

## Intrapartum Care for High-Risk Women – Obstetric Complications Committee Meeting

**Date:** 6 & 7 June 2018

**Location:** RCOG, London

**Minutes:** Confirmed

<b>Committee members present:</b>		
Rhona Hughes (Chair) (RH)		(Present for notes 1 – 6)
Alena Chong (AC)		(Present for notes 1 – 6)
Aung Soe (AS) (day 2 only)		(Present for notes 4 – 5)
Heidi Beddall (HB)		(Present for notes 1 – 6)
Jenny Myers (JM) (day 2 only)		(Present for notes 4 – 5)
Leanne Stamp (LS)		(Present for notes 1 – 5)
Margaret Matthews (MMa)		(Present for notes 4 – 6)
Michael Weisz (MW)		(Present for notes 1 – 6)
Philip Barclay (PB)		(Present for notes 1 – 6)
Sarah Fishburn (SF)		(Present for notes 1 – 6)
Tracey Cooper (TC)		(Present for notes 1 – 6)
<b>In attendance:</b>		
Clifford Middleton (CM)	NICE Guidelines Commissioning Manager	(Present for notes 4 – 6)
Anne-Louise Clayton (ALC) (day 2 only)	NICE Senior Medical Editor	(Present for notes 4 – 6)
Nuala Flewett (NF)	Project Manager	(Present for notes 1 – 6)
Laura Kuznetsov (LK)	Systematic Reviewer	(Present for notes 1 – 5)
Rami Cosulich (RC)	Systematic Reviewer	(Present for notes 4 – 6)
Stephen Murphy (SM)	Clinical Advisor	(Present for notes 2 – 6)
Moira Mugglestone (MMu)	Director of Methodology and Guideline Lead	(Present for notes 1 – 6)
Patrice Carter (PC)	Senior Systematic Reviewer	(Present for notes 1 – 6)
Paul Jacklin (PJ) (day 2 only)	Senior Health Economist	(Present for notes 4 – 6)
David Williams (DW) (day 2 only)	IPCHR-M guideline committee Chair	(Present for notes 4 – 5)

#### 4.0.03 DOC Cmte minutes

<b>Apologies:</b>	
Charlotte Gibson (CG)	Committee Member
Maija Kallioinen (MK)	Systematic Reviewer

#### 1. Welcome and objectives for the meeting

The Chair welcomed the committee and technical team to the seventeenth meeting for Intrapartum Care for High-Risk Women – Obstetric Complications.

The Chair informed the committee that apologies had been received as noted above.

The Chair outlined the objectives of the meeting, which included the following:

- revisiting questions where diagnostic evidence had been sought
- reviewing all draft recommendations and justifications
- taking account of economic evidence and resource impact
- considering preference sensitive decision points
- considering research recommendations.

#### 2. Confirmation of matter under discussion, and declarations of interest

The Chair confirmed that for the purpose of managing conflicts of interest the matter under discussion was intrapartum care for women at high risk of adverse outcomes because of obstetric complications. The Chair asked everyone to verbally declare any interests that had arisen since the last meeting.

Name	Job title, organisation	Declarations of Interest	Type of interest	Decision taken
Aung Soe	Consultant Neonatologist, Medway Maritime Hospital	Appointed as Clinical Co-Chair in Kent and Medway Local Maternity System (LMS); starting date to be confirmed	Direct financial non-specific	Declare and remain
Aung Soe	Consultant Neonatologist, Medway Maritime Hospital	Received payment from AbbVie for lecturing on RSV bronchiolitis Speaker Training day in April 2018	Direct financial non-specific	Declare and remain

#### 4.0.03 DOC Cmte minutes

Heidi Beddall	Consultant Midwife, Buckinghamshire Healthcare NHS Trust	Co-author of a poster about intermittent auscultation risk assessment in labour accepted for presentation at the British Intrapartum Care Society (BICS) conference, June 2018; the poster content does not overlap with the scope of the guideline	Direct non-financial professional and personal non-specific	Declare and remain
Philip Barclay	Consultant Anaesthetist, Chelsea and Westminster Hospital NHS Foundation Trust	Elected Honorary Secretary of the Group of Obstetric Anaesthetists in London (GOAL), 27 April 2018	Direct non-financial professional and personal non-specific	Declare and remain

The Chair and a senior member of the Developer's team noted that the new interests declared did not prevent the attendees from participating fully in the meeting. AS had already left the meeting before the question about mode of birth for women with large-for-gestational age babies (for which he had a conflict of interest) was being discussed.

### 3. Minutes of last meeting

The Chair asked the committee if it wanted any changes made to the minutes of the last meeting. The committee agreed that the draft minutes were a true and accurate account of the meeting subject to correction of a typographical error.

### 4. Presentations

The Chair introduced LK who presented the recommendations and rationale and impact for "How should fetal monitoring be managed for women with sepsis who present in labour?", "Does the use of fetal blood sampling (in conjunction with electronic fetal monitoring) for women with pyrexia in labour improve outcomes for the baby?", "What is the optimal mode of birth for women with sepsis?", "What are the most effective and safe methods of anaesthesia for women with sepsis in labour?", "What is the most appropriate management for women with sepsis in the first 24 hours after the birth?", "How should fetal monitoring be managed during labour for women with a small-for-gestational age baby?", "What is the optimal mode of birth (emergency caesarean section or continuation of labour) for women with a large-for-gestational age baby?" and "How should the first and second stages of

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labour be managed for women with previous caesarean section?”.

The Chair introduced RC who presented the recommendations and rationale and impact for “Does the use of anti-pyretics in women with pyrexia in labour improve outcomes for the woman or the baby?”, “What are the most effective and safe methods of analgesia for women with sepsis in labour?”, “What is the most clinical and cost effective antimicrobial therapy for women with sepsis in labour?”, “What maternal and fetal monitoring should be carried out for women in labour after 42 weeks of pregnancy?” and “What are the information needs of women at high risk of adverse outcomes in labour due to obstetric complications that arise before or during the intrapartum period?”.

The Chair introduced PC who presented the recommendations and rationale and impact for “What maternal observations should be performed for women at high risk of adverse outcomes in labour for the woman or the baby, and what is the optimal frequency of making these observations?”, “What is the optimal management for intrapartum haemorrhage?”, “What is the optimal mode of birth (emergency caesarean section or continuation of labour) for women with breech presenting in the first or second stage of labour?” and “What are the most appropriate systems for risk assessment and management of labour for women who present in labour having had no antenatal care?”.

#### 5. Questions and discussion

The committee reviewed the recommendations and justifications for all the questions considered in the guideline and made amendments as needed.

The committee agreed research recommendations.

#### 6. Any other business

There was no other business.

**Date of next meeting:** 13 & 14 November 2018

**Location of next meeting:** RCOG, London