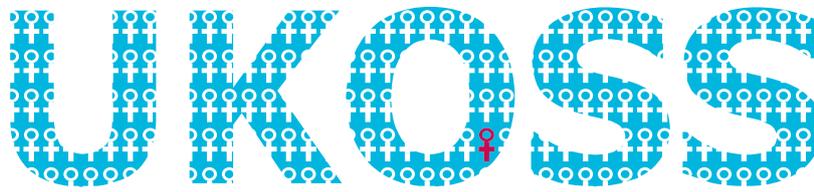




Royal College of
Obstetricians
and Gynaecologists



UK Obstetric Surveillance System



34

NEWSLETTER 34 - July 2013

34

Congratulations!

Please join us in congratulating Kate Fitzpatrick and Colleen Acosta who were both awarded prizes at the BMFMS Annual Conference in April 2013.

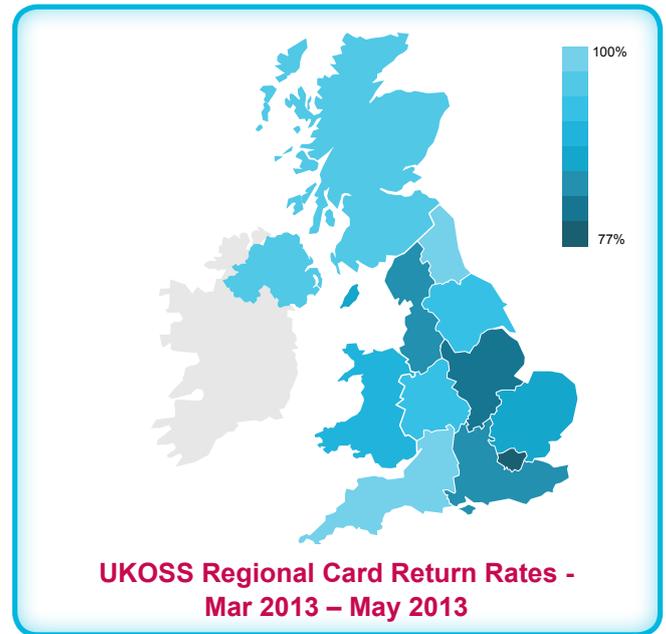
Kate Fitzpatrick, epidemiologist on the UKNeS programme, was awarded the prize for best poster in the maternal medicine category in which she presented preliminary findings from the UKOSS HELLP Syndrome study.



Colleen Acosta, DPhil researcher, won the prize for best presentation in the maternal medicine category, where she presented the results of the UKOSS Severe Maternal Sepsis study.



Many Congratulations!



Case report summary for current studies up until May 2013

Disorder	Actual number of reported cases	Data collection forms returned (%)	Number of confirmed cases (%)	Expected number of confirmed cases
Adrenal Tumours	23	17 (74)	6 (35)	45
Amniotic Fluid Embolism*	173	165 (95)	119 (72)	100
Anaphylaxis*	16	10 (63)	8 (80)	20
Artificial Heart Valves	14	7 (50)	7 (100)	21
Cardiac Arrest in Pregnancy (CAPS)	96	74 (77)	36 (49)	52
Massive Transfusion	210	158 (75)	121 (77)	183
Stage 5 Chronic Kidney Disease	28	18 (64)	12 (67)	54

Funding: *This study represents independent research commissioned by the National Institute for Health Research (NIHR) under its Programme Grants for Applied Research Programme (Programme Grant RP-PG-0608-10038).

THIS MONTH

New studies:
ITP in Pregnancy
Pregnancy at Advanced Maternal Age



Thanks to the following hospitals who have returned cards for the last three months (February, March and April 2013):

