

“Pregnant, Postpartum, & OUD”

Study Overview

This study examines the prevalence of OUD-related hospital use during the postpartum period and assesses how prenatal treatment for OUD is associated with postpartum OUD-related hospital use.



Substance use disorder has become one of the leading causes of pregnancy-associated morbidity and mortality in the U.S. There are growing disparities in OUD outcomes by race and ethnicity. There are now more Black individuals dying from opioid overdose than white individuals. These racial disparities also exist for individuals with OUD who are pregnant or in the postpartum period.

TAKEAWAYS

- ✓ Postpartum OUD-related hospital use occurred following 0.6% of all deliveries (less than 1%).
- ✓ Of those who had OUD during pregnancy, 10.7% required postpartum OUD-related hospital use. This was more common for Black individuals.
- ✓ Postpartum OUD-related hospital use was over *twice* as high for people who received MOUD during pregnancy.
- ✓ Black individuals were less likely to require postpartum OUD-related hospital use but Black individuals with an OUD diagnosis were 11 times more likely to require postpartum OUD-related hospital use. This was much higher than the rate for white individuals.
- ✓ We need to remove barriers to long-term MOUD treatment, erase addiction stigma, and end systemic and structural racism for pregnant and postpartum people and for us all!