8.6	976	23.5
25 to 29	166	22.9	1137	27.4
30 to 34	304	42.0	1314	31.7
35 to 39	162	22.4	581	14.0
40 +	30	4.1	143	3.4
Total	724	100	4151	100



Participant profilestatus



Status	The MAMMI Study (n = 723)	%	ESRI 2011 (n = 74,377)	%
Married	448	62.0	48,492	65.2
Divorced/ separated	2	0.3	1,063	1.4
Single	33	4.6	24,667	33.2
Living with partner	187	25.9		
In relationship, not living together	47	6.5		
Other	6	0.8	64	0.1



Participant profilenationality



Nationality	The MAMMI Study	%	Site Hospital 2011	%
	(n = 720)			
Irish	496	68.9	5957	65.35
EU	172	23.9	1929	21.16
Non EU	38	5.3	1217	13.35
Unknown	14	1.9	13	0.14



Participant profile-BMI



Nationality	The MAMMI Study (n = 666)	%
Underweight	50	7.5
Normal weight	438	65.8
Overweight	113	17.0
Obese	53	8.0
Very obese	12	1.8
Total	666	100.0





Back pain and pelvic pain



	Back pain occasionally	Back pain often
12 months before pregnancy n=720	17.2%	6.3%





Back pain and pelvic pain



	Back pain occasionally	Back pain often
12 months before pregnancy n=720	17.2%	6.3%
At start of pregnancy n=720	30.4%	14.3%





Back pain and pelvic pain



	Back pain occasionally	Back pain often
12 months before	17.2%	6.3%
pregnancy n=720		
At start of pregnancy n=720	30.4%	14.3%
At 3 months postnatal n=125	37.6%	16.8%









	Back pain occasionally	Back pain often	Pelvic pain occasionally	Pelvic pain often
12 months before pregnancy n=720/533	17.2%	6.3%	2.:	1%
At start of pregnancy n=720/719	30.4%	14.3%		
At 3 months postnatal n=125/123	37.6%	16.8%		







	Back pain occasionally	Back pain often	Pelvic pain occasionally	Pelvic pain often
12 months before pregnancy n=720/533	17.2%	6.3%	2.:	1%
At start of pregnancy n=720/719	30.4%	14.3%	8.8%	1.5%
At 3 months postnatal n=125/123	37.6%	16.8%		







	Back pain occasionally	Back pain often	Pelvic pain occasionally	Pelvic pain often
12 months before pregnancy n=720/533	17.2%	6.3%	2.:	1%
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At 3 months postnatal n=125/123	37.6%	16.8%	9.8%	3.3%



Haemorrhoids and constipation



	Haemorr- hoids occasionally	Haemorr- hoids often
12 months	4.9%	1.5%
before		
pregnancy		
n=721		
At start of		
pregnancy		
n=692		
At 3 months		
postnatal		
n=121		





Haemorrhoids and constipation



	Haemorr- hoids occasionally	Haemorr- hoids often
12 months	4.9%	1.5%
before		
pregnancy		
n=721		
At start of	6.8%	3.2%
pregnancy		
n=692		
At 3 months		
postnatal		
n=121		





Haemorrhoids and constipation



	Haemorr- hoids occasionally	Haemorr- hoids often
12 months before pregnancy n=721	4.9%	1.5%
At start of pregnancy n=692	6.8%	3.2%
At 3 months postnatal n=121	21.5%	14.0%





Haemorrhoids and constipation



	Haemorr- hoids occasionally	Haemorr- hoids often	Constipation occasionally	Constipation often
12 months before pregnancy n=721/721	4.9%	1.5%	11.2%	3.9%
At start of pregnancy n=692/724	6.8%	3.2%		
At 3 months postnatal n=121/123	21.5%	14.0%		



Haemorrhoids and constipation



	Haemorr- hoids occasionally	Haemorr- hoids often	Constipation occasionally	Constipation often
12 months before pregnancy n=721/721	4.9%	1.5%	11.2%	3.9%
At start of pregnancy n=692/724	6.8%	3.2%	23.3%	13.1%
At 3 months postnatal n=121/123	21.5%	14.0%	33.3%	6.5%



Depression and anxiety



	Depression occasionally	Depression often	Anxiety occasionally	Anxiety often
12 months before pregnancy n=721/719	8.2%	2.6%	2.8%	1.7%
At start of pregnancy n=723/721	8.2%	1.7%	2.5%	0.8%