Aberdeen Maternity Hospital, Aberdeen
Airedale General Hospital, Keighley
Alexandra Hospital, Redditch
Altnagalvin Area Hospital, Londonderry
Antrim Hospital, Antrim
Arrowe Park Hospital, Wirral
Barnet General Hospital, Barnet
Basildon Hospital, Basildon
Bassetlaw District General Hospital, Worksop
Birmingham City Hospital, Birmingham
Birmingham Women's Hospital, Birmingham
Borders General Hospital, Borders
Bradford Royal Infirmary, Bradford
Bronglais Hospital, Aberystwyth
Broomfield Hospital, Chelmsford
Caithness General Hospital, Wick
Calderdale Royal Hospital, Halifax
Causeway Hospital, Coleraine
Chesterfield & North Derbyshire Royal Hospital, Chesterfield
City Hospitals Sunderland NHS Trust, Sunderland
Countess of Chester Hospital, Chester
Craigavon Area Hospital, Portadown
Croydon University Hospital, Thornton Heath
Darent Valley Hospital, Dartford
Darlington Memorial Hospital, Darlington
Derby Hospitals NHS Foundation Trust, Derby
Derriford Hospital, Plymouth
Dewsbury and District Hospital, Dewsbury
Diana Princess of Wales Hospital, Grimsby
Doncaster Royal Infirmary, Doncaster
Dorset County Hospital, Dorchester
Dr Gray's Hospital, Elgin
Dumfries & Galloway Royal Infirmary, Dumfries
East Surrey Hospital, Redhill
Erne Hospital, Enniskillen
Forth Valley Royal Hospital, Larbert
Friarage Hospital, Northallerton
Frimley Park Hospital, Camberley
George Eliot Hospital, Nuneaton
Gloucestershire Royal Hospital, Gloucester
Good Hope Hospital, Sutton Coldfield
Harrogate District Hospital, Harrogate
Hereford County Hospital, Hereford
Hillingdon Hospital, Uxbridge
Horton Hospital, Banbury
Hull Royal Infirmary, Hull
Ipswich Hospital, Ipswich
James Cook University Hospital, Middlesbrough
James Paget Hospital, Great Yarmouth
Jersey General Hospital, St Helier
John Radcliffe Hospital, Oxford
King's Mill Hospital, Sutton in Ashfield
Lancashire Women and Newborn Centre, Burnley
Leeds General Infirmary, Leeds
Leighton Hospital, Crewe
Macclesfield District General Hospital, Macclesfield
Mater Infirmorum Hospital, Belfast
Medway Maritime Hospital, Gillingham
Milton Keynes General Hospital, Milton Keynes
Nevill Hall Hospital, Abergavenny
New Cross Hospital, Wolverhampton
Ninewells Hospital & Medical School, Dundee
Nobles Hospital, Douglas
North Devon District Hospital, Barnstaple
North Hampshire Hospital, Basingstoke
North Manchester General Hospital, Manchester
Northampton General Hospital, Northampton
Northwick Park Hospital, Harrow
Nottingham City Hospital, Nottingham
Nottingham University Hospitals NHS Trust, Nottingham
Peterborough City Hospital, Peterborough

Pinderfields General Hospital, Wakefield
Poole Hospital, Poole
Prince Charles Hospital, Methyr Tydfil
Princess Alexandra Hospital, Harlow
Princess Elizabeth Hospital, St Martins
Princess of Wales Hospital, Bridgend
Princess Royal Hospital, Haywards Heath
Princess Royal Maternity Hospital, Glasgow
Queen Elizabeth Hospital, Gateshead
Queen Elizabeth Hospital, Kings Lynn
Queen Elizabeth Hospital, London
Queen Elizabeth the Queen Mother Hospital, Margate
Queen's Hospital, Burton upon Trent
Queen's Hospital, Romford
Raigmore Hospital, Inverness
Rosie Maternity Hospital, Cambridge
Rotherham District General Hospital, Rotherham
Royal Albert Edward Infirmary, Wigan
Royal Alexandra Hospital, Paisley
Royal Berkshire Hospital, Reading
Royal Cornwall Hospital, Truro
Royal Devon & Exeter Hospital, Exeter
Royal Hampshire County Hospital, Winchester
Royal Jubilee Maternity Service, Belfast
Royal Oldham Hospital, Oldham
Royal Preston Hospital, Preston
Royal Surrey County Hospital, Guildford
Royal United Hospital, Bath
Royal Victoria Infirmary, Newcastle-upon-Tyne
Russells Hall Hospital, Dudley
Salisbury District Hospital, Salisbury
Scarborough Hospital, Scarborough
Singleton Hospital, Swansea
South Tyneside District Hospital, South Shields
Southend Hospital, Westcliff-on-Sea
Southern General Hospital, Glasgow
Southmead Hospital, Bristol
Southport & Ormskirk Hospital NHS Trust, Ormskirk
St George's Hospital, London
St Helier Hospital, Carshalton
St John's Unit at Howden, Livingston
St Mary's Hospital, London
St Mary's Hospital, Manchester
St Michael's Hospital, Bristol
St Peter's Hospital, Chertsey
Staffordshire General Hospital, Stafford
Stepping Hill Hospital, Stockport
Stoke Mandeville Hospital, Aylesbury
Tameside General Hospital, Ashton-under-Lyne
Taunton and Somerset Hospital, Taunton
The Great Western Hospital, Swindon
The Jessop Wing, Sheffield
The Portland Hospital, London
The Tunbridge Wells Hospital, Tunbridge Wells
Torbay Hospital, Torquay
Ulster Hospital, Belfast
University College Hospital, London
University Hospital of North Tees, Stockton-on-Tees
University Hospital of Wales, Cardiff
Victoria Hospital, Kirkcaldy
Wansbeck General Hospital, Ashington
Warrington Hospital, Warrington
Warwick Hospital, Warwick
West Cumberland Hospital, Whitehaven
West Middlesex University Hospital, Isleworth
West Suffolk Hospital, Bury St Edmunds
West Wales General Hospital, Carmarthen
Western Isles Hospital, Stornaway
William Harvey Hospital, Ashford
Wishaw General Hospital, Wishaw
Worcestershire Royal Hospital, Worcester

