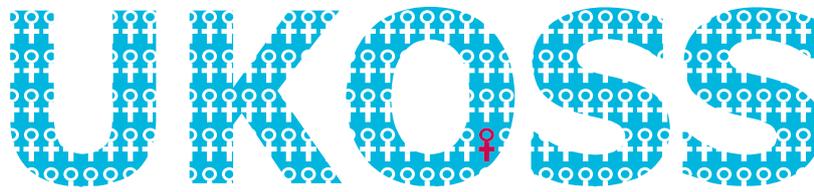




Royal College of
Obstetricians
and Gynaecologists



UK Obstetric Surveillance System



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NEWSLETTER 35 - October 2013

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Management and outcomes of placenta accreta, increta, and percreta in the UK: a population-based descriptive study

The results of the UKOSS Placenta Accreta/Increta/Percreta study have just been published. The aim was to describe the current management and outcomes of placenta accreta, increta, and percreta in the UK.

One hundred and thirty-four women were identified with placenta accreta, increta, or percreta between May 2010 and April 2011. Of the 134 women identified, 50% were suspected to have placenta accreta/increta/percreta antenatally. In women with a final diagnosis of placenta increta or percreta, antenatal diagnosis was associated with reduced levels of haemorrhage (median estimated blood loss 2750 versus 6100ml, $p = 0.008$) and reduced need for blood transfusion (59% versus 94%, $p = 0.014$), possibly because antenatally diagnosed women were more likely to have preventative therapies for haemorrhage (74% versus 52%, $p = 0.007$), and were less likely to have an attempt made to remove their placenta (59% versus 93%, $p < 0.001$). Making no attempt to remove any of the placenta, in an attempt to conserve the uterus or prior to hysterectomy, was associated with reduced levels of haemorrhage (median estimated blood loss 1750ml versus 3700ml, $p = 0.001$) and a reduced need for blood transfusion (57% versus 86%, $p < 0.001$).

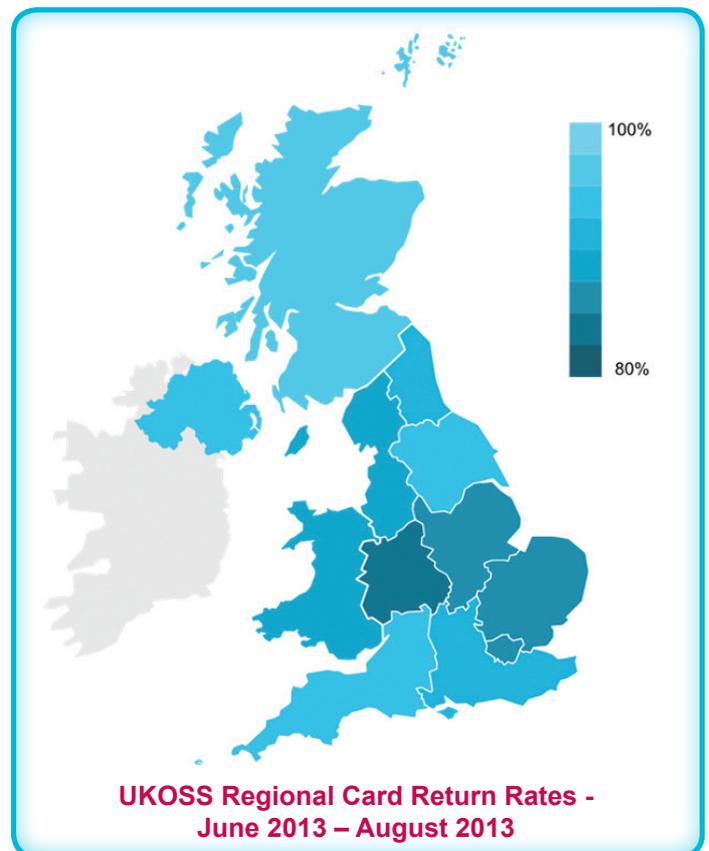
Thus, women with placenta accreta, increta, or percreta who have no attempt to remove any of their placenta, with the aim of conserving their uterus, or prior to hysterectomy, have reduced levels of haemorrhage and a reduced need for blood transfusion, supporting the recommendation of this practice.

Reference: Fitzpatrick KE, Sellers S, Spark P, Kurinczuk JJ, Brocklehurst P, Knight M. The management and outcomes of placenta accreta, increta, and percreta in the UK: a population-based descriptive study. BJOG 2013; DOI:10.1111/1471-0528.12405. [Epub ahead of print]

Congratulations!