Depression and anxiety



	Depression occasionally	Depression often	Anxiety occasionally	Anxiety often
12 months before pregnancy n=721/719	8.2%	2.6%	2.8%	1.7%
At start of pregnancy n=723/721	8.2%	1.7%	2.5%	0.8%
At 3 months postnatal n=124/123	17.	7%		



Depression and anxiety



	Depression occasionally	Depression often	Anxiety occasionally	Anxiety often
12 months before pregnancy n=721/719	8.2%	2.6%	2.8%	1.7%
At start of pregnancy n=723/721	8.2%	1.7%	2.5%	0.8%
At 3 months postnatal n=124/123	17.	7%	10.6%	1.6%



EPDS: n = 688



	0 - 9	10 - 12	13 - 19	20 -
At start of pregnancy		53 (7.7%)	52 (7.6%)	4 (0.6%)





	On	On way
	exercise	to toilet
12 months	22.8%	18.1%
before		
pregnancy		
n=725/724		
At start of		
pregnancy		
n=723/719		
At 3 months		
postnatal		
n=124/124		







	On	On way
	exercise	to toilet
12 months	22.8%	18.1%
before		
pregnancy		
n=725/724		
At start of	33.5%	16.8%
pregnancy		
n=723/719		
At 3 months		
postnatal		
n=124/124		







	On	On way
	exercise	to toilet
12 months	22.8%	18.1%
before		
pregnancy		
n=725/724		
At start of	33.5%	16.8%
pregnancy		
n=723/719		
At 3 months	54.8%	39.8%
postnatal		
n=124/124		







	On exercise	On way to toilet	Drops/ just a little	More like a trickle	More than a trickle
12 months before pregnancy n=725/724/280	22.8%	18.1%	90.4%	8.6%	1.1%
At start of pregnancy n=723/719/303	33.5%	16.8%			
At 3 months postnatal n=124/124/75	54.8%	39.8%			





	On exercise	On way to toilet	Drops/ just a little	More like a trickle	More than a trickle
12 months before pregnancy n=725/724/280	22.8%	18.1%	90.4%	8.6%	1.1%
At start of pregnancy n=723/719/303	33.5%	16.8%	80.9%	15.8%	2.6%
At 3 months postnatal n=124/124/75	54.8%	39.8%			



Urinary incontinence



	On exercise	On way to toilet	Drops/ just a little	More like a trickle	More than a trickle
12 months before pregnancy n=725/724/280	22.8%	18.1%	90.4%	8.6%	1.1%
At start of pregnancy n=723/719/303	33.5%	16.8%	80.9%	15.8%	2.6%
At 3 months postnatal n=124/124/75	54.8%	39.8%	74.7%	10.7%	9.3%





	Passed wind, minor amount	Passed wind, major amount
12 months	33.8%	2.2%
before		
pregnancy		
n=720		
At start of		
pregnancy		
n=710		
At 3 months		
postnatal		
N=120		





	Passed wind, minor amount	Passed wind, major amount
12 months before pregnancy	33.8%	2.2%
n=720 At start of pregnancy n=710	40.1%	4.9%
At 3 months postnatal N=120		





	Passed wind, minor amount	Passed wind, major amount
12 months before	33.8%	2.2%
pregnancy n=720		
At start of pregnancy n=710	40.1%	4.9%
At 3 months postnatal N=120	35.0%	15.0%





	Passed wind, minor amount	Passed wind, major amount	Soiling, minor amount	Soiling, major amount
12 months before	33.8%	2.2%	8.3%	0.0%
pregnancy n=720/724/721				
At start of pregnancy n=710/722/722	40.1%	4.9%	3.5%	0.1%
At 3 months postnatal N=120/125/125	35.0%	15.0%		





	Passed wind, minor amount	Passed wind, major amount	Soiling, minor amount	Soiling, major amount
12 months before	33.8%	2.2%	8.3%	0.0%
pregnancy n=720/724/721				
At start of pregnancy n=710/722/722	40.1%	4.9%	3.5%	0.1%
At 3 months postnatal N=120/125/125	35.0%	15.0%	14.4%	0.0%





Pain during intercourse

	Pain during intercourse
12 months before	22.2%
pregnancy n=717	
At start of pregnancy n=685	16.1%
At 3 months postnatal n=72	27.8%





Pain during intercourse





	Pain during intercourse	Very satisfied with sex	Moderately satisfied with sex
12 months before pregnancy n=717/715	22.2%	49.7%	37.2%
At start of pregnancy n=685/688	16.1%	29.8%	39.2%
At 3 months postnatal n=72	27.8%		







Implications for health professionals

Do they tell us?

Do we ask?



