

NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE

Guideline scope

Antenatal care

NICE has carried out a [surveillance review](#) and identified a need to update the clinical guideline on [antenatal care for uncomplicated pregnancies](#) (CG62).

The guideline will be developed using the methods and processes outlined in [developing NICE guidelines: the manual](#).

This guideline will also be used to develop the NICE quality standard for antenatal care.

1 Why the guideline is needed

Service delivery and provision of care have changed considerably since this guideline was first developed in 2008. In addition, national screening policies and vaccination programmes have changed. Recommendations need to be revised in the light of the current context.

New evidence that could affect recommendations was identified through the surveillance process. Topic experts, including those who helped to develop the existing guideline, advised NICE on whether areas should be updated or new areas added. Full details are set out in the [surveillance review decision](#).

Key facts and figures

Around 700,000 women give birth in England and Wales each year. The antenatal period provides an excellent opportunity to provide support and information to women (and their families) about birth and parenthood.

Although pregnancy is straightforward for most women and their babies, complications can still occur, and excellent antenatal care is vital to identify and deal with potential problems and reduce the chance of a poor outcome.

There have been significant societal changes that are relevant to antenatal care: women are now, on average, older when having their first baby (15.9 per

1 1,000 women are over 40), there is a higher prevalence of obesity, and over a
2 quarter of mothers are born outside the UK. As well as societal changes, a
3 higher number of births involve more complex care for women and their
4 babies .

5 Women can now access a midwife directly (that is, not through their GP). In a
6 survey of over 1,000 first-time mothers, 37% women saw a midwife as their
7 first point of contact, and 36% saw the same midwife for their antenatal
8 appointments. Around 41% were offered a choice of a midwife-led unit or birth
9 centre. These findings are in line with the recommendations from [Better](#)
10 [Births: improving outcomes of maternity services in England](#) (National
11 Maternity Review, 2016).

12 The antenatal period presents opportunities to identify needs and implement
13 effective care to help women prepare for birth and parenthood, from early in
14 pregnancy until the delivery of the baby. Given that 45% of pregnancies are
15 unplanned, it is also an opportunity to promote health for any subsequent
16 pregnancies.

17 **Current practice**

18 [Better Births: improving outcomes of maternity services in England](#) reported
19 that although ‘the quality and outcomes of maternity services have improved
20 significantly over the last decade’, there are reasons for concern. Better Births
21 based its recommendations around 7 themes, of which 5 are directly related
22 to antenatal care:

- 23 • Personalised care
- 24 • Continuity of carer
- 25 • Safer care
- 26 • Multi-professional working
- 27 • Working across boundaries

28 A recent systematic review identified 85 guidelines, mostly from North
29 America and the UK and published between 2000 and 2014, which focused
30 on antenatal care. This review and other guidelines and reports have revealed

1 a wide disparity on the number and types of interventions proposed for routine
2 antenatal care.

3 In the last decade, the provision of specialised clinics for women at risk of
4 preterm birth has increased. A recent systematic review and meta-analysis
5 has suggested models of care that could be adopted in antenatal care to
6 significantly reduce the risk of preterm birth.

7 **Policy, legislation, regulation and commissioning**

8 The UK National Screening Committee (UK NSC) recommends screening for
9 pregnant women for a range of maternal and fetal disorders. The antenatal
10 care guideline will signpost to the following:

- 11 • NHS fetal anomaly screening programme (FASP): Down's, Edwards' and
12 Patau's syndromes, anencephaly, open spina bifida, cleft lip, diaphragmatic
13 hernia, gastroschisis, exomphalos, serious cardiac abnormalities, bilateral
14 renal agenesis, lethal skeletal dysplasia.
- 15 • NHS infectious diseases in pregnancy screening (IDPS) programme: HIV,
16 hepatitis B and syphilis.
- 17 • NHS sickle cell and thalassaemia screening: genetic carriers for sickle cell,
18 thalassaemia and other haemoglobin disorders, sickle cell disease,
19 thalassaemia and haemoglobin disorders.

20 The UK NSC has also considered a number of other topics and as part of their
21 recommendations ([https://legacyscreening.phe.org.uk/screening-
22 recommendations.php](https://legacyscreening.phe.org.uk/screening-recommendations.php)) decided against a screening programme, for example,
23 for group B streptococcus, asymptomatic bacteriuria and toxoplasmosis.

24 The guideline will also signpost the following policies and programmes:

- 25 • NHS vaccination programmes, for example, [vaccination against pertussis
26 \(whooping cough\) for pregnant women](#).
- 27 • NHS England's [Saving babies' lives care bundle](#), which aims to improve
28 awareness of fetal movement and reduce the rate of stillbirths.
- 29 • The Department of Health's [alcohol guidelines review](#).

