THE CHARACTERISTICS OF CHILDBEARING-AGED WOMEN WHO USE METHAMPHETAMINES

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Introduction

Women who use methamphetamines are at risk of pregnancy complications and their children are at risk of adverse intrauterine, childhood and adult outcomes. These complications include preterm birth, fetal growth restriction, altered neonatal behaviour and developmental delay, among others.

Pregnancy presents an opportunity to optimise their care and access to services. Therefore, it is important that healthcare professionals are able to identify these women.

The aim of this study was to describe the characteristics of women aged 18-49 years who use methamphetamines.

References

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Results

Of our cohort of 277 women aged between 18 and 49 years.
- 24% aged 18-25 years
- 45% were nulliparous
- 15% ATSI origin
- 36% lived outside Melbourne
- 20% were employed.

The mean age of first use of any methamphetamine was 19 years (SD 5) and injecting a drug was 21 years (SD 6). More than two-thirds of these women were methamphetamine dependent.

Women aged between 18 and 25 make up **24%** of methampethamine users but just **19%** of the population.

24% Meth users — **19%** Victorian women*

Employed women make up **20%** of methampethamine users but **40%** of the population.

x2 times less likely — **20%** Meth users — **40%** Victorian women*

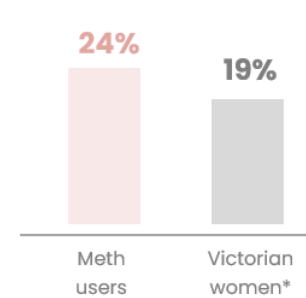** Victorian women aged between 18 and 49*

Discussion

Many clinicians find women who use methamphetamines difficult to identify and to engage in care. These women are also often reluctant to disclose their drug use. If identified, there are ways to modify their care and optimize outcomes.

As seen in the results, certain characteristics of women are associated with methamphetamine use. We need to be mindful that, by definition, the participants of this study are not necessarily a representative sample of women who use methamphetamines.

By recognizing these characteristics, clinicians may be more easily able to identify women who use methamphetamines. If identified, these women can be provided with optimal care to reduce their complications in pregnancy and improve outcomes for their children. Also, health professionals can attempt to improve the engagement of these women in their overall healthcare, using the opportunity that pregnancy presents.
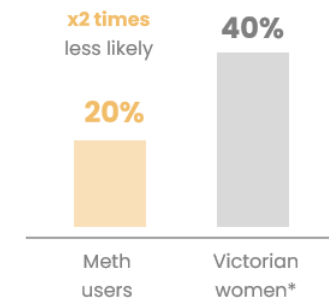
Methodology

This is an analysis of the baseline survey data from the 'VMAX' prospective study. The participants are primarily methamphetamine smokers and were recruited via convenience, respondent-driven and snowball-sampling in Melbourne and three non-metropolitan locations in Victoria, Australia. The eligibility criteria included age 18 years or over and at least monthly use of any form of methamphetamine in the preceding 6 months. Ethics approval was granted from Alfred Hospital and Monash University HRECs.

Conclusion

The ability of healthcare professionals to identify women who use methamphetamines is crucial to optimisation of their care. By identifying these women in pregnancy, we can potentially reduce risk to their unborn babies and enhance childhood outcomes.