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Dr. Rouse, maternal-fetal medicine specialist, co-authors Obstetric Care Consensus

PROVIDENCE – **DWIGHT J. ROUSE, MD, MSPH**, a specialist in the Division of Maternal-Fetal Medicine at Women & Infants Hospital, has co-authored the first in a new, joint series called “Obstetric Care Consensus” that is being introduced by the American College of Obstetricians and Gynecologists (ACOG) and the Society for Maternal-Fetal Medicine (SMFM).

This inaugural issue, “Safe Prevention of the Primary Cesarean Delivery,” addresses the rapid increase in cesarean birth rates and outlines a multifaceted approach that addresses indications for primary cesarean delivery.

“There is no doubt that there is a time and a place for a cesarean delivery. But we need to be sure that, as part of general obstetric practice, we are not overusing

this tool for fear or convenience, particularly primary cesarean delivery,” said Dr. Rouse. “It is important for health care providers to understand the short-term and long-term risks and benefits of cesarean and vaginal delivery, as well as safe and appropriate opportunities to prevent overuse of cesarean delivery.”

This consensus outlines a multifaceted approach that addresses indications for primary cesarean delivery, including labor dystocia, abnormal or indeterminate fetal heart rate tracing, fetal malpresentation, multiple gestation, and suspected fetal macrosomia. ❖



WOMEN & INFANTS

Dwight J. Rouse, MD

Hasbro study finds text-messaging program good option for keeping teen girls healthy

Study highlights resource for physicians to provide counseling and preventative services to under-served teens

PROVIDENCE – **MEGAN RANNEY, MD, MPH**, an emergency medicine attending physician at Hasbro Children’s Hospital, recently led a study that found a text-message program may be an effective violence prevention tool for at-risk teen girls. The study has been published online in the *Journal of Adolescent Health*.

“Mobile health, or ‘mHealth,’ is increasingly being used as a way to improve people’s health, via text-messaging or phone-based applications,” said Dr. Ranney. “However, few people have studied whether teens are interested in mHealth, especially for prevention-type messages, even though the vast majority of teens who come to the emergency department (ED) use mobile phones and more than 95 percent of those patients report that they use text messaging.”

Dr. Ranney’s team interviewed girls between the ages of 13 and 17 who reported past-year peer violence and depressive symptoms during emergency department visits for any medical issue. Overwhelmingly, the interviews showed that at-risk teen girls coming to the ED for care are very interested in receiving a text-message violence prevention intervention. The teens felt that a text-message program would enhance their

existing coping strategies, and that they would not only use it themselves, but also refer their friends to it.

“The ED is the primary source of care for many teens with high-risk behaviors, such as peer violence, and it provides an important opportunity to initiate preventive interventions. However, there can be many limitations to providing such interventions in real time, including lack of time and resources on the part of ED staff, poor accessibility and availability of community resources, and low rates of follow-through with treatment referrals, leaving this group of teens largely under-served,” said Dr. Ranney. “For these high-risk populations, who have high rates of mobile phone ownership but low accessibility to traditional health care, mHealth may be a particularly promising format for delivering preventive care.”

In the future, Dr. Ranney hopes to also study teen boys and non-English speaking patients as possible participants in the delivery of counseling and behavioral skills text messaging. “By developing evidence-based text-message interventions, clinicians may be able to have a big influence on these teens’ coping skills, involvement in fights and life choices,” she said. ❖