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Largest Ever U.S. Study On Planned Home Birth

Finds Low Rate of Interventions, No Increased Risk for Mother and Baby

In the largest ever examination of planned home births in the United States, a study released today found that, among low-risk women, planned home births result in low rates of birth interventions without an increase in adverse outcomes for mothers and newborns.

The study - which looked at nearly 17,000 women and their newborns - found that for planned home births with a midwife in attendance:

- The rate of normal physiologic birth was over 93%
- The cesarean rate was 5.2%
- The rate of vacuum- or forceps-assisted vaginal birth was 1.2% and less than 5% of mothers required oxytocin augmentation or epidural analgesia
- Only 1.5% of newborns had a low Apgar score (a measure of newborn health in the first five minutes following birth)
- 2.5% of newborns were admitted to the intensive care unit (NICU) at some point during the first six weeks following birth
- 87% of women with a previous cesarean (VBAC) delivered their newborns vaginally
- Of the 10.9% of women who transferred from home to hospital during labor, the majority changed locations for non-emergent reasons, such as a slow, non-progressing labor, or maternal exhaustion
- At six weeks postpartum, more than 97% of newborns were at least partially breastfed and 86% were exclusively breastfed

“These rates of intervention are significantly lower than those seen in U.S. hospitals, without a simultaneous increase in adverse outcomes,” said Dr. Melissa Cheyney, PhD, CPM, LDM, Associate Professor of Medical Anthropology at Oregon State University, and lead author on the study. “Direct comparisons cannot be made between home and hospital birth samples because of differences in risk level, but nonetheless these data are compelling. It should be possible to achieve lower c-section rates in this country.”

The study was released today in the *Journal of Midwifery & Women’s Health* (JMWH) and was conducted by researchers at Oregon State University, Bastyr University, the University of California-Davis, and the University of British Columbia.

“This research tells us that, for low-risk women, a planned home birth with a midwife in the U.S. can be a safe option,” said Cheyney. “Data from other countries have shown that planned home birth with a skilled midwife is safe for low-risk women. But there are enough differences between the U.S. and other high-resource nations that this question needed to be re-examined with a U.S. sample. Findings from our study, including low rates of interventions and low rates of death or injury, are comparable to findings reported in other large observational home birth studies from Europe and Canada.”

The risk of death to the baby during labor, in the first week of life, or the first 28 days of life, was very low in this study. However, this risk was even lower when women with certain health issues or who were carrying babies that are considered to be in higher-risk categories were excluded from the analysis; for low-risk mothers, the risk of death to the baby was about 1.6 per thousand.

“When parents are making a decision with their providers about place of birth, it is critical that they have access to the best possible evidence,” said Cheyney. “Home birth may not be the best choice for every pregnant woman, and risk factors must be weighed. However, our study suggests that for a healthy woman with a single, head-down, full-term baby, planned home birth with a midwife can be a safe option.”

This study is based on a voluntary dataset collected by the Midwives Alliance of North America. A separate article, also released in the *JMWH* today, provides evidence of data validity. The MANAstats registry contains high-quality data that uses the gold standard—the medical record—instead of birth certificate data, which research shows is unreliable for studying intended place of birth and newborn outcomes.

“Our goal was to design a dataset that could help to reliably inform health care providers, policy makers, and families about the outcomes of midwifery care in all birth settings, and the characteristics of normal physiologic birth,” said Geradine Simkins, CNM, MSN, Executive Director, Midwives Alliance of North America. “Planned home births are only a small percentage of all births in the U.S., but the numbers are growing each year. Given these data, we hope providers in all settings can learn from what’s working well at planned home births.”

Both articles will be available for free online for all of 2014. Go to www.jmwh.org, Find Articles, and then click on Early View. The articles will be live sometime today - watch mana.org for updates.

Contacts for pediatricians, obstetricians, and home birth families for interviews are available. Please contact Jeanette at pressofficer@mana.org.

Please visit <http://mana.org/research/current-research-projects/home-birth-safety-outcomes> for additional media materials and fact sheets for consumers.

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The Midwives Alliance of North America (MANA), established in 1982, is a professional membership organization that promotes excellence in midwifery practice, endorses diversity in educational backgrounds and practice styles, and is dedicated to unifying and strengthening the profession, thereby increasing access to quality health care and improving outcomes for women, newborns, families, and communities.

About Oregon State University: OSU is one of only two U.S. universities designated a land-, sea-, space- and sun-grant institution. OSU is also Oregon's only university to hold both the Carnegie Foundation's top designation for research institutions and its prestigious Community Engagement classification. Its approximately 27,000 students come from all 50 states and more than 90 nations. OSU programs touch every county within Oregon, and its faculty teach and conduct research on issues of national and global importance.

The University of British Columbia (UBC) is one of North America's largest public research and teaching institutions, and one of only two Canadian institutions consistently ranked among the world's 40 best universities. Surrounded by the beauty of the Canadian West, it is a place that inspires bold, new ways of thinking that have helped make it a national leader in areas as diverse as community service learning, sustainability and research commercialization. UBC offers more than 57,000 students a range of innovative programs and attracts \$519 million per year in research funding from government, non-profit organizations and industry through over 8,000 projects and grants.