Dr Amanda Jefferys, Clinical Research Fellow in Obstetrics and Gynaecology at Southmead Hospital, Bristol, won the prize for the best oral presentation in the maternal, fetal and perinatal medicine stream at the RCOG World Congress 2013, where she presented preliminary results from the Gastric Banding study.



THIS MONTH

- New study - Pulmonary Aspiration in Pregnancy
- Interview with a UKOSS reporter



Thanks to the following hospitals who have returned cards for the last three months (June, July and August 2013):

Aberdeen Maternity Hospital, Aberdeen
Airedale General Hospital, Keighley
Alexandra Hospital, Redditch
Altnagelvin Area Hospital, Londonderry
Antrim Hospital, Antrim
Arrowe Park Hospital, Wirral
Ayrshire Maternity Unit, Kilmarnock
Barnet and Chase Farm Hospitals NHS Trust, Enfield
Barnet General Hospital, Barnet
Basildon Hospital, Canvey Island
Bassetlaw District General Hospital, Worksop
Bedford Hospital, Bedford
Birmingham Women's Hospital, Birmingham
Bradford Royal Infirmary, Bradford
Bronglais Hospital, Aberystwyth
Broomfield Hospital, Chelmsford
Caithness General Hospital, Wick
Calderdale Royal Hospital, Halifax
Causeway Hospital, Coleraine
Chelsea & Westminster Hospital, London
Chesterfield & North Derbyshire Royal Hospital, Chesterfield
City Hospitals Sunderland NHS Trust, Sunderland
Conquest Hospital, St Leonards-on-Sea
Countess of Chester Hospital, Chester
Craigavon Area Hospital, Portadown
Croydon University Hospital, Thornton Heath
Cumberland Infirmary, Carlisle
Daisy Hill Hospital, Newry
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
Ealing Hospital NHS Trust, London
East Surrey Hospital, Redhill
Epsom General Hospital, Epsom
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
Guy's and St Thomas' Hospital, London
Harrogate District Hospital, Harrogate
Hinchingsbrooke Hospital NHS Trust, Huntingdon
Horton Maternity Hospital, Banbury
Hull Royal Infirmary, Hull
Ipswich Hospital, Ipswich
James Cook University Hospital, Middlesbrough
James Paget University Hospitals Trust, Great Yarmouth
Jersey General Hospital, St Helier
John Radcliffe Hospital, Oxford
Kettering General Hospital, Kettering
King's Mill Hospital, Sutton in Ashfield
Kingston Hospital, Kingston upon Thames
Lancashire Women and Newborn Centre, Burnley
Leeds General Infirmary, Leeds
Lincoln County Hospital, Lincoln
Lister Hospital, Stevenage
Liverpool Women's Hospital, Liverpool
Luton & Dunstable Hospital, Luton
Medway Maritime Hospital, Gillingham
Milton Keynes Hospital NHS Foundation Trust, Milton Keynes
Nevill Hall Hospital, Abergavenny
New Cross Hospital, Wolverhampton
Ninewells Hospital & Medical School, Dundee
Nobles Hospital, Douglas
Norfolk & Norwich University Hospital, Norwich
North Devon District Hospital, Barnstaple
North Manchester General Hospital, Manchester
Northwick Park Hospital, Harrow
Nottingham City Hospital, Nottingham
Pilgrim Hospital, Boston
Pinderfields General Hospital, Wakefield
Poole Hospital, Poole
Prince Charles Hospital, Methyr Tydfil
Princess Alexandra Hospital, Harlow
Princess Anne Hospital, Southampton
Princess Elizabeth Hospital, St Martins
Princess Royal Hospital, Haywards Heath
Princess Royal Maternity Hospital, Glasgow
Princess Royal University Hospital, Orpington
Queen Elizabeth Hospital, Gateshead
Queen Elizabeth Hospital, Kings Lynn
Queen Elizabeth the Queen Mother Hospital, Margate
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 Bolton Hospital, Bolton
Royal Cornwall Hospital, Truro
Royal Free Hospital, London
Royal Gwent Hospital, Newport
Royal Hampshire County Hospital, Winchester
Royal Jubilee Maternity Service, Belfast