1 These are key areas of antenatal care and will be included in the guideline
2 recommendations, but the evidence will not be reviewed.

3 **2 Who the guideline is for**

4 This guideline is for:

- 5 • healthcare professionals providing antenatal care for women and babies
- 6 • commissioners of primary, community and secondary antenatal care
7 services
- 8 • women using antenatal services, their families, and the public.

9 It may also be relevant for:

- 10 • social care practitioners
- 11 • other organisations providing support in the antenatal period (for example,
12 voluntary groups).

13 NICE guidelines cover health and social care in England. Decisions on how
14 they apply in other UK countries are made by ministers in the [Welsh](#)
15 [Government](#), [Scottish Government](#), and [Northern Ireland Executive](#).

16 ***Equality considerations***

17 NICE has carried out an [equality impact assessment](#) during scoping. The
18 assessment:

- 19 • lists equality issues identified, and how they have been addressed
- 20 • explains why any groups are excluded from the scope.

21 The guideline will look at inequalities relating to disability (cognitive or
22 neurological).

1 **3 What the guideline will cover**

2 **3.1 *Who is the focus?***

3 **Groups that will be covered**

4 Pregnant women.

5 **3.2 *Activities, services or aspects of care***

6 **Key areas that will be covered in this update**

7 We will look at evidence in the areas below when developing the guideline,
8 but it may not be possible to make recommendations in all the areas.

9 1 Information and support for women and their families

10 2 Content and delivery of antenatal care

11 3 Determining gestational age

12 4 Monitoring fetal growth and wellbeing

13 5 Nutrition

14 6 Work, lifestyle, medicines and drug misuse

15 7 Prevention of listeria and salmonella infection during pregnancy and for
16 the neonate

17 8 Prevention of rubella, pertussis and influenza during pregnancy and for
18 the neonate

19 9 Additional investigations (areas not covered by UK national antenatal
20 screening programme)

21 10 Interventions for common problems during pregnancy

22 11 Management of coexisting conditions

23 **Areas that will not be covered**

24 Care specific to the management of complicated or multiple pregnancies.

25 **Relation to previous NICE guidance on this topic**

26 This is a full update of the NICE guideline on [antenatal care](#) (CG62; published
27 2008), and all recommendations in the original guideline will be 'stood down'

1 and deleted. The following areas from the 2008 guideline will not be included
2 in the updated guideline:

- 3 • Complementary therapies
- 4 • Sexual intercourse in pregnancy
- 5 • Air travel in pregnancy
- 6 • Car travel in pregnancy
- 7 • Travelling abroad in pregnancy
- 8 • Management of constipation
- 9 • Management of haemorrhoids
- 10 • Management of varicose veins
- 11 • Management of backache
- 12 • Breast examination
- 13 • Pelvic examination
- 14 • Screening for preterm birth
- 15 • Placenta praevia

16 **Related NICE guidance**

17 ***Published***

- 18 • [Eating disorders](#) (2017) NICE guideline NG69
- 19 • [Cerebral palsy in under 25s](#) (2017) NICE guideline NG62
- 20 • [Sepsis](#) (2016) NICE guideline NG51
- 21 • [Tuberculosis](#) (2016) NICE guideline NG33
- 22 • [High-throughput non-invasive prenatal testing for fetal RHD genotype](#)
23 (2016) NICE diagnostics guidance 25
- 24 • [Safe midwifery staffing for maternity settings](#) (2015) NICE guideline NG4
- 25 • [Diabetes in pregnancy](#) (2015) NICE guideline NG3
- 26 • [Preterm labour and birth](#) (2015) NICE guideline NG25
- 27 • [Antenatal and postnatal mental health](#) (2014) NICE guideline CG192
- 28 • [Intrapartum care for healthy women and babies](#) (2014) NICE guideline
29 CG190
- 30 • [Obesity](#) (2014) NICE guideline CG189
- 31 • [Vitamin D](#) (2014) Public health guideline PH56

