

A descriptive analysis of mothers with an indication of substance use disorder and their children in British Columbia, 2000-2021

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Methods

- Follow-up: 1 April 2000 to 31 March 2021
- Recruitment: substance use disorder (SUD) related visit one year prior to known pregnancy (or date of first pregnancy-related health record)
- Acute care, physician visits, prescription drug dispensations, perinatal care, or death

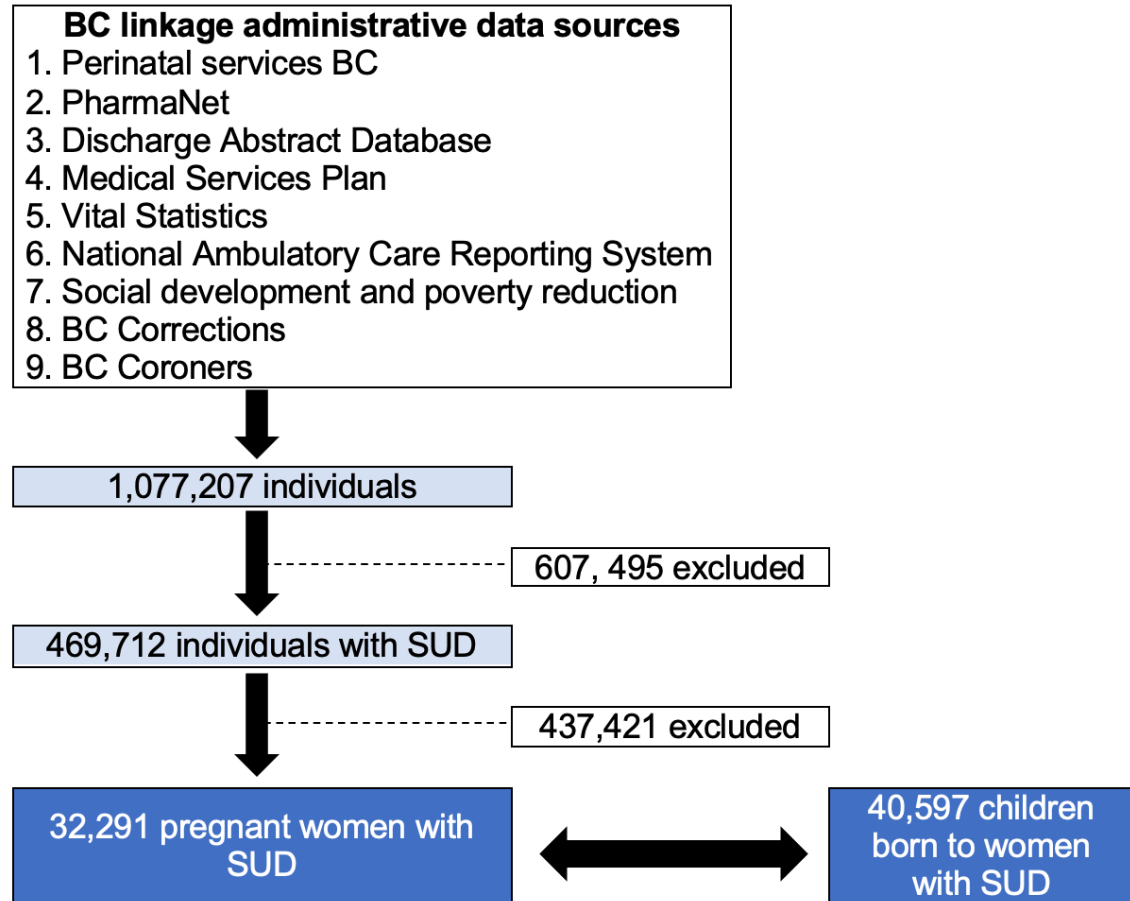
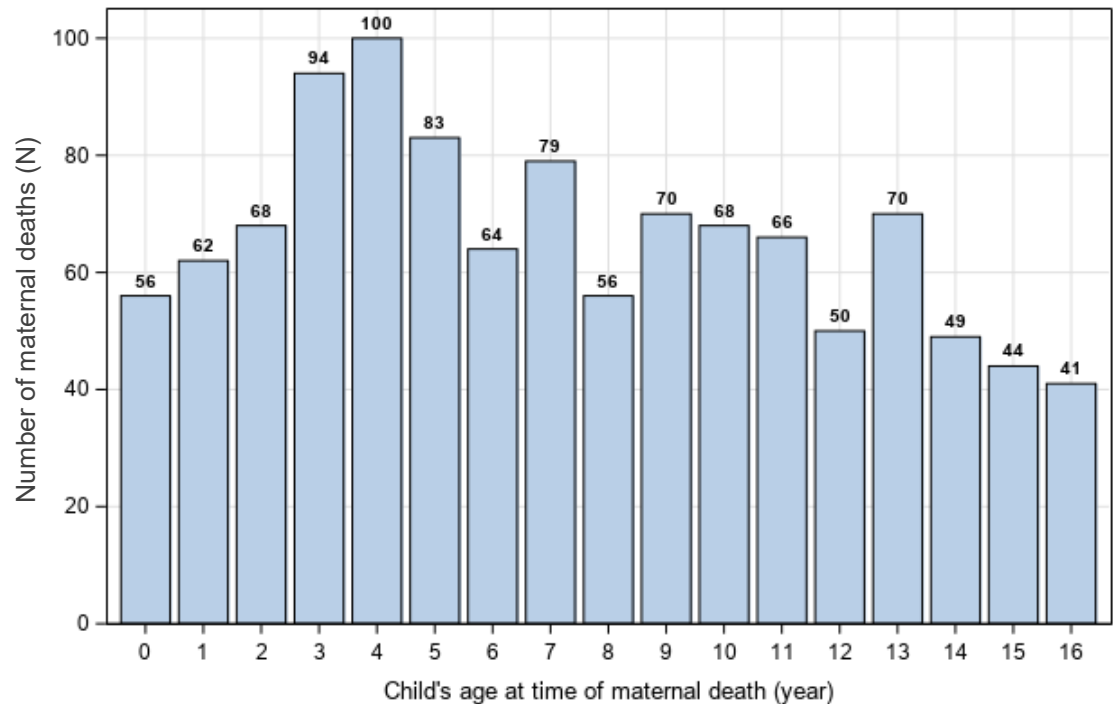


