

# Current awareness for Midwifery Recent guidelines, reports and articles June 2021

# Guidelines

The following guideline(s) maybe of interest:

<u>COVID-19 vaccination: women of childbearing age, currently pregnant or breastfeeding.</u> Public Health England (PHE); 2021. <u>https://www.gov.uk/government/publications/covid-19-vaccination-women-of-childbearing-age-currently-</u> pregnant-planning-a-pregnancy-or-breastfeeding

[Information for all women of childbearing age, those currently pregnant or breastfeeding on coronavirus (COVID-19) vaccination. 18 May 2021: Updated to reflect translations are available to order.] Freely available online

### Reports

The following report(s) may be of interest:

A prognostic model to guide decision-making on timing of delivery in late preterm pre-eclampsia: the PEACOCK prospective cohort study.

Duhig K. *Health Technology Assessment* 2021;25(30):DOI: 10.3310/hta25300. [Neither placental growth factor measurement nor existing models developed in women with early-onset pre-eclampsia aided clinical assessment regarding timing of delivery in late preterm pre-eclampsia.]

A new strategy for the changing world of health and social care - CQC's strategy from 2021.

Care Quality Commission (CQC); 2021.

https://www.cqc.org.uk/about-us/our-strategy-plans/new-strategy-changing-world-health-social-carecqcs-strategy-2021

[CQC sets out its ambitions under four themes: people and communities, smarter regulation, safety through learning, and accelerating improvement.] *Freely available online* 

# Articles

The following articles maybe of interest:

Association of Maternal SARS-CoV-2 Infection in Pregnancy With Neonatal Outcomes.

JAMA 2021;:online first. [JAMA. 2021 Apr 29. pii: 2779586. doi: 10.1001/jama.2021.5775.] Freely available online

#### Are macrolides a risk in pregnancy? [Comment]

Mendes A. British Journal of Midwifery 2021;29(6):356–357.

[In early 2020, the British Medical Journal (BMJ) urged caution regarding the use of some antibiotics in pregnancy. A study they published had found that children of mothers prescribed macrolide antibiotics during early pregnancy were at an increased risk of major birth defects, namely heart defects, when compared with children of mothers who received penicillin.] *Available with an NHS OpenAthens password for eligible users* 

<u>Care strategies before entering pregnant mothers to the operating room and after birth during COVID-</u><u>19.</u>

Moghadam M. British Journal of Midwifery 2021;29(6):348–351.

[Coronavirus (SARS-CoV-2) is an infectious disease that is spread through saliva droplets or nasal discharge while coughing or sneezing (World Health Organization [WHO], 2020a). These droplets could be inhaled into the mouth or nose and, possibly, into the lungs through the air if one is close to an infected person (Centers for Disease Control and Prevention [CDC], 2020e).]

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# Effect of Community-Initiated Kangaroo Mother Care on Postpartum Depressive Symptoms and Stress Among Mothers of Low-Birth-Weight Infants: A Randomized Clinical Trial.

*JAMA Network Open* 2021;4(4):e216040.

[Conclusions and Relevance: These findings suggest that ciKMC practice may substantially reduce the risk of moderate-to-severe maternal postpartum depressive symptoms. This evidence supports KMC as an intervention to be incorporated in essential newborn care programs in low- and middle-income settings.] *Freely available online* 

#### **Evaluating an enhanced quality improvement intervention in maternity units: PReCePT trial protocol.**

Edwards H. BMJ Open Quality 2021;10(2):DOI: 10.1136/bmjoq-2020-001204.

[The UK's National Institute for Health and Care Excellence Preterm labour and birth guideline recommends use of magnesium sulfate (MgSO4) in deliveries below 30 weeks' gestation to prevent cerebral palsy and other neurological problems associated with preterm delivery. National Health Service England has rolled out the PReCePT (PRevention of Cerebral Palsy in Pre-Term labour) quality improvement (QI) toolkit to increase uptake of MgSO4 in preterm deliveries.]

#### <u>Maternal and Neonatal Morbidity and Mortality Among Pregnant Women With and Without COVID-19</u> <u>Infection: The INTERCOVID Multinational Cohort Study.</u>

JAMA Pediatrics 2021;:online first.

[This large multinational cohort study showed a significant increased risk of maternal and neonatal complications among pregnant women with COVID-19 infection compared to those without. It seems that the complication rates reported in this study are higher than those reported in other studies. During pregnancy, women should observe preventive measures.

It is important to note that asymptomatic women were at almost normal risk level and only symptomatic ladies were at higher risk.]

Freely available online

#### **Reflecting on why surgical swabs are being left behind and exploring how this could be prevented.** Spranzi F. *British Journal of Midwifery* 2021;29(6):310-315.

[Surgical swabs are routinely used by obstetricians and midwives to absorb blood during caesarean sections or perineal repairs following a vaginal birth. On rare occasions, a surgical swab can be left behind by mistake inside the patient's body. When an incident involving a retained swab occurs, this is declared a 'never event'. Although a rare occurrence, a retained surgical swab is the source of high morbidity

(infection, pain, secondary postpartum haemorrhage and psychological harm).] *Available with an NHS OpenAthens password for eligible users* 

# Safe care on maternity units: a multidimensional balancing act. [Editorial]

White VanGompel E. BMJ Quality & Safety 2021;30(6):437-439.

[In conclusion, physical safety is the bare minimum of what should be expected in childbirth. Patients have a right, and healthcare providers and systems have an obligation to aim higher, to ensure patients emerge from childbirth as healthy or healthier—both physically and psychologically—than before entering the hospital...]

<u>Seven features of safety in maternity units: a framework based on multisite ethnography and stakeholder consultation.</u>

Liberati EG. BMJ Quality & Safety 2021;30(6):444-456.

[Background: Reducing avoidable harm in maternity services is a priority globally. As well as learning from mistakes, it is important to produce rigorous descriptions of 'what good looks like'. Conclusions: This large qualitative study has enabled the generation of a new plain language framework—For Us—that identifies the behaviours and practices that appear to be features of safe care in hospital-based maternity units.]

# Six versus twelve hours of single-balloon catheter placement with oxytocin administration for labor induction: a randomized controlled trial

American Journal of Obstetrics and Gynecology 2021;:Online ahead of print.

[This study aimed to evaluate whether women who undergo induction of labor with a single-balloon catheter and oxytocin have a shorter time to delivery with planned removal of the catheter at 6 vs 12 hours.]

Contact the library for a copy of this article

#### When is the right time to induce labour?

Garriga M. BMJ Evidence-Based Medicine 2021;26(3):135-136.

[In women with late-term but otherwise low-risk, singleton pregnancies, labour induction at 41 weeks can decrease the risk of stillbirth and is preferred over expectant management. Additionally, in contrast to previous evidence, the Swedish Post-term Induction Study data suggest that no major harms are associated with labour induction. As women exceed term, they should be counselled on the risks of expectant management and offered induction of labour no later than at 41 weeks.] *Available with an NHS OpenAthens password* 

