

From pregnancy to going home from hospital: Aboriginal twins in Western Australia (WA) and New South Wales (NSW)

A summary of results of a recently published paper

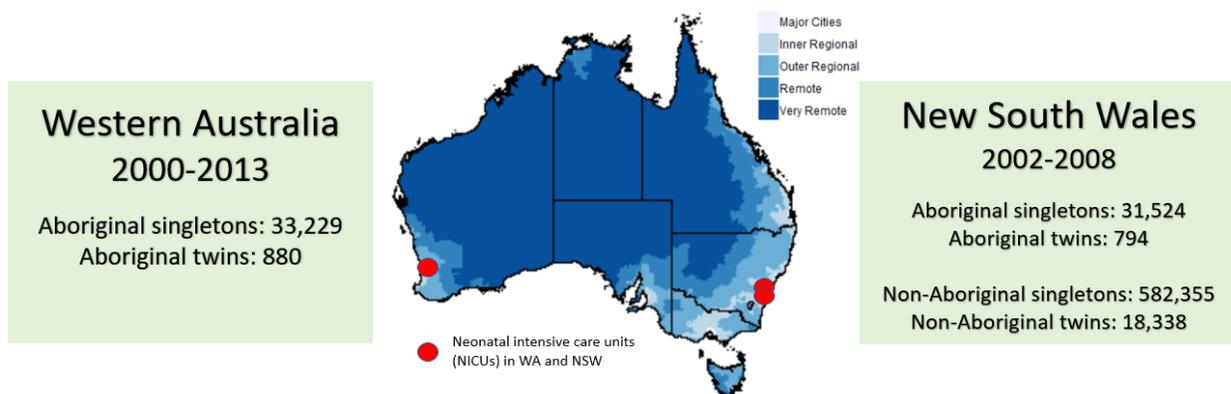
Background

How much do we know about Aboriginal twins? Not much. Twins are not included in many research studies of pregnancy and birth. Even when they are included, detailed information about Aboriginal twins is rarely provided.

However, although Aboriginal twins are a small group, they may be a particularly important group. There are two reasons why they might have particularly poor outcomes:

- Aboriginal singletons (only one fetus) generally have poorer birth outcomes than non-Aboriginal singletons (e.g., more likely to be born early); and
- Twins have poorer outcomes than singletons, on average.

Therefore, we examined pregnancy and birth outcomes for Aboriginal twins and their mothers.



Findings – Aboriginal twins only

Pregnancy

- 1 in 6 mothers of twins had gestational hypertension, pre-eclampsia or eclampsia
- 1 in 10 had antepartum haemorrhage
- 1 in 5 had preterm prelabour rupture of membranes.

Birth

- >80% of twin births were in large hospitals with specialist services
- Almost 1 in 3 mothers in WA and 1 in 12 in NSW lived 3 hours or more from the hospital
- The average stay in hospital was 6 days

Infants

- 6% of Aboriginal twins in WA and 4% in NSW were stillborn or died within 28 days of birth
- >50% of Aboriginal twins in both states were born preterm (< 37 weeks' gestation)
- >50% had a low birth weight (<2500g)

Findings – Aboriginal twins compared to non-Aboriginal twins

Rates of pregnancy complications were generally similar for mothers of Aboriginal and non-Aboriginal twins

Mothers of non-Aboriginal twins lived closer to the hospital where they gave birth

Aboriginal twins were born earlier and smaller than non-Aboriginal twins

All mothers of twins face challenges. However, these challenges may be more difficult to overcome for some Aboriginal women as they are:

- more likely to live far from specialist medical care;
- younger;
- more socio-economically disadvantaged; and
- more likely to have older children to care for.

Implications

- Mothers who travel may miss valuable support from their family, community and local health providers during a difficult period.
- Costs for travel during pregnancy and for the birth may be significant.
- There is scope for outcomes for Aboriginal twins to improve.

Recommendations

- Specific guidelines for the care of mothers of Aboriginal twins may be needed to improve outcomes.
- The costs of having twins should be quantified and consideration given to additional financial support during pregnancy.

The full paper with the full results is at:

<https://bmcpregnancychildbirth.biomedcentral.com/articles/10.1186/s12884-021-03945-9>

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RESEARCH

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Pregnancy and birth characteristics of Aboriginal twins in two Australian states: a data linkage study



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