

Pregnancy in women with developmental disabilities



What is this research about?

Pregnancy-related health among women with developmental disabilities has received very little clinical and research attention. Historically, few women with developmental disabilities had children. However, the number of women with developmental disabilities seeking maternity services has been reported to be increasing. Similarly, more mothers with developmental disabilities and their children are using social services. Many studies have examined the health and development of children of women with developmental disabilities, and several programs exist to support mothers' parenting skills. Women with developmental disabilities experience multiple social and medical issues that could impact their health during pregnancy. However, very little research has examined the health of pregnant women with developmental disabilities or the newborn complications of their infants.

What did the researchers do?

The Health Care Access Research and Developmental Disabilities (H-CARDD) program examined the following questions:

- What is the fertility rate of women with developmental disabilities and what is their overall health during pregnancy?
- 2. Are women with developmental disabilities more likely than women without developmental disabilities to have pregnancy complications?
- 3. Are infants of women with developmental disabilities more likely than infants of women without developmental disabilities to have newborn complications?

What did the researchers find?

Fertility rate

Between 2002 and 2012, the researchers identified nearly 4,000 deliveries to women with developmental disabilities. In 2009 alone, there were 430 live births in this population.

What you need to know

The health needs of pregnant women with developmental disabilities need to be considered. They have higher rates of pregnancy complications than women without developmental disabilities, and their newborns are more likely to be born early, to be smaller than they should be, and to die in the first month of life.

Overall, the fertility rate of women with developmental disabilities was about half that of women without developmental disabilities. However, women with developmental disabilities were more likely to have babies at younger ages. They were more likely than women without developmental disabilities to enter pregnancy with diabetes, epilepsy, and mental health issues.

Pregnancy complications

Women with and without developmental disabilities had similar rates of gestational diabetes and gestational hypertension. However, women with developmental disabilities were more likely than those without developmental disabilities to have preeclampsia, blood clots, significant bleeding, and a number of other rare but serious complications.

Newborn complications

Infants of women with developmental disabilities were more likely than infants of women without developmental disabilities to be born early and to be smaller than they should be. They were also more likely to have newborn complications like difficulty breathing and infections. In the first month after delivery, they were more than twice as likely as infants of women without developmental disabilities to die.



How can you use this research?

These findings show that pregnancy is relatively common in women with developmental disabilities. There is a need to improve prepregnancy health in this population, particularly in relation to diabetes and mental health. During pregnancy, women with developmental disabilities need to be monitored for pregnancy complications. Their newborns should be monitored after delivery as well. These activities mean that it may be necessary to provide women with developmental disabilities with longer or more frequent prenatal care visits. A specialized approach, tailored to the unique needs of each woman, should be taken, since medical advice may be complex and difficult to follow. These changes to prenatal care could improve the health outcomes of women with developmental disabilities and their babies.

About the researchers

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Do you want to know more/additional resources?

Watch a video about this study here.

This snapshot is based on the articles entitled 'Brown, H. K., Cobigo, V., Lunsky, Y., & Vigod, S. N. (2016). Maternal and offspring outcomes in women with intellectual and developmental disabilities: A population-based cohort study. BJOG; DOI: 10.1111/1471-0528.14120.' and 'Brown, H.K., Lunsky, Y., Cobigo, V., Wilton, D., Vigod, S. N. (2016). Pregnancy in women with intellectual and developmental disabilities. Journal of Obstetrics and Gynaecology Canada, 38(1), 9-16.'

You can find more information about this research and see other women's health snapshots at www.hcardd.ca on the women's health project page.

Read a <u>summary</u> of the women's health virtual Town Hall. View the virtual Town Hall here.

About H-CARDD

Health Care Access Research and Developmental Disabilities (H-CARDD) is a research program with the primary goal of enhancing the overall health and well-being of people with developmental disabilities through improved health care policy and services. H-CARDD research is conducted by dedicated teams of scientists, policymakers, and health care providers.

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Keywords

Developmental disabilities, women, fertility



