

Purpose The objective of this study was to compare the outcomes of women and infants who received midwife-led care with obstetrician-led care.

Design and Methods This was an observational study using a self-completed questionnaire comparing outcomes of women and infants who received continuity of midwife-led care with obstetrician-led care. Included were women from a purposive sample of care facilities and who had a term-singleton-birth. The study period was from February to October in 2011. The Research Ethics Committee at St. Luke's College of Nursing, Tokyo, Japan approved this study (No. 10-065).

Instruments included: Women-centred care (WCC) pregnancy questionnaire, Stein's maternity blues (Stein's MB) scale, Edinburgh Postnatal Depression Scale (EPDS) and Care Satisfaction Scale. The author gathered obstetric data and distributed questionnaires to women who gave birth while they were hospitalized (included birth centre) and at their one-month checkup.

A total of 280 (midwife-led $n= 149$, obstetrician-led $n= 131$) women during hospitalization and 238 ($n= 133$ and $n= 105$ respectively) women at one-month postpartum were included in the analysis.

Findings This study suggested that continuity of midwife-led care was perceived by women to be beneficial: 1) the perception of WWC was higher in the midwife-led group ($p < .001$) and 2) their satisfaction with care was higher throughout the maternity period ($p < .001$) than the women in the obstetrician-led group. Objective measures were positive: 1) women in the midwife-led group had less premature rupture of membranes ($p = .030$) although the Apgar scores of the infants were similar and almost all were healthy infants; 2) women in the midwife-led group engaged more exclusively in breast-feeding during hospitalization and at one-month postpartum ($p < .001$) and 3) women in the midwife-led group showed significantly lower scores in Stein's MB scale than those in the obstetrician-led group ($p < .001$). The EPDS score was also lower in the midwife-led group, although not significantly different.

Conclusion The findings suggested that continuity of midwife-led care was perceived by women to be beneficial and had no adverse outcomes compared to those who received obstetrician-led care.