

# Cherokee Health Systems' Integrated Care Project: Management of Opiate Addicted Pregnant Women to Decrease Incidence of Neonatal Abstinence Syndrome (NAS)

## Research Team

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## Background

More than 65% of pregnant women with opioid addiction have concurrent mental health problems. Treatment of both addiction and mental health issues improves outcomes. In 2012 the Cherokee Health system (CHS) began an integrated women's clinic that treats substance abuse, mental health issues and pregnancy.

## Study Aim

Understand the characteristics of pregnant women who abuse opioids, and compare maternal characteristics and NAS related outcomes of infants among women who are adherent and non-adherent to the treatment protocol.

## Study Methods

The research cohort consisted of pregnant, opioid-using women receiving care at CHS between March 2012 and October 2014. Data were extracted from electronic health records. Non-adherence to the treatment protocol was defined as attending <50% of recommended prenatal visits.

## Study Results

Thirty-seven women were identified as pregnant, using opioids and receiving care at CHS. The majority of women were young, white, unemployed, unmarried and had a median of 2 children.

- 88% of women reported a history of abuse, and 48% of those women reported sexual abuse.
- 92% had a psychiatric diagnosis, of which 70% were diagnosed with depression.
- Women who were non-adherent (65%) to the treatment protocol were more likely to begin pre-natal care at a later date than women who were adherent.
- 65% of mothers (with outcome data) delivered infants without NAS. This is nearly twice the normal rate for women with addiction.
- More than half of the women accepted postpartum contraception and 16% did not, of those accepting contraception nearly 40% chose contraception of limited efficacy.

## Study Implications

- Opioid addiction among women coexists with mental health problems and often histories of abuse. Healthcare for pregnant women with substance use issues needs to be coordinated for the best outcomes for mother and infant.
- It is important to create a supportive environment that encourages women using opioids to enter pre-natal care as early as possible in their pregnancy. This should result in more prenatal visits, access to more services and improved health outcomes
- Continued efforts are needed to educate women on contraceptive options, specifically long-acting reversible contraception.
- *For a full report of this study (prepared by the grantee), please [click here](#)*

This study was funded by the Tennessee Department of Health.