





NEWSLETTER 71 - July 2024

Fibrinogen study - results published!

Obstetric haemorrhage is an important cause of maternal mortality and morbidity in the UK. Fibrinogen plays a crucial part in the formation of a fibrin/platelet clot which will assist with arresting bleeding. Women with a plasma fibrinogen <2g/L and continuing bleeding represent a high-risk group that is associated with both progressive haemorrhage and the increased use of blood products and invasive procedures. The objectives of the study were to estimate the incidence of low fibrinogen in pregnancy and describe the management and perinatal outcomes following this.

Over a 12 month period, 124 women with fibrinogen <2g/L were identified (1.7 per 10,000 maternities; 95% confidence interval 1.4-2.0 per 10,000 maternities). 5% of cases were due to inherited dysfibrinogenemia or hypofibrinogenemia and 60% were due to postpartum haemorrhage caused by placental abruption, uterine atony or trauma. The highest estimated blood loss (median 4400ml) and lowest levels of fibrinogen were associated with amniotic fluid embolism and placental causes other than abruption (praevia, accreta, retention). There were two maternal deaths due to massive postpartum haemorrhage.

The study concluded that fibrinogen <2g/L is a rare condition which often, but not exclusively, affects women with postpartum haemorrhage and is associated with high maternal mortality.

A link to the publication is available on our website www.npeu.ox.ac.uk/ukoss/publications-ukoss/results.

Reference: Diguisto C, Baker E, Stanworth S, Collins PW, Collis RE, Knight M. Management and outcomes of women with low fibrinogen concentration during pregnancy or immediately postpartum: A UK national population- based cohort study. Acta Obstet Gynecol Scand. 2024;00:1-9. doi:10.1111/aogs/14828

Breast Cancer in pregnancy

The results of the breast cancer in pregnancy study have been published on **NIHR Open Research**. The paper, which is currently awaiting peer review, can be found at

www.openresearch.nihr.ac.uk/ articles/4-40

THIS MONTH

Star Reporters

This newsletter we would like to thank **Sarah Prince**, **Colchester General Hospital**, for being the first to return a data collection form for TAC and **Louise de Luen**, **University Hospital of North Durham**, for getting reporting back on track.

Your edible goodies will be in the post very soon!

Would you like to join the UKOSS Steering Committee?
 New study starting – Peripartum Hysterectomy



Hospital Monthly Reporting Rates over Six Months (December 2023 - May 2024) 6 months reported, 4 or 5 months reported, 2 or 3 months reported, 1 month reported, 0 months reported

Aberdeen Maternity Hospital Altnagelvin Area Hospital Aneurin Bevan University Health Board Arrowe Park Hospital **Ayrshire Maternity Unit Barnsley Hospital Basildon University Hospital Basingstoke and North Hampshire** Hospital **Bassetlaw District General Hospital Bedford Hospital Borders General Hospital Bradford Royal Infirmary Broomfield Hospital Chesterfield Royal Hospital City Hospital (Birmingham) Colchester General Hospital Conquest Hospital (East Sussex** Healthcare NHS Trust) **Craigavon Area Hospital Croydon University Hospital Daisy Hill Hospital Darent Valley Hospital Doncaster Royal Infirmary Dorset County Hospital Dumfries & Galloway Royal Infirmary Epsom General Hospital** Forth Valley Royal Hospital George Eliot Hospital **Glan Clwyd District General Hospital Glangwili General Hospital Gloucestershire Royal Hospital Good Hope Hospital** Harrogate District Hospital **Heartlands Hospital Homerton University Hospital Hull Royal Infirmary James Paget University Hospital** Jersey General Hospital **Kettering General Hospital** King's College Hospital Lancashire Teaching Hospitals (Royal Preston Hospital) Leeds General Infirmary Leighton Hospital **Lincoln County Hospital Lister Hospital** Manor Hospital (Walsall) **Medway Maritime Hospital** Milton Keynes University Hospital **New Cross Hospital** Nobles Hospital (Isle of Man) Norfolk & Norwich University Hospital North Devon District Hospital North Manchester General Hospital **Northampton General Hospital Nottingham City Hospital** Peterborough City Hospital **Pilgrim Hospital Poole Hospital Prince Charles Hospital Princess Alexandra Hospital Princess Anne Hospital** Princess Royal University Hospital Princess of Wales Hospital Queen Alexandra Hospital

