Patient Expectations and Preferences aka “The Birth Plan”

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No conflicts of interest to report

Objectives
- History of birth plans
- Common preferences
- Effect on outcomes
- Birth plan management

Patient Expectations and Preferences aka “The Birth Plan”

Birth Plan
- Google - 314 million hits
- Pubmed – 29 citations

Birth Preferences
- Google - 423 million hits
- Pubmed - 7 citations

Patient Expectations and Preferences aka “The Birth Plan”
Birth Expectations and Preferences

History of the Birth Plan

Origins
- Cultural, geographic and institutional differences
- United States

History of the Birth Plan

Origins
- UK 1970s
  - Childbirth educators
  - “Planning your Baby’s Birth”
- WHO 1996
  - Useful and should be preformed
  - 21st century
  - Non-intervention vs intervention

History of the Birth Plan

Demographics
- P0, white, older, higher education/SES, CNM care
- Availability of education resources
- Availability of birth options


History of the Birth Plan

United States
- Childbirth education
- ACOG & AA pediatrics
- Cochrane Review
- Healthy People 2010 goal
- Increase participation in childbirth classes
- Practice models
- More physician/hospital based


What is a Birth Plan?

“A birth plan is an approach to labor, rather than a term for a specific kind of outcome”

- Written or philosophical
- Evolves from patients values, desires and concerns of the birth process
- Facilitates communication between patient and provider
  - Discussion Birth Plan vs. Hospital Birth Plan

Wagner & Gunning 2006, Kaufman 2007

Common Birth Plan Themes

Logistics
- Venue
- Provider
- Interventions
- Pain control
- Mode of delivery
- Infant care

Common Birth Plan Themes

Domains
- CONTROL
  - Autonomy
  - Safety
  - Shared decision making
  - Respect
  - Knowledge
Do preferences affect outcomes?

Provider and patient perceptions

Preferences vs. written birth plan

- Mixed results
- No RCTs
- Useful vs no difference
- Intapartum care, control
- More critical of provider


Do preferences affect outcomes?

Provider and patient perceptions

- Wide variation
- Worse outcomes - 65% vs 2.4%
- Increased CS rates – 66% vs 9%

Expectations

- False sense of control
- Professional pressure

Grant 2010, Lundgren 2003, Welsh 2013

Do preferences affect outcomes?

Preferences vs. written birth plan

- No RCTs
- Useful vs no difference
- Intapartum care, control
- More critical of provider


Do preferences affect outcomes?

Maternal

- Labor interventions
- Pain control
- Mode of delivery

Neonatal

- APGARS
- Cord gases
Do preferences affect outcomes?

**Maternal**
- Labor Interventions
  - Pitocin
  - Episiotomies
  - Pain Control
    - 67% no meds, 50% no epidural planned
    - 1/3 used no meds, 1/2 no epidural
    - 90% satisfied with epidural


Do preferences affect outcomes?

**Maternal**
- Mode of delivery
  - Vaginal Delivery
  - Strength of preference
  - Cesarean Section

Fuglenes 2012, Hadar 2012, Wu 2014

Do preferences affect outcomes?

**Neonatal**
- APGARS
- Cord gases

Hilgado-Lopezosa 2013

Do preferences affect outcomes?

**Postpartum**
- Patient satisfaction
- Goal vs. Journey
- Medicolegal aspects
Do preferences affect outcomes?

Postpartum
- Patient satisfaction
- Personal Expectations
- Provider support
- Provider-patient relationship
- Involvement in decision making

Hodnett 2002

Do preferences affect outcomes?

Postpartum
- Goal vs. Journey
- Healthy Mom & Baby
- "The perfect birth"
- Long term effects
  - Depression & mode of delivery

Rauh 2012, Sword 2011, UpIong 2006

Do preferences affect outcomes?

Postpartum
- Medicolegal aspects
- Living will for obstetrics
  - Provides structured discussion
  - Reduce conflict/misunderstandings
- Address risk
- Documentation
- May reduce litigation

Philepsen 2005, Richards 1999

Managing the birth plan

Advantages/disadvantages
- Patient care/satisfaction
- Lots of TIME

Provider vs. patient perspective
- Distrust vs. collaboration
- Evidenced based practice

Institutional constraints
- Hospital policy vs. hospital routine

Epstein 2004
Managing the birth plan

- Optimizing use
  - Review in outpatient setting
  - 1 page, unique wishes, flexible

- Education
  - Listen, teach, build trust/partnership
  - Shared decision making

- Setting expectations
  - Avoids misunderstandings on L&D
  - Improves satisfaction
  - Lack of control

Documentation

Conclusions

- Preferences matter
  - Embrace the birth plan

- Clinical outcomes
  - Some influence

- Integration into practice
  - Prenatal discussion

Birth Expectations and Preferences

- Education
- Preferences/Birth Plan
- Labor/Birth
- Experience
- Mode of Delivery
- Patient Char.
- Patient Satisfaction

Preferences matter
- Embrace the birth plan

Clinical outcomes
- Some influence

Integration into practice
- Prenatal discussion