



Service Priorities and Programmes Electronic Presentations

Convention ID: 1144

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The Impact of Substance Abuse during Pregnancy – Five-year Review in Princess Margaret Hospital

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Keywords:

Substance Abuse

High Risk Pregnancy

Five-year Review

Maternal and neonatal outcomes

Special Care Baby Unit

Neonatal Intensive Care Unit

Introduction

The use of substance of abuse in pregnancy creates a substantial impact on perinatal outcomes and the long-term health of women and their children. In our hospital, this high risk group of women would be followed by the Comprehensive Child Development Service team. A five-year review is worthwhile to obtain the necessary data to plan our future management of these high risk pregnancies.

Objectives

To review the demographic profiles of women with substance abuse, their risk factors included marital status, unplanned pregnancy, use of contraception, smoking and drinking habits, and the commonly used illicit drugs were explored. The maternal and neonatal outcomes were also reviewed to evaluate the services provided to these women.

Methodology

The records of those pregnant women with substance abuse and under the care of CCDS team from 2010 to 2014 were retrieved. A questionnaire was administered during the first interview, and the postnatal assessment form was completed after delivery.

Result

A total of 207 women (19% of the total number of women under CCDS team from 2010 to 2014) were in the final cohort. 21 (10.1%), 160 (77.3%) and 26 (12.6%) women were at the age of < 19, 20-34 and ≥ 35 respectively. 196 (94.7%) & 74

(35.7%) had smoking and drinking habits respectively, 84.1% (174/207) were unplanned pregnancy, and 75.3 % (156/207) had no contraception. Overall 12.9% (26/201) delivered their baby at preterm, and 14.6% (30/205) needed Caesarean Section.

Ketamine (48.8%, 101/207) & amphetamine (46.9%, 97/207) were the most commonly used illicit drugs in this group, followed by cocaine (25.1%, 52/207), heroin (22.7%, 47/207), ecstasy (14.5%, 20/207) and a few had taken methadone, marijuana & cannabis, and 46.8% (95/203) did not quit the substance during pregnancy.

Nevertheless, 131 (63.3%) & 6 (2.9%) babies were transferred special care baby unit and neonatal intensive care unit respectively. Concerning the birth weight, 169 (81.6%) and 2 (1.0%) babies delivered with birth weight more than and less than 2500 grams respectively.

Women with active substance abuse disorders are at risk for unplanned pregnancy. On diagnosis of pregnancy, parental role should be elicited and pregnancy options counselling should be provided. Secondly, the significance of effective contraceptive methods should be iterated after delivery. Thirdly, most of the women did not quit the illicit drugs during pregnancy, and babies needed to be admitted to Special Care Baby Unit because of maternal substance abuse or neonatal withdrawal syndrome.