Evidence Update

Maternal Health Series January 2005

If a woman receives continuous one-to-one support during labour, does this benefit the mother and baby?

Continuous support during labour is associated with better outcomes in the mother.

Inclusion criteria

Studies:

Randomized controlled trials.

Participants:

Pregnant women in labour.

Intervention:

Continuous presence and support during labour and birth, provided by a health care professional (nurse or midwife), a specially trained doula or childbirth educator, or a family member, friend or stranger with no training, compared with usual care.

Outcomes:

Labour events; birth events; newborn events; immediate maternal psychological outcomes and longer-term maternal outcomes.

Results

- Fifteen trials involving 12,791 women were included; 13 trials were adequately concealed.
- Women with continuous, one to one support were more likely to have a spontaneous vaginal birth (relative risk 1.08, 95% confidence interval 1.04 to 1.13, random effects model; 14 trials).
- In addition, women who had continuous, one-to-one support during labour were less likely to require analgesia or anaesthesia (RR 0.87, 95% CI 0.79 to 0.96; 11 trials); report dissatisfaction with childbirth experience; or feel that they were not in control during labour and birth. One trial showed a slight decrease in the use of electronic fetal monitoring (RR 0.95, 95% CI 0.92 to 0.97).
- No effect was demonstrated on neonatal outcomes, including low 5-minute Apgar scores; admission to special care nursery.
- Subgroup analysis suggests larger effects in trials which engaged lay staff, where support started early, and in hospitals where epidural analgesia was not available.

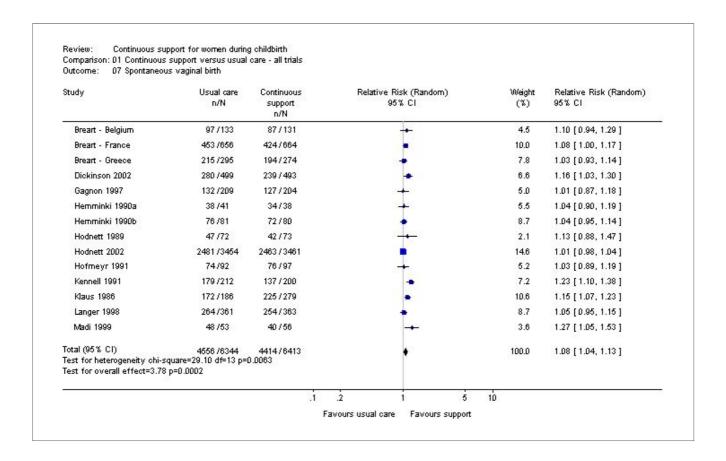






Adapted from Hodnett ED, Gates S, Hofmeyr G J, Sakala C. Continuous support for women during childbirth. *The Cochrane Database of Systematic Reviews* 2003, Issue 3. Art. No.: CD003766. DOI: 10.1002/14651858.CD003766.

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Authors' conclusions

Implications for practice:

Continuous support during labour should be encouraged for women delivering in health facilities.

Implications for research:

Trials that compare the different models of continuous support to determine the best approach are needed.