A Literature Search on Birth Spacing and Maternal Depletion

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ABSTRACT: This document compiles the results of a literature search on birth spacing and maternal depletion using various databases, including Medline, Popline, and Lilacs.


   **Abstract:** This paper examines factors that may contribute to iron deficiency anemia (IDA) among pregnant women in order to better target groups at higher risk of IDA. The study was conducted in urban and rural areas of Nigeria. One key finding was that pregnant women with birth spacing of less than one year and less than one and a half years had significantly lower mean Hb and higher prevalence of anemia.


**Abstract:** This publication documents a pilot study promoting optimal birth spacing messages in Mozambique implemented by the FRONTIERS Program and Advance Africa.


**Abstract:** This report from the CATALYST Consortium describes the optimal birth spacing initiative (OBSI) grants program experiences in Bolivia, Cambodia, Nepal, Peru and Romania. Its main objectives were to increase awareness and knowledge of OBSI to reduce maternal and neonatal mortality and morbidity. Three models of health promotion were utilized within this framework, all with the aim of improving reproductive health and family planning for women of reproductive age.


**Abstract:** This document examines the feasibility of an intervention to raise awareness and knowledge on optimal birth spacing benefits in a Mozambican community.


**Abstract:** This WHO report documents a technical consultation held with WHO and UNICEF staff on birth spacing to review the evidence of the literature on birth spacing intervals and health outcomes for the mother and child. Recommendations based on this review are discussed.


17. Smits L; Pedersen C; Mortensen P; van Os J. Association between short birth intervals and schizophrenia in the offspring. Schizophr Res. 2004 Sep 1; 70(1):49-56. PMID: 15246463 [PubMed - indexed for MEDLINE]


   Abstract: This publication from POPECH provides a review of birth spacing programs in order to determine effectiveness of service delivery programs on increasing awareness and knowledge of birth spacing, and to examine birth spacing efforts within these service delivery programs.


   Abstract: This study examines factors associated with short pregnancy interval (PI), including child mortality, and effects on birth weight and haemoglobin in Kisumu, Kenya. One of the factors associated with a short PI (an interval less than 24 months) were women with a stillbirth, abortion, or death of a live-born child in previous pregnancy; however, no significant association was found for low birth weight, pre-maturity, small-for-gestational-age infants, or maternal anemia.


   Abstract: This publication from the CATALYST Consortium describes evidence-based research for increasing the optimal birth spacing recommendation from two-year intervals to at least three-year intervals.


**Abstract:** This publication from the Child Survival Technical Support Project describes a study from Rutstein which finds that birth intervals should be at least 36 months to achieve optimal outcomes.

23. Morasso, Mdel C; Molero, J; Vinocur, P; Acosta, L; Paccussi, N; Raselli, S; Falivene, G; Viteri, F. E. Deficiencia de hierro y anemia en mujeres embarazadas en Chaco, Argentina. *Arch. latinoam. nutr; 52(4):336-343, dic. 2002.* [Language: Spanish]


**Abstract:** This study by Zhu et al. examines various interpregnancy intervals to determine the optimal benefits for maternal and neonatal health through an analysis of live births from 1993 -1998 in Michigan.


**Abstract:** In this paper, the authors conducted a cost-benefit analysis of low birth weight deliveries and its effects in an economic context among Hungarian mothers.


**Abstract:** The authors of this study examine the association between short pregnancy interval and premature births. One of the main findings was that while interpregnancy intervals are associated with increased risk of low birth weight, the effects of interpregnancy intervals on premature births have not been found to be significant.


**Abstract:** In this paper, Doyle et al. describe results of a nutrition intervention during interpregnancy interval for women with a low birth weight baby in an urban area. Nutrition education and counseling as a single intervention is unlikely to improve the nutritional status of mothers in this urban population.

31. Hickey C A; Kreauter M; Bronstein J; Johnson V; McNeal S F; Harshbarger D S ; Woolbright L A. Low prenatal weight gain among adult WIC participants delivering term singleton infants: variation by maternal and program participation characteristics. *Maternal and child health journal.* Sep 1999, 3 (3) p129-40. PMID: 10746752 [PubMed - indexed for MEDLINE]


**Abstract:** Zhu et al. analyzed data from 173,205 birth certificates in Utah (1989-1996) to determine whether a relationship between short pregnancy intervals and adverse perinatal outcomes exist. Infants who were conceived 18 to 23 months after a previous live birth had the lowest risk of adverse perinatal outcomes such as low birth weight and preterm birth.


**Abstract:** This article in the MMWR describes a Medicaid program in Utah that provides coverage for women for pregnancy-related costs. A risk factor for short birth intervals among this group of women was found to be age greater than or equal to 20 years.


43. Madi, José Mauro; Letti, Fábio André; Castilla, Gabriela M; Poncelét, Karin; Paniz, Luciana; Zanette, Marília. *Intervalo interpartal e suas correlações clínicas: avaliação de 991 casos.* [Language: Portugese]


Abstract: The authors conducted a study to understand the relationship between birth intervals and outcomes of pregnancy such as risk of miscarriage, low birth weight, and preterm birth in a British-born population.


**Abstract:** This paper explores relationships between biomedical conditions such as pregnancy-induced hypertension, intrauterine growth retardation, placental malaria, maternal age, parity, and birth spacing on infant mortality.


Abstract: In this paper, the authors explore data from Malaysia and Guatemala on the effects of short birth intervals on children’s health as a result of inadequate recovery period from one pregnancy to the next pregnancy. These analyses indicate that women with better nutritional status may be able to bring the pregnancy to term more quickly and more often than those who have poorer levels of health.


Abstract: This paper examines the affects of infant and child mortality on fertility practices, in particular the insurance effect and replacement effect. Conversely, fertility also affects infant and child mortality due to maternal depletion syndrome, for example.


69. Vargas, Nelson; Valenzuela, Solange; Catenacci, Carlos; Emhart, Marión; García, Carolina; Gómez, Eduardo; González, Ricardo; Guzmán, Marcelo; Muñoz, Verónica. Intervalo intergenésico y factores de riesgo para la salud infantil. Cuad. med.-soc. (Santiago de Chile);26(4):152-7, dic. 1985. Tab. [Language: Spanish]


72. Ruzicka LT. Birth spacing and child survival: some methodological issues. Canberra, Australia, Australian National University, Department of Demography, International Population Program, 1984 Feb 17. 9 p. (Research Note No. 11).


76. Lactation, maternal nutrition and fertility. Nutrition reviews Sep 1982, 40 (9) p268-70


