Interconception Preventive Care and Recurrence of Pregnancy Complications for Medicaid-insured Women

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Pregnancy complications may recur and are associated with potentially modifiable risks. The role of interconception preventive care in reducing repeat pregnancy complications is understudied. This retrospective cohort used 2007-2012 Medicaid claims from 12 states. Included women who had an index birth complicated by prematurity, hypertension, or diabetes, a subsequent birth within 36 months, and Medicaid eligibility for ?11 of 12 months after index birth. Logistic regression assessed for an association between the exposure of preventive visits in the year after index birth and primary outcomes of prematurity, hypertension, or diabetes in the subsequent pregnancy. Regression adjusted for confounders including demographics (age, race and ethnicity, rural residence, state), index pregnancy features (complications, prenatal visits, *multiple gestation*, maternal and infant length of stay, year), visits to address complications in the index birth, and interpregnancy interval. Of 17,372 women, mean age was 24.3 ± 5.3 years, and race/ethnicity was 50.3% non-Hispanic White, 27.2% non-Hispanic Black, and 11.9% Hispanic. In the index pregnancy 43.3% experienced prematurity, 39.2% experienced hypertension, and 34.2% experienced diabetes. In the year after the index pregnancy, 54.7% had at least one preventive visit. In the second pregnancy, 47.7% experienced prematurity, hypertension, or diabetes. Recurrence rates were 28.1% for preterm birth, 38.0% for hypertension, and 48.3% for diabetes. Preventive visits were associated with reduced hypertension in the subsequent pregnancy (OR 0.88, 95% CI 0.82-0.97) but not reduced preterm birth or diabetes. Preventive visits after an index birth complicated by prematurity, hypertension, or diabetes were associated with 10% lower odds of hypertension in a subsequent pregnancy, but not with reductions in diabetes or prematurity. Some complications may be more amenable to interconception preventive services than others.

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