Figure 1. Cohort Flow Diagram

Findings: maternal outcomes

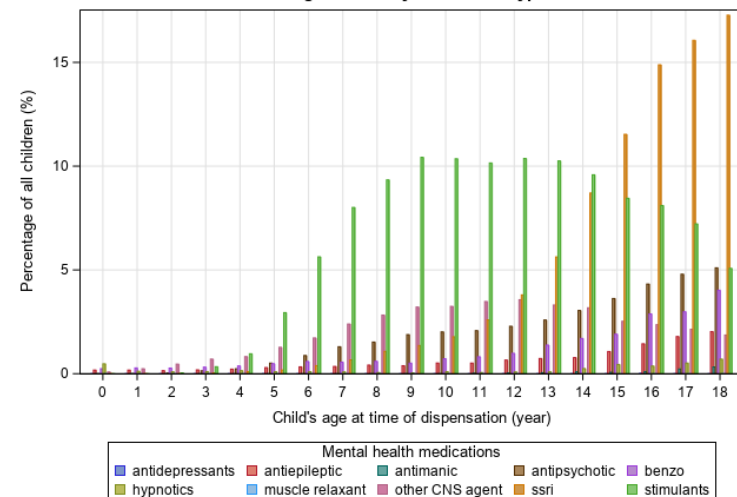
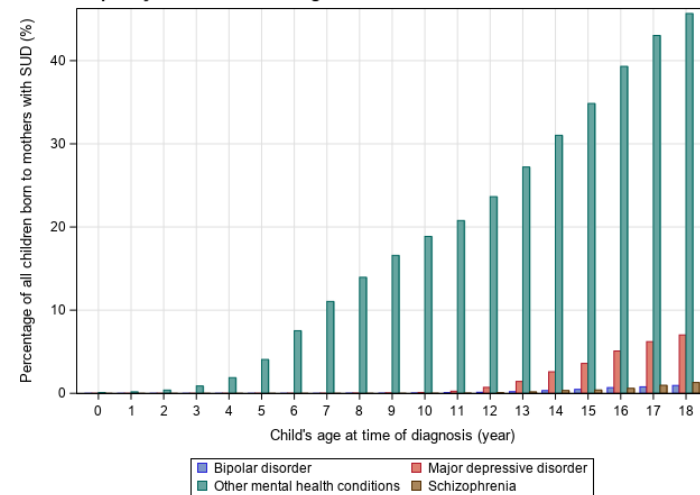
- Fifty-six mothers with SUD died during their child's first year of life. These rates **remained constant until age 4**.



Findings: child outcomes

- By age 18, **almost half** (46%) of children were diagnosed with mental health conditions.*
Major depressive disorder was the most frequent diagnosis.
- The highest rates of mental health prescriptions were **selective serotonin reuptake inhibitors (SSRIs)** and **stimulants** at age 9 (10%) and 18 (17%), respectively.

*Excluding major depressive disorder, bipolar disorder, and schizophrenia.



Future implications

Health care accessibility across BC health authority

- **Over 60%** of deliveries with perinatal substance use were reported outside of Lower Mainland (Fraser and Vancouver Coastal region), however only **35%** of acute care and live-in community beds were located in those regions
- **92%** of acute care beds were located in the Vancouver Coastal region while Northern Health had **6x** higher rates for perinatal substance use

Future implications

- Increasing accessibility to mental health, child support, and perinatal care services are necessary to mitigate and prevent the burden of disease among these mothers and children

Thank you!