



### Birthplace study (2012)

This observational study was published after the last review (McIntyre, 2012) was completed. It could not therefore have been included in any of the reviews.

The study was based in England and took place in 97% of the trusts providing home births. The study included 64,538 women. Women were eligible to be included in the study if an NHS midwife attended them during labour in their planned place of birth for any amount of time. Women were excluded if they had a caesarean section before the start of labour, if they presented in labour at less than 37 weeks' of pregnancy, if they were expecting more than one baby, if they had no antenatal care or if they had a stillbirth before the start of care in labour.

The study defined **perinatal mortality and morbidity** as a stillbirth after the start of care in labour, an early neonatal death, disturbed neonatal brain function in the first few days after delivery, meconium aspiration (where a baby has its bowels open while inside the uterus and breathes this into its lungs), a broken arm or collar bone or a brachial plexus injury (injury of the nerves to the arm and hand).

### Results:

Planned home birth compared to planned hospital birth was associated with:

- Fewer interventions for all women
- Higher rates of normal delivery (88% of women planning a home birth compared to 58% of those planning a hospital birth)
- An increased likelihood that babies were breastfed at least once
- No difference in **perinatal mortality or neonatal morbidity** for women who had had a baby before. (**Perinatal mortality** was 2.3 babies per 1000 in planned home births compared to 3.3 babies per 1000 in planned hospital births in an obstetric unit and 2.4 babies per 1000 in midwife led units alongside an obstetric unit, which is the default option for healthy women with uncomplicated pregnancies at the Jessop Wing)
- An increased rate of **perinatal mortality and neonatal morbidity** for women having their first baby (rising from 5.3 babies per 1000 in planned hospital births to 9.3 babies per 1000 in planned home births)

**Conclusion:**

The study concluded that healthy women with uncomplicated pregnancies can be supported to choose the place of birth with which they would feel most comfortable.

However the study was a further observational study. This meant that bias due to the different characteristics of women planning a home birth and those planning a hospital birth could not be ruled out. The study was also limited as it combined so many different measures for the main outcome of **perinatal mortality**.

**Brocklehurst, P; Hardy, P; Hollowell, J et al (2011). Perinatal and maternal outcomes by planned place of birth for healthy women with low risk pregnancies: the Birthplace in England national prospective cohort study. *BMJ (British Medical Journal)*, 343, d7400.**

Available from:

[http://wrap.warwick.ac.uk/46562/1/WRAP\\_Petrou\\_bmj.d7400.full.pdf](http://wrap.warwick.ac.uk/46562/1/WRAP_Petrou_bmj.d7400.full.pdf)

**Walton, C (2012). The Birthplace in England Study: Methods, findings and evaluation. *British Journal of Midwifery*, 20(1), 22-27.**

Abstract available from:

<http://www.intermid.co.uk/cgi-bin/go.pl/library/abstract.html?uid=88772>