Worthing Hospital, Worthing
Wrexham Maelor Hospital, Wrexham
York Hospital, York
Ysbyty Gwynedd District General Hospital, Bangor
Ayrshire Maternity Unit, Kilmarnock
Barnet and Chase Farm Hospitals NHS Trust, Enfield
Bedford Hospital, Bedford
Birmingham Heartlands Hospital, Birmingham
Chelsea & Westminster Hospital, London
Colchester General Hospital, Colchester
Conquest Hospital, St Leonards-on-Sea
Cumberland Infirmary, Carlisle
Daisy Hill Hospital, Newry
Ealing Hospital, London
Eastbourne District General Hospital, Eastbourne
Epsom General Hospital, Epsom
Glan Clwyd District General Hospital, Rhyl
Hinchingsbrooke Hospital, Huntingdon
Homerton University Hospital, London
Kettering General Hospital, Kettering
Kingston Hospital, Kingston upon Thames
Leicester Royal Infirmary, Leicester
Lincoln County Hospital, Lincoln
Lister Hospital, Stevenage
Liverpool Women's Hospital, Liverpool
Manor Hospital, Walsall
Norfolk & Norwich University Hospital, Norwich
North Middlesex Hospital, London
Pilgrim Hospital, Boston
Queen Alexandra Hospital, Portsmouth
Queen Charlotte's and Chelsea Hospital, London
Royal Bolton Hospital, Bolton
Royal Free Hospital, London
Royal Gwent Hospital, Newport
Royal Shrewsbury Hospital, Shrewsbury
Royal Sussex County Hospital, Brighton
Scunthorpe General Hospital, Scunthorpe
Simpson Centre for Reproductive Health, Edinburgh
St James's University Hospital, Leeds
St Richard's Hospital, Chichester
University Hospital Lewisham, London
University Hospital of Coventry & Warwickshire, Coventry
University Hospital of North Durham, Durham
University Hospital of North Staffordshire, Stoke on Trent
Victoria Hospital, Blackpool
Watford General Hospital, Watford
Wexham Park Hospital, Slough
Whiston Hospital, Prescot
Withybush Hospital, Haverfordwest
Yeovil Women's Hospital, Yeovil
Barnsley Hospital NHS Foundation Trust, Barnsley
Furness General Hospital, Barrow-in-Furness
Guy's and St Thomas' Hospital, London
King's College Hospital, London
Leicester General Hospital, Leicester
Luton & Dunstable Hospital, Luton
Newham General Hospital, London
Princess Anne Hospital, Southampton
Queen Elizabeth II Hospital, Welwyn Garden City
Royal Glamorgan Hospital, Llantrisant
Royal Lancaster Infirmary, Lancaster
Royal London Hospital, London
St Mary's Hospital, Newport
Whittington Hospital, London
Princess Royal University Hospital, Orpington
Whipps Cross University Trust Hospital, London
Wythenshawe Hospital, Manchester

Returned all three cards. Returned two cards. Returned one card. No Cards Returned.



Follow us

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New UKOSS study starting soon!

Pregnancy at Advanced Maternal Age

Background: Childbearing at advanced maternal age is becoming increasingly common in high income countries. Furthermore, developments in assisted reproductive technologies, including IVF and egg donation, may contribute to an increasing incidence of pregnancies in women outside of the normal reproductive age. In England and Wales the average age at childbearing has increased steadily since the mid-1970s from 26.4 in 1975 to 29.5 in 2010, with a corresponding rise in the proportion of women delivering in their 30s and 40s.¹

Many studies have reported an association between advanced maternal age and adverse maternal and infant outcomes.²⁻⁴ However, the majority of studies have reported outcomes in women aged >35 years or women aged >40 years. These studies therefore include only a small number of the oldest mothers and have not specifically addressed the risks associated with very advanced maternal age.

Surveillance Period: 1st July 2013 – 30th June 2014.

Case definition: All pregnant women in the UK of 20 weeks gestation or more, who are aged 48 years or older at their estimated date of delivery.

Funding: This study has been funded by the National Institute for Health Research as part of the UK National Maternal Near-miss Surveillance Programme (UKNeS).

