

— 原著論文 —

北海道の助産師外来における超音波検査の使用に関する実態調査

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A survey on the utilization of ultrasonography in 'in-hospital midwifery clinics' in Hokkaido, Japan

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Abstract

We examined the utilization of ultrasonography by midwives at 'in-hospital midwifery clinics' in Hokkaido, and compared their views and educations concerning ultrasonography between midwives who perform ultrasonography (operating group: OG) and midwives who do not (non-operating group: NG). A qualitative descriptive study was used. We sent self-administered questionnaires concerning the utilization of ultrasonography to midwives at the 'in-hospital midwifery clinics'. One hundred and forty-nine engaged at 'in-hospital midwifery clinics'. Of the 149 midwives, there were 90 valid responses (72 in OG, 18 in NG). Forty-eight midwives (66.7%) in OG utilized ultrasonography, mainly for the purpose of increasing communication with pregnant women. Also, 36 midwives (50.0%) in OG had experienced difficulties against pregnant women's requests on ultrasonography. 'Poor skill' was the most common reason (66.7%) for difficulties. In NG, seven midwives (38.9%) regarded ultrasonography as medical practice for diagnosis, this being their main reason for not utilizing ultrasonography. Although screening tests are independently conducted by midwives in some countries such as Ireland, the majority of participants in both groups thought that 'it is not a midwife's business' and 'more education is needed'. Establishing an adequate education system and providing guidelines for the utilization of ultrasonography by midwives will strengthen their ability.

Key words: 助産師外来, 超音波検査, 継続教育
in-hospital midwifery clinics, ultrasonography, continuous education

概要

や受けてきた教育について比較した。

目的

北海道の助産師外来で勤務する助産師による超音波検査の使用の実態について調査し、超音波検査を実施する助産師(実施群)と実施しない助産師(未実施群)における超音波検査に関する意見

方法

量的記述的研究を行った。助産師外来に勤務する助産師に対して、超音波の使用に関する自記式質問紙調査を行った。北海道内の助産師外来を開設する20施設(病院15施設とクリニック5施設)

に勤務する149人の助産師に対し、質問紙を送付し、90人（実施群72人、未実施群18人）から有効回答を得た。（有効回答率60.4%）

結果

実施群の48名（66.7%）は、主に妊婦とのコミュニケーションを深める目的で超音波検査を実施していた。また、実施群の36名（50.0%）の助産師は、超音波検査の際に妊婦から質問があった場合、回答に困難さを感じていた。困難さの主な理由は「技術が乏しいから」であった（66.7%）。

未実施群では、7人の助産師（38.9%）が、超音波検査は医療診断行為に相当すると考えており、そのことが実施しない主な理由であった。アイルランド、ノルウェー、スウェーデンなどの諸外国では、妊娠中の超音波検査を用いたスクリーニングテストは助産師によって自律的に実施されている。アイルランドでの助産師によるスクリーニングテストを例に挙げて意見を聞いたところ、日本では、実施群、未実施群の両群において、多くの助産師は、「それは助産師の仕事ではない。」「もっと教育が必要である。」と考えていることが判明した。

結語

実施群の助産師の多くは、診断目的よりも妊婦とのコミュニケーションを深めることを目的として、超音波検査を実施していた。さらに、多くの助産師は、超音波検査に対する自分の技術に自信を持っていなかった。助産師による超音波検査の実施に向けた教育システムを確立し、ガイドラインを作成することが今後必要であり、助産師の能力を強化することにつながると考える。

Introduction

In 2008, the Ministry of Health, Labor and Welfare in Japan proposed 'in-hospital midwife-led care systems' where midwives in the medical institutions autonomously run the outpatient department and/or birth center in collaboration with obstetricians and roles are shared between midwives and obstetricians¹.

This system aims to provide a safe and comfortable care system to women who are going to experience pregnancy and birth in Japan, in which a lack of obstetricians presents a big problem. The 'in-hospital midwifery clinic' is the section in the medical facility where midwives independently conduct antenatal health checkups and provide health guidance to normal pregnant women². Generally, from a patient's first visit until the appropriate gestational week (on average, the 22nd week of pregnancy) which is determined at each facility, obstetricians perform a pregnancy checkup, and thereafter pregnant women have their regular pregnancy checkups in the 'in-hospital midwifery clinic' according to their pregnancy risk and wishes. In the facility, there is always a backup system by which the obstetricians support the midwives. Accordingly, an 'in-hospital midwifery clinic' cannot exist in a facility without obstetricians³.

As more time (an average of 60 minutes) is allowed for each checkup at the 'in-hospital midwifery clinic' compared to one by an obstetrician, the pregnant woman can relax in a friendly atmosphere and communicate with the midwife without feelings of tension and anxiety. This is also a good opportunity for pregnant women to learn about the role of midwives⁴. However, as the operation of each 'in-hospital midwifery clinic' is determined by each facility, specific tasks especially the transabdominal ultrasound examination (hereafter simply "ultrasonography"), differ among facilities⁵. Another study showed that some pregnant women who consulted a midwife in the 'in-hospital midwifery clinic' asked for the same quantity of ultrasonography as an obstetrician would conduct⁶. In Japan, ultrasonography for pregnant women has been conducted by an obstetrician or a clinical examination technician for the purpose of diagnosing fetal growth, fetal