Queen Charlotte's and Chelsea Hospital Queen Elizabeth Hospital (Gateshead) Queen Elizabeth Hospital (King's Lynn) Queen Elizabeth Hospital (Woolwich) Queen Elizabeth the Queen Mother Hospital Queen's Hospital (Burton-on-Trent) **Queen's Medical Centre Royal Cornwall Hospital Rosie Maternity Hospital Rotherham District General Hospital Royal Albert Edward Infirmary Royal Alexandra Hospital** Roval Berkshire Hospital **Royal Hampshire County Hospital Roval Jubilee Maternity Service Royal Surrey County Hospital** Royal United Hospital **Roval Victoria Infirmarv** Salisbury District Hospital Scunthorpe General Hospital Simpson Centre for Reproductive Health Singleton Hospital Southend University Hospital Southern General Hospital South West Acute Hospital St Mary's Hospital (Isle of Wight) St Mary's Hospital (London) St George's Hospital St James's University Hospital St John's Hospital St Mary's Hospital (Manchester) St Michael's Hospital St Richard's Hospital Stoke Mandeville Hospital Sunderland Royal Hospital The Jessop Wing The Portland Hospital The Tunbridge Wells Hospital Torbay Hospital Ulster Hospital **University Hospital Coventry** University Hospital of North Durham **University Hospital of North Midlands** University Hospital of North Tees University Hospital of Wales Victoria Hospital (Blackpool) Victoria Hospital (Kirkcaldy) Warrington Hospital Warwick Hospital Watford General Hospital West Cumberland Hospital West Middlesex University Hospital Western Isles Hospital Wexham Park Hospital Whiston Hospital Whittington Hospital William Harvey Hospital Wishaw General Hospital Worthing Hospital Wrexham Maelor Hospital Wythenshawe Hospital York Hospital Ysbyty Gwynedd District General Hospital

Antrim Hospital Bronglais Hospital **Caithness General Hospital** Calderdale Royal Hospital **Cumberland Infirmary** Darlington Memorial Hospital **Derriford Hospital** Diana Princess of Wales Hospital East Surrey Hospital **Furness General Hospital** Hereford County Hospital Hinchingbrooke Hospital **Ipswich Hospital** James Cook University Hospital King's Mill Hospital Kingston Hospital Lancashire Women and Newborn Centre Liverpool Women's Hospital Musgrove Park Hospital Ninewells Hospital & Medical School Northumbria Specialist Emergency Care Hospital Northwick Park Hospital Pinderfields General Hospital Princess Royal Hospital (Telford) Princess Royal Maternity Hospital Raigmore Hospital Royal Derby Hospital Royal Devon & Exeter Hospital Roval Free Hospital Royal Jubilee Maternity Service Royal Lancaster Infirmary Royal Sussex County Hospital Russells Hall Hospital St Peter's Hospital The Great Western Hospital University Hospital Lewisham West Suffolk Hospital Yeovil Women's Hospital Frimley Park Hospital Guy's and St Thomas' Hospital John Radcliffe Hospital Leicester General Hospital Leicester Royal Infirmary North Middlesex University Hospital Princess Elizabeth Hospital (Guernsey) Scarborough Hospital Stepping Hill Hospital Tameside General Hospital The Hillingdon Hospital Whipps Cross University Trust Hospital Barnet Hospital (Royal Free London NHS Foundation Trust) Chelsea & Westminster Hospital Royal London Hospital Royal Oldham Hospital St Helier Hospital Worcestershire Royal Hospital Airedale General Hospital Birmingham Women's Hospital Countess of Chester Hospital Luton and Dunstable University Hospital Newham General Hospital **Ormskirk District General Hospital** Princess Royal Hospital (Haywards Heath) Queen's Hospital (Romford) Royal Bolton Hospital Southmead Hospital University College Hospital

New study starting – Peripartum Hysterectomy

UKOSS last studied peripartum hysterectomy in 2005-6 and the data contributed to an international study via INOSS (International Network of Obstetric Survey Systems).