Investigators: Kate Fitzpatrick, Marian Knight, Jenny Kurinczuk, NPEU; Derek Tuffnell, Bradford Teaching Hospitals NHS Foundation Trust.

References:

1. Office for National Statistics, Live Births in England and Wales by Characteristics of Mother 1, 2010, 2011.
2. Balasch, J. and E. Gratacos, Delayed childbearing: effects on fertility and the outcome of pregnancy. *Current opinion in obstetrics & gynecology*, 2012. **24**(3): p. 187-93.
3. Montan, S., Increased risk in the elderly parturient. *Current opinion in obstetrics & gynecology*. 2007. **19**(2): p. 110-2.
4. Hansen, J. P., Older maternal age and pregnancy outcome: a review of the literature. *Obstetrical & gynaecological survey*, 1996. **41**(11): p. 726-42.



Case-Control Studies



Please note that the Pregnancy at Advanced Maternal Age study is a case-control study. This means that for every case reported, we will also request data for two control women. For our data collection purposes we require **both** controls to deliver **before** the case, therefore please select the two women who delivered immediately before the case.

The need for controls is dependent on the research questions for a particular study; if we want to investigate and quantify risk factors for a particular condition, we need information about unaffected women to enable us to compare their characteristics with the characteristics of the women who are affected with the disorder. If we don't have control information, we can't do this. For example, for the failed intubation study, obtaining information about two control women who had straightforward GAs enabled us to quantify the 6% increase in the risk of failed intubation for every 1kg/m² increase in maternal BMI.

We appreciate that identifying and completing these controls can sometimes be an onerous and time-consuming task but the control data is incredibly helpful in enabling us to quantify risk factors for certain conditions.

If you have any further questions regarding case-control studies, please contact the UKOSS team at ukoss@npeu.ox.ac.uk.

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*Search your app store for 'qrcode'



New UKOSS Study!

Severe Primary Immune Thrombocytopenia (ITP) in pregnancy

Background: Primary ITP is an acquired immunological disorder characterised by an isolated low platelet count (thrombocytopenia) necessary for normal clotting function. It is defined as a blood peripheral platelet count of $<50 \times 10^9/l$ and the absence of any initiating or underlying cause such as antiphospholipid antibody syndrome, SLE or viral infections.¹ This condition can be acquired during women's reproductive years and is known to develop in pregnancy. The current incidence of ITP in pregnancy is not yet estimated accurately.

Current treatment recommendations for ITP in pregnancy are largely based on clinical experience and expert consensus.¹ There are no high quality prospective studies or randomised clinical trials to inform management of the mother or delivery. Without clear guidance or a strong evidence base for treatment of this rare condition it is unknown how this patient cohort is currently managed in the UK. This study seeks to estimate the current incidence and describe management and outcomes of severe ITP in pregnancy in the UK.

Surveillance Period: 1st June 2013 – 1st May 2014

Case definition: Any pregnant woman who has been diagnosed with thrombocytopenia with a platelet count of $<50 \times 10^9/l$ at any point in her pregnancy prior to delivery where obstetric and hereditary causes for thrombocytopenia have been excluded (ie. pre-eclampsia, HELLP syndrome, acute fatty liver of pregnancy, known antiphospholipid antibody syndrome or other hereditary thrombocytopenias).

OR

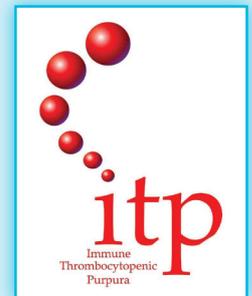
Any pregnant woman diagnosed with an isolated thrombocytopenia where a clinical decision to treat the thrombocytopenia prior to delivery of the infant has been made.

Funding: The ITP Support Association

Investigators: Angharad Care, Liverpool Women's Hospital, Zarko Alfirevic, University of Liverpool/Liverpool Women's Hospital; Marian Knight, NPEU.

References:

1. Provan, D., et al., International consensus report on the investigation and management of primary immune thrombocytopenia. *Blood*, 2010. **115**(2): p. 168-186.



Chocolate Box



Chocolates this month go to Mun-Leng Lim at The Royal London Hospital for assisting with improving the reporting system at Barts and The London and Ann-Marie Brolly at Princess Royal Maternity Hospital, Glasgow for efficient return of cards and forms.

Many thanks to you both!

CAPS study Important Update

Reporting Cardiac Arrests in Pregnancy

From 1st July 2013 please report all women who have a cardiac arrest in pregnancy **AND immediately postpartum**. This will enable us to study all cases relating to delivery complications.

Thank you!



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Studies are additionally funded by Wellbeing of Women, NHS Blood and Transplant, Lauren Page Charity and SPARKS.

