

Investigation of current Australian physiotherapy service provision for extended stay antenatal inpatients

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BACKGROUND

An investigation of the provision of inpatient physiotherapy care for antenatal patients admitted with medically complex conditions of pregnancy was undertaken in 2013. Current clinical physiotherapy practice was investigated in this population in Australian tertiary maternity facilities.

Women admitted to hospital for extended periods during pregnancy due to medical complications can encounter a range of musculoskeletal impairments and are likely to experience physical deconditioning over the course of their stay. Physiotherapists may be able to assist women to reduce these symptoms through education and exercise prescription. There is currently no agreement in the literature regarding the safety of exercise programs for pregnant women who have their mobility restricted for medical reasons. It is not known what impact prolonged best rest or reduced mobility has in the antenatal and postpartum period.

METHOD

This study was a benchmarking investigation completed by Australian physiotherapists via online or paper survey at eight tertiary maternity hospitals.

RESULTS

The results showed that most Australian facilities are providing similar physiotherapy care to these patients. There was agreement across most facilities that service limitations resulted from a lack of evidence for the safety and efficacy of interventions and time and/or staffing restrictions for inpatient services.

All hospitals reported to be providing physiotherapy care to this antenatal population. The main reasons for referral to physiotherapy were prevention of deconditioning and management of musculoskeletal complaints. Each facility reported seeking medical clearance prior to provision of pelvic floor muscle exercises and for group exercise programs. Initial contact was within 24 hrs for seventy-five percent of hospitals, and seven days after admission for the remaining facilities.

No hospitals had a protocol for the management of this population. All hospitals provided outpatient follow up for musculoskeletal issues if indicated after the extended inpatient stay.

DISCUSSION

Barriers to physiotherapy treatment provision for extended stay antenatal inpatients were staffing limitations and a lack of evidence to guide clinicians about exercise safety and effectiveness in this medically complex population. No Australian physiotherapy protocols or clinical practice recommendations were identified for this inpatient group.