- 1 • [Smoking: acute, maternity and mental health services](#) (2013) Public health
2 guideline PH48
- 3 • [Urinary incontinence in women](#) (2013) NICE guideline CG171
- 4 • [Hepatitis B \(chronic\)](#) (2013) NICE guideline CG165
- 5 • [Ectopic pregnancy and miscarriage](#) (2012) NICE guideline CG154
- 6 • Neonatal infection (early onset) (2012) NICE guideline CG149
- 7 • [Venous thromboembolic diseases](#) (2012) NICE guideline CG144
- 8 • [Epilepsies](#) (2012) NICE guideline CG137
- 9 • [Caesarean section](#) (2011) NICE guideline CG132
- 10 • [Multiple pregnancy](#) (2011) NICE guideline CG129
- 11 • [Common mental health problems](#) (2011) NICE guideline CG123
- 12 • [Pregnancy and complex social factors](#) (2010) NICE guideline CG110
- 13 • [Hypertension in pregnancy](#) (2010) NICE guideline CG107
- 14 • [Jaundice in newborn babies under 28 days](#) (2010) NICE guideline CG98
- 15 • [Donor milk banks](#) (2010) NICE guideline CG93
- 16 • [Weight management before, during and after pregnancy](#) (2010) NICE
17 guideline PH27
- 18 • [Smoking: stopping in pregnancy and after childbirth](#) (2010) NICE guideline
19 PH26
- 20 • [Routine antenatal anti-D prophylaxis for women who are rhesus D negative](#)
21 (2008) NICE technology appraisal guidance 156
- 22 • [Maternal and child nutrition](#) (2008) NICE guideline PH11
- 23 • [Familial hypercholesterolaemia](#) (2008) NICE guideline CG71
- 24 • [Inducing labour](#) (2008) NICE guideline CG70
- 25 • [Urinary tract infection in under 16s](#) (2007) NICE guideline CG54
- 26 • [Postnatal care up to 8 weeks after birth](#) (2006) NICE guideline CG37
- 27 • [Smoking: brief interventions and referrals](#) (2006) Public health guideline
28 PH1
- 29 ***In development***
- 30 • [Venous thromboembolism in over 16s: reducing the risk of hospital-
31 acquired deep vein thrombosis or pulmonary embolism](#). NICE guideline.
32 Publication expected March 2018.

- 1 • [Urinary incontinence and pelvic organ prolapse in women](#). NICE guideline.
2 Publication expected February 2019.
- 3 • [Intrapartum care for high-risk women](#). NICE guideline. Publication expected
4 March 2019.
- 5 • [Specialist neonatal respiratory care for babies born preterm](#). NICE
6 guideline. Publication expected April 2019.
- 7 • [Neonatal parenteral nutrition](#). NICE guideline. Publication expected
8 October 2019.
- 9 • [Multiple pregnancy](#). NICE guideline. Publication expected November 2019.
- 10 • [Postnatal care up to 8 weeks after birth](#). NICE guideline. Publication
11 expected January 2020.
- 12 • Obstetrics suite. NICE guideline. Publication expected February 2020.

13 ***NICE guidance that will be updated by this guideline***

- 14 • [Antenatal care for uncomplicated pregnancies](#) (2008) NICE guideline
15 CG62.

16 **NICE guidance about the experience of people using NHS services**

17 NICE has produced the following guidance on the experience of people using
18 the NHS. This guideline will not include additional recommendations on these
19 topics unless there are specific issues related to antenatal care:

- 20 • [Medicines optimisation](#) (2015) NICE guideline NG5
- 21 • [Patient experience in adult NHS services](#) (2012) NICE guideline CG138
- 22 • [Service user experience in adult mental health](#) (2011) NICE guideline
23 CG136
- 24 • [Medicines adherence](#) (2009) NICE guideline CG76

25 **3.3 *Economic aspects***

26 We will take economic aspects into account when making recommendations.
27 We will develop an economic plan that states for each review question (or key
28 area in the scope) whether economic considerations are relevant, and if so
29 whether this is an area that should be prioritised for economic modelling and
30 analysis. We will review the economic evidence and carry out economic

1 analyses, using an NHS and personal social services (PSS) perspective, as
2 appropriate.

3 **3.4 Key issues and draft questions**

4 While writing this scope, we have identified the following key issues and draft
5 questions related to them:

6 1 Information and support for women and their families

7 1.1 What information do women value as part of their antenatal care?

8 1.2 What information do partners and families value as part of antenatal
9 care?

10 1.3 When should information be given during antenatal care?

11 1.4 How should information be delivered during antenatal care?

12 1.5 What peer support (for example, support groups) do women value as
13 part of their antenatal care?

14 1.6 How effective are antenatal classes and groups?

15 2 Content and delivery of antenatal care

16 2.1 What should be the content of antenatal appointments?

17 2.2 What appointment timing is effective and safe in delivering antenatal
18 care?

19 2.3 What appointment frequency is effective and safe in delivering
20 antenatal care?

21 2.4 What aspects of antenatal care delivery are valued by women?

22 2.5 Is continuity of carer effective in antenatal care, and is it valued by
23 women?

24 No further evidence reviews on continuity of carer will be undertaken and
25 the guideline will refer to existing relevant NICE guidance.

26 2.6 What is the most effective way of identifying malpresentation in
27 pregnancy?

28 2.7 What is the most effective way of managing malpresentation in
29 pregnancy?

30 3 Determining gestational age

31 3.1 When should ultrasound estimation of gestational age be carried out
32 in pregnancy?

