

# Preterm Labour and Birth

## Review Questions

*Clinical Guideline <...>*

*Review Questions*

*02 April 2015*

*Draft for Consultation*

*Commissioned by the National Institute for  
Health and Care Excellence*



**Disclaimer**

Healthcare professionals are expected to take NICE clinical guidelines fully into account when exercising their clinical judgement. However, the guidance does not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of each patient, in consultation with the patient and/or their guardian or carer.

**Copyright**

@NCC-WCH

**Funding**

<Please insert your statement here

@NCC-WCH

# Contents

<b>1</b>	<b>Review questions .....</b>	<b>6</b>
----------	-------------------------------	----------



# 1 Review questions

## Information and Support

1. What additional information and support should be given to women (antenatally or during labour) and their families where the woman is at increased risk of preterm labour, or is suspected or diagnosed to be in preterm labour, or has a planned preterm birth?

## Prophylactic progesterone and prophylactic cervical cerclage

2. What is the clinical effectiveness of prophylactic progesterone (vaginal or oral) in preventing preterm labour in pregnant women considered to be at risk of preterm labour and birth?
3. What is the clinical effectiveness of prophylactic cervical cerclage in preventing preterm labour in women considered to be at risk of preterm labour and birth?

## Diagnosing preterm prelabour rupture of membranes (P-PROM)

4. What is the diagnostic accuracy of the following tests to identify preterm pre-labour rupture of membranes:
  - Placental alpha-microglobulin-1
  - Nitrazine (pH)
  - Insulin-like growth factor binding protein-1
  - Fetal fibronectin?

## Antenatal prophylactic antibiotics for women with preterm pre-labour rupture of membranes (P-PROM)

5. What is the clinical effectiveness of antenatal prophylactic antibiotics given to women with diagnosed preterm pre-labour rupture of membranes to improve outcomes of preterm labour?

## Identifying infection in women with preterm pre-labour rupture of membranes (P-PROM)

6. What is the diagnostic value of temperature, pulse, white cell count, C-reactive protein and cardiotocography (CTG) to identify infection in women with preterm pre-labour rupture of membranes (P-PROM)?

## 'Rescue' cervical cerclage

7. What is the clinical effectiveness of non-prophylactic 'rescue' cervical cerclage in preventing preterm birth for women in suspected preterm labour?

## Diagnosing preterm labour for women with intact membranes

8. What is the diagnostic accuracy of the following (alone or in combination) in women with intact membranes to identify preterm labour leading to preterm birth:
  - clinical assessment (such as symptoms expressed by women, strength and frequency of contractions, findings on vaginal examination)
  - biochemical testing for markers for preterm labour namely cervicovaginal fetal fibronectin and IGF-BP1 insulin-like growth factor binding protein 1
  - cervical ultrasound features (such as cervical length and funnelling)?

### **Maternal corticosteroids**

9. What is the clinical effectiveness of a single course of maternal corticosteroids for fetal lung maturation given at different gestations in improving preterm neonatal outcomes?
10. What is the clinical effectiveness of repeat courses of maternal corticosteroids for fetal lung maturation in improving preterm neonatal outcomes?

### **Magnesium sulphate for neuroprotection**

11. What is the clinical and cost effectiveness of magnesium sulphate given to women at high risk of giving birth preterm (defined as those suspected to be in preterm labour or diagnosed as being in preterm labour and those having planned preterm birth) for preventing cerebral palsy and other neurological disorders in babies born at different preterm gestations?

### **Tocolysis**

12. What is the clinical and cost effectiveness of tocolytics given to women with suspected or diagnosed preterm labour to improve outcomes:
  - progesterone/progestogens
  - beta-sympathomimetics
  - oxytocin receptor antagonists
  - calcium channel blockers
  - cyclo-oxygenase enzyme inhibitors
  - non-steroidal anti-inflammatory drugs
  - nitric oxide donors
  - magnesium sulphate?

### **Fetal monitoring**

#### ***Monitoring options: cardiotocography and intermittent auscultation***

13. What are the criteria for best interpreting the preterm fetal heart rate trace at different gestational ages for unborn babies whose mothers are in suspected or diagnosed preterm labour?
14. What is the clinical effectiveness of electronic fetal monitoring compared with intermittent auscultation at different gestational ages for unborn babies whose mothers are in suspected or diagnosed preterm labour?

#### ***Fetal scalp electrode (FSE)***

15. At what gestational age can a fetal scalp electrode (FSE) be used for unborn babies whose mothers are in diagnosed preterm labour?

#### ***Fetal blood sampling (FBS)***

16. What is the utility of fetal blood sampling (FBS) as an adjunct to intrapartum fetal heart rate monitoring at different gestational ages?

### **Mode of birth**

17. For women who present in suspected or diagnosed preterm labour (who have not planned antenatally to give birth by caesarean section (CS) and for whom there are no other known indications for CS birth), what is the clinical effectiveness of deciding to carry out a CS compared with deciding to allow vaginal birth?

**Timing of cord clamping for preterm babies**

18. In preterm birth, does later or delayed cord clamping in active management of third stage improve maternal and neonatal outcomes compared to earlier or immediate cord clamping?

