



# Surveillance report (exceptional review) 2017 – Antenatal care for uncomplicated pregnancies (2008) NICE guideline CG62

Surveillance report

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## Surveillance decision

We will plan a full update of this guideline.

### *Reason for the decision*

Since NICE guideline CG62 was placed on the static list in 2014, a number of issues relating to the recommendations have been made known to us. These include:

- Poor uptake of the Public Health England [programme on vaccination against pertussis \(whooping cough\) for pregnant women](#) which could be addressed by including in NICE guideline CG62.
- The [NHS England: Saving babies' lives care bundle](#) which aims to improve awareness of fetal movement and may impact on relevant recommendations in NICE guideline CG62.
- The [alcohol guidelines review](#) by the Department of Health which includes recommendations that are now in conflict with NICE guideline CG62.

These issues were discussed in full with topic experts and it was agreed that NICE guideline CG62's position on the static list is no longer justified. The guideline (first published 2003 and partially updated in 2008) needs to be updated using new methodology and revisions are needed to direct users to a range of updated screening policies and relevant vaccination programmes. In addition, topic experts highlighted a number of areas that they felt might need updating or need to be considered for inclusion such as (but not limited to), timing of appointments, information giving, management of women with pre-existing conditions (including how generic NICE guidance interfaces with the pregnancy guidelines), pre-conception advice and planning, and greater emphasis on mental health and social factors, linking where relevant to other NICE guidance. We did not search for new evidence relating to other clinical areas in the guideline as part of this focused surveillance. A full scoping exercise is needed to determine whether the current focus of the guideline remains applicable to current practice and what additional areas should be covered.

### Other clinical areas

This exceptional surveillance review was carried out to allow us to consider the impact of the issues described above on the guideline recommendations. We did not search for new evidence relating to this guideline as part of this focused surveillance.

## Equalities

No equalities issues were identified during the surveillance process.

## Overall decision

After considering the new evidence and views of topic experts, we decided that a full update is necessary for this guideline.

See [how we made the decision](#) for further information.

## How we made the decision

Exceptionally, significant new evidence may mean an update of a guideline is agreed before the next scheduled check of the need for updating. The evidence might be a single piece of evidence, an accumulation of evidence or other published NICE guidance.

For details of the process and update decisions that are available, see [ensuring that published guidelines are current and accurate](#) in 'Developing NICE guidelines: the manual'.

### *New evidence*

We were notified of several programmes of work by NHS England, Public Health England and the Department of Health that could impact on current guideline recommendations.

### *Views of topic experts*

We considered the views of topic experts, including those who helped to develop the guideline. This included discussion with invited topic experts at a workshop.

### *Views of stakeholders*

Stakeholders are consulted only if we decide not to update the guideline following checks at 4 and 8 years after publication. Because this was an exceptional surveillance review, and the decision was to update, we did not consult on the decision.

See [ensuring that published guidelines are current and accurate](#) in 'Developing NICE guidelines: the manual' for more details on our consultation processes.

### *NICE Surveillance programme project team*

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