

'Parents to be' The effectiveness of systematic population-based preconception advice and counselling initiated by GP's.

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At least 20% of the pregnancies in the Netherlands end in an adverse pregnancy outcome (spontaneous abortion, preterm birth, low birth weight, perinatal death, congenital anomaly). Information on risk factors before pregnancy together with...

Ethische beoordeling	Positief advies
Status	Werving gestopt
Type aandoening	-
Onderzoekstype	Interventie onderzoek

Samenvatting

ID

NL-OMON25143

Bron

NTR

Verkorte titel

Parents to Be

Aandoening

Risk factors of adverse pregnancy outcome and adverse outcome itself being: spontaneous abortion, preterm birth, low birth weight, perinatal death, and congenital anomaly.

Ondersteuning

Primaire sponsor: TNO Quality of Life, Leiden, the Netherlands and Department of General Practice and Nursing Home Medicine, Leiden University Medical Center, Leiden, the Netherlands

Overige ondersteuning: ZON-MW Project number 22000044 and 2200.0135.

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

The effect of GP-initiated preconception counseling (PCC) on adverse pregnancy outcome. (Spontaneous abortion, preterm birth, low birth weight, perinatal death, congenital anomaly).

Toelichting onderzoek

Achtergrond van het onderzoek

'Parents to be' is a project that evaluates routine preconception advice and counselling given to couples before pregnancy (PAC), initiated and given by their own general practitioner (GP) in order to prevent adverse pregnancy outcomes. The couples' personal situation is evaluated with respect to risk factors for the pregnancy and the unborn child. Questions are asked about the couples' medical history, medication, lifestyle (smoking, alcohol consumption and nutritional habits) as well as about hereditary and congenital disorders in the family. If specific risk factors are found the couple receives information about these personal risk factors along with information on general risk factors for pregnancy. The GP offers general and specific health education and refers to a specialist if genetic counselling is needed. The effect of routine PAC on health behaviour, risk perception, frequency of risk factors in the general population is studied.

Doel van het onderzoek

At least 20% of the pregnancies in the Netherlands end in an adverse pregnancy outcome (spontaneous abortion, preterm birth, low birth weight, perinatal death, congenital anomaly). Information on risk factors before pregnancy together with preventive measures (preconception counseling) will lead to behavioural changes and thus to reduced adverse pregnancy outcomes.

Onderzoeksopzet

N/A

Onderzoeksproduct en/of interventie

In the intervention group women 18-40 years received an invitation for preconception counseling. When interested and contemplating a pregnancy within a year a risk-assessment questionnaire was used to systematically assess risks of the couple. Counseling was provided based on risks identified as well as risk, which apply to all women. The control group received

care as usual.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

Women aged 18-40.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Completed family, uterus extirpation, sub-fertility or infertility, insufficient understanding of Dutch, or adverse social circumstances.

Onderzoeksopzet

Opzet

Type:	Interventie onderzoek
Onderzoeksmodel:	Parallel
Toewijzing:	Gerandomiseerd
Blinding:	Open / niet geblindeerd
Controle:	Geneesmiddel

Deelname

Nederland	
Status:	Werving gestopt
(Verwachte) startdatum:	09-01-2000
Aantal proefpersonen:	4800
Type:	Werkelijke startdatum

Ethische beoordeling

Positief advies	
Datum:	14-10-2005
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL416
NTR-old	NTR456
Ander register	: ZON-MW Project number 22000044 and 2200.0135
ISRCTN	ISRCTN53942912

Resultaten

Samenvatting resultaten

1. BMC Fam Pract. 2006 Jul 7;7:41.

2. BMC Fam Pract. 2006 Nov 3;7:66.
