Almeida, MF; Alencar, GP; Novaes, MHD; Franca, I; Schoeps, D; Siqueira, AA; Campbell, OM; Rodrigues, LC (2005) Accidental home deliveries in southern So Paulo, Brazil. Revista de saude publica, 39 (3). pp. 366-75. ISSN 0034-8910

Downloaded from: http://researchonline.lshtm.ac.uk/13195/

DOI:
In conclusion, home births occurred predominantly among women with three types of reasons: lack of time, fetal distress, and severe maternal complications. We may also include in this item the lack of access to healthcare services. Thaddeus & Maine, 1992, found that maternal factors were more common in urban areas, whereas in rural areas the reasons were mainly related to financial constraints and cultural beliefs.

Most women (80%) had the support of family or neighbors, or were alone. The greater frequency of low birthweight and preterm babies among accidental home births, compared to planned hospital deliveries, was statistically significant. The frequency of home births in the present study was 0.4% (twice the original estimate in the region of the Municipality). Home births showed a statistically significant association with the perinatal mortality rate, which was almost twice as high among accidental home births as among planned hospital deliveries.

Table 3 shows the reasons reported by mothers for delivering outside healthcare facilities. There are no prior studies indicating whether home deliveries were carried out on purpose or only as a coping strategy. Little is known about the risk and conditions in which the home births take place, or about the reasons for and conditions in which the home births become an extension of the healthcare system. The present study was conducted to complement home interviews. Nonetheless, we were not able to obtain information for evaluating the severity of the situation, since we had not been able to obtain appointments with the mothers or with the healthcare professionals. We may also include in this item the lack of access to healthcare services.

Análise de Dados

Table 3 shows the reasons reported by mothers for delivering outside healthcare facilities. There are no prior studies indicating whether home deliveries were carried out on purpose or only as a coping strategy. Little is known about the risk and conditions in which the home births take place, or about the reasons for and conditions in which the home births become an extension of the healthcare system. The present study was conducted to complement home interviews. Nonetheless, we were not able to obtain information for evaluating the severity of the situation, since we had not been able to obtain appointments with the mothers or with the healthcare professionals. We may also include in this item the lack of access to healthcare services.

Characteristics for evaluating the severity of the situation were not available in the information system. After taking place outside the hospital, the persons were subsequently referred to the hospital, and delivery took place soon after transport. We calculated odds ratios and their respective 95% confidence intervals and Fisher's exact test were used in estimating risk factors and controlling for confounders. The greatest frequency of low birthweight and preterm babies among accidental home births, compared to planned hospital deliveries, was statistically significant. The frequency of home births in the present study was 0.4% (twice the original estimate in the region of the Municipality). Home births showed a statistically significant association with the perinatal mortality rate, which was almost twice as high among accidental home births as among planned hospital deliveries.

We considered as accidental home deliveries all births occurred at home and/or on the way to the hospital. Ten of the 1,987 births in the region of the Municipality were classified as accidental, whereas according to the information systems, this was only 0.9%. In order to have a better understanding of the situation, we used the proportion of home births found among stillbirths, in the period 1990-1997, and the proportion of stillbirths among accidental home births, in the same period. The present study is part of a research project financed by a grant from the Fundação de Amparo à Pesquisa do Estado de São Paulo (FAPESP).