- 1 4 Monitoring fetal growth and wellbeing
- 2 4.1 What techniques (for example, symphysio fundal height
- 3 measurements and ultrasound) are effective in monitoring fetal growth
- 4 during pregnancy?
- 5 4.2 What techniques (for example, fetal movement reporting and
- 6 ultrasound) are effective in monitoring fetal wellbeing, and identifying
- 7 problems, during pregnancy?
- 8 5 Nutrition
- 9 5.1 What is the effectiveness of performing routine blood tests to assess
- 10 haemoglobin and iron status during pregnancy?
- 11 No further evidence reviews on other aspects of nutrition will be
- 12 undertaken to address this key issue, and the guideline will refer to
- 13 existing relevant NICE guidelines on [maternal and child nutrition](#), [weight](#)
- 14 [management, before, during and after pregnancy](#), and [vitamin D](#).
- 15 6 Lifestyle
- 16 6.1 How effective and safe is exercise in pregnancy for the mother and
- 17 baby?
- 18 No further evidence reviews on other aspects of lifestyle will be
- 19 undertaken to address this key issue, and the guideline will refer to
- 20 existing relevant NICE guidelines on [smoking: acute, maternity and](#)
- 21 [mental health services](#) and [smoking: stopping in pregnancy and after](#)
- 22 [childbirth](#). The guideline will also refer to the Department of Health's
- 23 [alcohol guidelines review](#).
- 24 7 Prevention of listeria and salmonella infection during pregnancy and for
- 25 the neonate
- 26 No further evidence reviews will be undertaken to address this key area
- 27 and the guideline will refer to existing relevant NHS guidance.
- 28 8 Prevention of rubella, pertussis and influenza during pregnancy and for
- 29 the neonate
- 30 No further evidence reviews will be undertaken to address this key area
- 31 and the guideline will refer to existing relevant NHS guidance.
- 32 9 Antenatal investigations (areas not covered by the UK national antenatal
- 33 screening programme)

1 9.1 What regimens for identifying [blood group, rhesus D status and red](#)
2 [cell alloantibodies](#), and for testing cell-free fetal DNA, are effective and
3 safe for the mother and baby?

4 10 Interventions for common problems during pregnancy

5 10.1 What interventions are effective in treating nausea and vomiting
6 during pregnancy?

7 10.2 What interventions are effective in treating heartburn during
8 pregnancy?

9 10.3 What interventions are effective in treating abnormal vaginal
10 discharge during pregnancy?

11 10.4 What interventions are effective in treating pelvic girdle pain during
12 pregnancy?

13 10.5 What interventions are effective in managing minor bleeding in
14 pregnancy?

15 10.6 How effective is maternal sleep positioning advice in improving fetal
16 outcomes?

17 11 Management of coexisting conditions

18 No evidence reviews will be undertaken to address this key issue, and
19 the guideline will refer to existing relevant NICE guidelines on
20 [hypertension in pregnancy](#), [obesity](#), [diabetes in pregnancy](#), [antenatal](#)
21 [and postnatal mental health](#), and [epilepsy](#).

22
23 The key issues and draft questions will be used to develop more detailed
24 review questions, which guide the systematic review of the literature.

25 **3.5 Main outcomes**

26 The main outcomes that may be considered when searching for and
27 assessing the evidence are:

- 28 • for the woman
- 29 – mortality
- 30 – major morbidities (such as antepartum haemorrhage)
- 31 – women's experience and satisfaction of care
- 32 – uptake of antenatal services.

- 1 • for the baby
- 2 – mortality (up to 1 year of age)
- 3 – major morbidity (for example, preterm birth)
- 4 – birth weight.

5 **4 NICE quality standards and NICE Pathways**

6 **4.1 NICE quality standards**

7 **NICE quality standards that may need to be revised or updated when** 8 **this guideline is published**

- 9 • [Antenatal care](#) (2012) NICE quality standard QS22

10 **4.2 NICE Pathways**

11 When this guideline is published, we will update the NICE Pathway on
12 [antenatal care](#). NICE Pathways bring together everything we have said on a
13 topic in interactive flowcharts.

14 Other relevant guidance will also be added to the NICE Pathway, including:

- 15 • [Routine antenatal anti-D prophylaxis for women who are rhesus D negative](#)
16 (2008) NICE technology appraisal guidance 156
- 17 • [High-throughput non-invasive prenatal testing for fetal RHD genotype](#)
18 (2016) NICE diagnostics guidance 25

19 **5 Further information**

This is the draft scope for consultation with registered stakeholders. The consultation dates are 19 March to 18 April 2018.

The guideline is expected to be published in September 2020.

You can follow progress of the [guideline](#).

[After consultation, delete the first paragraph above and replace it with 'This is the final scope, which takes into account comments from registered stakeholders during consultation'.]

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