Royal London Hospital, London
Royal Oldham Hospital, Oldham
Royal Preston Hospital, Preston
Royal Surrey County Hospital, Guildford
Royal Sussex County Hospital, Brighton
Royal United Hospital, Bath
Russells Hall Hospital, Dudley
Salisbury District Hospital, Salisbury
Scarborough Hospital, Scarborough
Scunthorpe General Hospital, Scunthorpe
Simpson Centre for Reproductive Health, Edinburgh
Singleton Hospital, Swansea
South Tyneside District Hospital, South Shields
South West Acute Hospital, Enniskillen
Southend University Hospital NHS FT, Westcliff-on-Sea
Southern General Hospital, Glasgow
Southmead Hospital, Bristol
St George's Hospital, London
St Helier Hospital, Carshalton
St James's University Hospital, Leeds
St John's Hospital, Livingston
St Mary's Hospital, London
St Michael's Hospital, Bristol
St Peter's Hospital, Chertsey
St Richard's Hospital, Chichester
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 Hospitals NHS Foundation Trust, Swindon
The Hillingdon Hospitals NHS Foundation Trust, Uxbridge
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 Coventry & Warwickshire, Coventry
University Hospital of North Staffordshire, Stoke on Trent
University Hospital of North Tees, Stockton-on-Tees
University Hospital of Wales, Cardiff
Victoria Hospital, Blackpool
Victoria Hospital, Kirkcaldy
Wansbeck General Hospital, Ashington
Warwick Hospital, Warwick
Watford General Hospital, Watford
West Suffolk Hospital, Bury St Edmunds
West Wales General Hospital, Carmarthen
Western Isles Hospital, Stornoway
Wexham Park Hospital, Slough
Whiston Hospital, Prescot
Whittington Hospital, London
William Harvey Hospital, Ashford
Wishaw General Hospital, Wishaw
Withybush Hospital, Haverfordwest
Worthing Hospital, Worthing
Wrexham Maelor Hospital, Wrexham
Wythenshawe Hospital, Manchester
Ysbyty Gwynedd District General Hospital, Bangor
Barnsley Hospital NHS Foundation Trust, Barnsley
Birmingham City Hospital, Birmingham
Birmingham Heartlands Hospital, Birmingham
Borders General Hospital, Borders
Colchester General Hospital, Colchester
Eastbourne District General Hospital, Eastbourne
Glan Clwyd District General Hospital, Bodelwyddan
Hereford County Hospital, Hereford
Homerton University Hospital, London
King's College Hospital, London
Leicester Royal Infirmary, Leicester
Leighton Hospital, Crewe
Macclesfield District General Hospital, Macclesfield
Newham General Hospital, London
North Middlesex University Hospital, London
Northampton General Hospital, Northampton
Nottingham University Hospitals NHS Trust, Nottingham
Peterborough City Hospital, Peterborough
Princess of Wales Hospital, Bridgend
Queen Alexandra Hospital, Portsmouth
Queen Charlotte's and Chelsea Hospital, London
Queen Elizabeth Hospital, London
Queen's Hospital, Burton upon Trent
Queen's Hospital, Romford
Royal Devon & Exeter Hospital, Exeter
Royal Lancaster Infirmary, Lancaster
Royal Shrewsbury Hospital, Shrewsbury
Royal Victoria Infirmary, Newcastle-upon-Tyne
Southport & Ormskirk Hospital NHS Trust, Ormskirk
St Mary's Hospital, Manchester
St Mary's Hospital, Newport
University Hospital Lewisham, London
University Hospital of North Durham, Durham
Warrington and Malton Hospitals NHS FT, Warrington
West Cumberland Hospital, Whitehaven
Whipps Cross University Trust Hospital, London
Worcestershire Royal Hospital, Worcester
Yeovil Women's Hospital, Yeovil
York Hospital, York
Furness General Hospital, Barrow-in-Furness
Leicester General Hospital, Leicester
Manor Hospital, Walsall
North Hampshire Hospital, Basingstoke
Royal Glamorgan Hospital, Llantrisant
West Middlesex University Hospital, Isleworth

