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CONTINUOUS MIDWIFERY LED CARE COMPARED TO OTHER MODELS: AN EVIDENCE-BASED JOURNAL CLUB

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Background and aims: In many parts of the world, midwives are as the primary caregivers of reproductive aged women. The delivery service model by midwife is designed based on the fact that pregnancy and childbirth are natural life events. According to this model, needs assessment, planning for care, referral to more specialized centers if needed and preparations delivery services is done by midwife. The present study was designed according to evidence based journal clubs approach that its aim was to find the best effectiveness evidence in clinical practice and critical appraisal of studies regarding continuous midwifery led care program in comparison with other models of care.

Methods: This evidence based journal club was designed and performed in the following steps: Set an structured clinical questions (PICO); quick search of the best scientific evidence with using search strategy, evaluating of the obtained articles with using Cochrane standard checklist in relation to critical appraisal of clinical trials studies, designing practical solutions and implementing in clinical area and evaluation. Also journal club was performed according to the specific curriculum on family planning counseling course of master's midwifery counseling major, choose an operator, determining goals, preparation of presenters, planning by organizers (including invitations, preparing of participants and session management), active participation of midwifery counseling students, senior educational professionals, reproductive health care providers, expert of mother and reproductive health departments and assessment of journal club in reproductive health and midwifery counseling groups. Evaluation of journal club was done with using evidence based evaluation form (consisting of 7 questions).

Results: The best evidence in relation to clinical questions were raised. A standard Cochrane Systematic Review, in 2013 entitled "Midwife-led continuity models versus other models of care for childbearing women (Review) was obtained. This systematic study reviews assess following items: 33 full text were assessed, ultimately 13 articles with different designed were included.

Methodological quality of studies were assessed with using the risk of bias assessment. In the process of risk of bias assessment, different types of bias such as sequence generation, allocation concealment, and blinding, incomplete outcome data, selective reporting and other forms of bias with low risk, high risk and unclear items were evaluated. Given the heterogeneity of these studies in designing a variety of studies, type of interventions, studies goals, study location and outcomes were assessed, the authors only paid to review the reports of these studies and their quality by Cochrane checklist. Cochrane review shows that in continuous midwifery led care than other methods, women are more likely experience spontaneous vaginal delivery and also less likely experience amniotomy, episiotomy, instrumental delivery, fetal death in the first trimester, hospitalization during pregnancy, use of analgesics during labor and delivery. This type of care has no or little effect on cesarean rate and fetal death during pregnancy.

Conclusions: The results of the best evidence were searched and also findings of discussion in expert group showed that while the studies were reviewed in this journal club had performed in countries with no cultural similarities with Iran, but due to the high quality of this study, it can be a model for designing similar interventions in Iranian society. The findings of the study can help reproductive health policymakers in designing evidence based interventions regarding continuous midwifery led care programs. This study showed that continuous midwifery led care has the most benefits and the least side effects and if policy makers want to achieve the best results regarding mother care especially on labor issues (For example, physiological delivery, prevention of preterm delivery), they should pay more attention to midwifery led care and support this project financially.