

PréCARE - Cohort of Socially Vulnerable Females

Head :Azria Elie, INSERM Unit 953

Estellat Candice

Ravaud Philippe, Department of Epidemiology and Biostatistics

Last update : 06/20/2016 | Version : 1 | ID : 5015

General

Identification

Detailed name Cohort of Socially Vulnerable Females

Sign or acronym PréCARE

General Aspects

Medical area Gynecology/ obstetrics

Health determinants Social and psychosocial factors

Keywords pregnant women, social factors, prospective, cohort, multicentric, hospitalisation

Scientific investigator(s) (Contact)

Name of the director Azria

Surname Elie

Address Service de gynécologie obstétrique Hôpital Bichat
46, rue Henri Huchard 75018 Paris

Phone +33 (0)1 40 25 76 57

Email eazria@hpsj.fr

Unit INSERM Unit 953

Organization Paris Public Hospitals

Name of the director Estellat

Surname Candice

Email candice.estellat@bch.aphp.fr

Organization Paris Public Hospitals

Name of the director Ravaud

Surname	Philippe
Phone	AP-HP
Email	philippe.ravaud@htd.aphp.fr
Unit	Department of Epidemiology and Biostatistics
Organization	+33 (0)1 58 41 41 41

Collaborations

Funding

Funding status Public

Details PHRC (Hospital clinical research programmes) 2007 and 2012

Governance of the database

Sponsor(s) or organisation(s) responsible Paris Public Hospitals (AP-HP)

Organisation status Public

Additional contact

Main features

Type of database

Type of database Study databases

Study databases (details) Cohort study

Database recruitment is carried out by an intermediary A selection of health institutions and services

Database recruitment is carried out as part of an interventional study No

Database objective

Main objective
 Main objective
 To assess the impact of maternal vulnerability factors on childbirth, child and maternal outcome, as well as break down the mechanisms linking vulnerable conditions to increased perinatal and maternal risk.
 Secondary aims:

? to study the impact of serious events on vulnerable women by exclusive monitoring in one hospital in relation to monitoring within the city hospital network;

? to study the treatment path for vulnerable women;

? to answer questions posed by additional studies;

? to identify risk factors of increased post-partum haemorrhaging;

? assess the impact of maternal vulnerability on immunobiological development in HIV-infected pregnant women (in partnership with the EPF-ANRS cohort)

? assess the impact of maternal vulnerability on systemic errors and avoiding such errors in relation to the onset of serious adverse events during pregnancy: (PREVIANS)

? Definition of normal values for various biological markers (PreCARE Bio)

? to identify social and economic factors that determine healthcare consumption in pregnant women (URC ECO APHP)

? to identify social and economic factors that determine healthcare consumption in newborns (0 to 28 days old) (URC ECO APHP)

Inclusion criteria

All women registered to give birth or giving birth in one of 4 maternity units in participating centres (Bichat-Claude Bernard, Robert Debré, Louis Mourier, Beaujon).

Population type

Age
Adulthood (19 to 24 years)
Adulthood (25 to 44 years)

Population covered
General population

Gender
Woman

Geography area
National

Detail of the geography area
France

Data collection

Dates

Date of first collection (YYYY or MM/YYYY)
10/2010

Date of last collection (YYYY or MM/YYYY)
12/2012

Size of the database

Size of the database (number of individuals) [10 000-20 000] individuals

Details of the number of individuals 10,413

Data

Database activity Current data collection

Type of data collected Clinical data
Declarative data

Clinical data (detail) Direct physical measures

Details of collected clinical data Pregnancy follow-up, maternal morbidity/mortality, neonatal morbidity/mortality

Declarative data (detail) Paper self-questionnaire

Details of collected declarative data Isolation, vulnerability, income, social status

Presence of a biobank No

Health parameters studied Health event/morbidity
Health event/mortality

Procedures

Data collection method Data on vulnerability collected by self-administered questionnaire at start of pregnancy, as well as medical data through summary sheets completed by midwives or obstetricians. Data that is hopefully clearly indicated in the medical record (demographic data, date of pregnancy, due date, etc.) may be collected retrospectively.

Participant monitoring Yes

Details on monitoring of participants 6 months

Links to administrative sources Yes

Linked administrative sources (detail) Cross-referencing with PMSI (Medical Information System Programme) and SNIIR-AM (National Health Insurance Cross-Schemes Information System) databases is planned in order to gather data regarding hospital re-admissions and overall

healthcare use..

Promotion and access

Promotion

Access

Terms of data access (charter for data provision, format of data, availability delay)

To be decided.

Access to aggregated data

Access on specific project only

Access to individual data

Access on specific project only