Did you ever talk to a doctor or other health professional about controlling when you pass urine?

Key points: Women with stress incontinence (on exercise)		
Before pregnancy: 165 women out of 723 (23%)		
At start of pregnancy: 242 women out of 723	(34%)	
Since birth: 68 women out of 124	(55%)	

Did NOT talk to any health professional		
Before pregnancy, 155 out of 165 women with SI 94%		
At start of pregnancy, 211 out of 242 women with SI	87%	
Since birth, 50 out of 68 women with SI	74%	

Did you ever talk to a doctor or other health professional about controlling bowel motions?

Key points: Women with faecal incontinence		
Before pregnancy: 60 women out of 724 (8.3%)		
At start of pregnancy: 26 women out of 722 (3.6%)		
Since birth: 18 women out of 125	(14.4%)	

Did NOT talk to any health professional		
Before pregnancy, 50 out of 60 women83%with FI		
At start of pregnancy, 24 out of 26 women with FI	92%	
Since birth 11 out of 18 women with FI	61%	

Did you ever talk to a doctor or other health professional about pain during intercourse?

> Key points: Women experiencing pain during intercourse

Before pregnancy: 159 women out of 717	(22%)
At start of pregnancy: 110 women out of 685	(16%)
At 3 months: 20 women out of 72	(28%)

Did NOT talk to any health professional		
Before pregnancy 115 out of 159 72%		
women with pain on intercourse		
At start of pregnancy, 101 out of 110	92%	
women with pain on intercourse		
At 3 months, 17 out of the 20 women	85%	
with pain on intercourse		

Did you ever talk to a doctor or other health professional about depression?

Key points: Women experiencing depression	
Before pregnancy: 78 women out of 717	(11%)
At start of pregnancy: 71 women out of 723	(10%)
At 3 months: 22 women out of 72	(18%)

Did NOT talk to any health professional		
Before pregnancy: N/A		
At start of pregnancy, 54 out of 71 women with depression	76%	
At 3 months N/A		





	Yes	Νο
leakage or involuntary loss of urine?	24%	70.2%





	Yes	Νο
leakage or involuntary loss of urine?	24%	70.2%
leakage or involuntary loss of bowel motion?	19.8%	77.6%





	Yes	Νο
leakage or involuntary loss of urine?	24%	70.2%
leakage or involuntary loss of bowel motion?	19.8%	77.6%
sexual problems?	9.2%	86.6%





	Yes	Νο
leakage or involuntary loss of urine?	24%	70.2%
leakage or involuntary loss of bowel motion?	19.8%	77.6%
sexual problems?	9.2%	86.6%
feeling depressed or low?	50.4%	47.9%





Did a midwife or public health nurse ever Health Research Board ask you, since birth, about:

	Yes	Νο
leakage or involuntary loss of	23.8%	68.0%
urine?		
leakage or involuntary loss of	21.3%	71.3%
bowel motion?		
sexual problems?	6.6%	90.1%
feeling depressed or low?	58.2%	36.1%





So what can we learn from these









So what can we learn from these data?

Analysis of data from these 725 women show that

More than 1 in 3 participants experienced some degree of urinary incontinence at the start of pregnancy ...and most did not talk to a healthcare professional

18 women out of 125 experienced some faecal incontinence 3 months after birth, and only 7 of them talked to a healthcare professional about it.





So what can we learn from these data?

Analysis of data from these 725 women show that:

One in 4 participants experienced pain during intercourse and most did not talk to a healthcare professional.

One in 10 participants at the start of pregnancy were depressed, and 75% of them did not talk about it to a health professional.



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What can we do?

Whilst these problems remain undisclosed and not discussed women who could become continent, have pain-free intercourse or feel happy and content.....

....will continue to be incontinent, experience pain on intercourse, or feel depressed, anxious or stressed.



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Does this matter?

Women *reporting occasional UI before pregnancy* have *raised odds* of developing UI during pregnancy Brown et *al* 2010

Women *who develop UI during the first pregnancy or puerperium* have a *significantly higher risk of UI 5 years later* than women without UI symptoms Viktrup & Lose 2000



The MAMMI Study



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Conclusion

- The MAMMI study is ongoing
 - Sample size will be 2000 when MAMMI 2 (Galway site) commences recruitment
- Detailed analyses are required before data are truly understood and statistical significance and associations are ascertained
- Only then can modifiable factors be identified



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The message



Urinary incontinence, faecal incontinence, sexual health problems and depression....

.....are not normal and can be treated.

So we need to ask about them!!



Useful references

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