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



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New UKOSS study

Pulmonary Aspiration in Pregnancy

Background: A recent national audit conducted by the Royal College of Anaesthetists (NAP4) identified aspiration as the commonest cause of death in association with complications of airway management¹. It has therefore been common practice for maternity units to restrict fluid and oral intake during active labour to reduce the risk of aspiration should the need for an unplanned general anaesthetic occur^{2,3}. However, recent National Institute for Health and Clinical Excellence (NICE) guidelines have changed and now recommend that 'women may eat a light diet in established labour unless they have received opioids or they develop risk factors that make general anaesthetic more likely'⁴. 'There are thus concerns that maternal aspiration may become an increasing problem in the UK obstetric population. The aims of this study are to investigate the incidence, risk factors, management and outcomes of the condition.

Surveillance Period: 1st September 2013 – 31st August 2015.

Case definition: Any woman with a final diagnosis of pulmonary aspiration during pregnancy or delivery up to postpartum discharge from hospital

Maternal pulmonary aspiration includes women with the following features:

- Women who have had an unprotected airway while unconscious, semi-conscious or paralysed **AND**
- A clinical history consistent with regurgitation of stomach contents and pulmonary aspiration (e.g. vomiting after induction of anaesthesia or gastric contents seen in the oropharynx) **AND**
- Symptoms/signs of respiratory compromise requiring supplementary oxygen and antibiotics or level 2 or level 3 (HDU or ITU) respiratory support, in the absence of any other clear cause

Classical radiological findings may or may not be present.

Investigators: Marian Knight, Vikash Mistry, Jenny Kurinczuk, NPEU; David Bogod, Nottingham City Hospital; Audrey Quinn, Leeds General Infirmary.

References:

1. Cook, T., et al., 4th National Audit Project of the Royal College of Anaesthetists and The Difficult Airway Society: Major complications of airway management in the United Kingdom. The Royal College of Anaesthetists and The Difficult Airway Society, 2011.
2. Caesarean section. NICE Clinical Guideline.
3. Singata, M., J. Tranmer, and G.M.L. Gyte, Restricting oral fluid and food intake during labour. Cochrane Database of Systematic Reviews, 2010(1).
4. Intrapartum care: care of healthy women and their babies during childbirth. NICE Clinical Guideline.

Case report summary for current studies up until the end of August 2013

Disorder	Actual number of reported cases	Data collection forms returned (%)	Number of confirmed cases (%)	Expected number of confirmed cases
Adrenal Tumours	25	20 (80)	9 (45)	50
Advanced Maternal Age	22	3 (14)	3 (100)	54
Amniotic Fluid Embolism*	178	168 (94)	120 (71)	100
Anaphylaxis*	21	17 (81)	15 (88)	28
Artificial Heart Valves	23	15 (65)	14 (93)	38
Cardiac Arrest in Pregnancy (CAPS)	117	93 (79)	44 (47)	59
Primary ITP	21	9 (43)	5 (56)	23
Stage 5 Chronic Kidney Disease	29	23 (79)	16 (70)	65

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).

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*Search your app store for 'qrcode'



Coming soon – a new study of Obstetric Epidural Haematoma

A new study of Obstetric Epidural Haematoma is due to start in January 2014. More information will be available soon!

GMC Revalidation and NMC Continual Professional Development

We are aware that as part of your GMC revalidation or NMC Continual Professional Development, you are required to provide evidence of participation in national audit and research.

If you would like to receive a certificate confirming your contribution to UKOSS, please email us at ukoss@npeu.ox.ac.uk and we will get one sent out to you.



Chocolate Box



Chocolates this month go to Jaishree Hingorani for improving reporting at Calderdale Royal Hospital and Rebekah Rice from St. Michael's Hospital, Bristol for efficient return of cards and forms.

Many thanks to you both!

Meet a UKOSS Reporter

Melanie Workman, the UKOSS/UKNeS Programme Manager, interviews Anne-Marie Brolly who has been reporting to UKOSS since November 2012.

MW: *Who is your employer and what is your job title?*

A-MB: *I have been a midwife in Glasgow for 25 years and am now based on the Labour Ward at Princess Royal Maternity Hospital. I am also a Supervisor of Midwives and since November 2012, I have a secondment of 7.5 hours per week as Clinical Risk Support Midwife.*

MW: *What are the main duties/responsibilities of your current role?*

A-MB: *My responsibilities as a Clinical Risk Support Midwife include conducting audits of cases that would have been reported to SCASMM (Scottish Confidential Audit of Severe Maternal Morbidity). Our unit has continued to perform these audits in the hope we can use the information that we gather to improve patient safety and care in the future. Part of my Clinical Risk Role includes reporting relevant cases to UKOSS.*

MW: *What do you like best about your current job?*

A-MB: *I enjoy having a role that incorporates direct patient contact as well as audit. It can be quite varied and means that I can help analyse situations from different points of view.*

MW: *How do you manage/co-ordinate the UKOSS reporting in your hospital?*

A-MB: *In Princess Royal Maternity Hospital we have an incident reporting system that usually highlights most UKOSS notifiable conditions but my clinical role as well as careful placement of posters means that staff often let me know if they have cases that may be of interest to me. One such incident occurred recently where a colleague informed me that she was looking after an inpatient who had a gastric band in situ. Embarrassingly, I was delighted to have a case that did not involve a PPH, however my delight was short lived when I realised that the previous month was the last month for UKOSS to collect data relating to this condition!*

MW: *Do you have any hobbies/what are your interests outside of work?*

A-MB: *Outside of work I enjoy riding my motorbike and long walks with my dogs.*



Anne-Marie Brolly -
Princess Royal Maternity Hospital