There have been dramatic changes in clinical guidance and pathways since the previous study, however there have been no high-quality large scale observational studies in the UK since the previous UKOSS publication, therefore the impact of these changes on the incidence of hysterectomy and its complications are unknown.

This study will determine the national incidence of peripartum hysterectomy in the UK and identify the extent to which previous caesarean section is a risk factor in this population. This will enable appropriate future service planning, provide accurate information which can be used when counselling women about the risks associated with caesarean section, and provide a baseline incidence against which future trends can be monitored if caesarean delivery rates continue to rise nationally.

Surveillance period: 1st August 2024 – 31st July 2025

Case definition: Any woman undergoing surgical removal of the uterus during pregnancy or within 42 days of the end of pregnancy.

Controls: Two controls will be requested for every case reported. The controls will be the **two** women who delivered at the hospital immediately *before* the case.

Please note: All reporters will be emailed the short protocol and case definition, however please contact the team at *ukoss@npeu.ox.ac.uk* if you have any queries. The study details will also available on the website shortly.

RECOVERY and REMAP-CAP Trial study update

The team running the RECOVERY trial are starting a trial for low-dose dexamethasone comparison for patients with community-acquired pneumonia (CAP) which will also be open to pregnant and breastfeeding women. The RECOVERY trial study has therefore been extended to included women participating in this arm of the trial.





The **REMAP-CAP** trial (Randomised, Embedded, Multi-factorial, Adaptive Platform Trial for Community-Acquired Pneumonia) is an international adaptive platform trial to evaluate multiple treatment options for patients who are critically ill due to community-acquired pneumonia. The REMAP-CAP trial has approval for a new low-dose dexamethasone comparison for patients with CAP without suspected SARS-COV-2 or flu (therefore probable bacterial infection) and this and other CAP comparisons are open to pregnant and breastfeeding women. The UKOSS study will be examining outcomes for pregnant women participating in this arm of the REMAP-CAP trial.

Updated Case Definition: Any woman admitted to hospital in pregnancy and participating in the RECOVERY or REMAP-CAP Trial.

Updated Study dates: 1st April 2022 – 30th June 2026.

Study	Actual number of reported cases	Data collection forms returned	Number of forms returned that were found to be not cases / reported in error	Data Collection forms returned that are confirmed cases	Expected Number of Confirmed Cases
Amniotic Fluid Embolism	411	390	82	308	233
Biologic Agents in Pregnancy	457	359	150	209	650
Long-term non-invasive ventilation in pregnancy	65	46	13	33	63
Pregnancy in Women with Known Cardiomyopathy	374	308	80	228	600
Severe Respiratory infection – RECOVERY trial	33	33	32	1	113
Thrombotic Microangiopathy Associated Pregnancy Acute Kidney Injury	42	32	12	20	478
Transabdominal Cerclage	23	16	11	5	18

Case Report Summary for Studies up until the end of June 2024

INOSS



Dr Nicola Vousden, Clinical Fellow in Maternal and Child Population Health at the NPEU, recently travelled to Canada to attend the annual INOSS (International Network of Obstetric Survey Systems) face-toface meeting. Here Nicola tells us more about INOSS and the trip...



What is INOSS and what is its relationship/involvement with UKOSS?

INOSS is an international group with representatives that co-ordinate Enhanced Obstetric Surveillance Systems (EOSS) across their region or country. It started as a collaboration

between UKOSS and NethOSS (Netherlands) in 2010 and now there are representatives from over 15 countries including Belgium, Canada, France, Namibia, India, Italy, Sri Lanka, Norway and Ethiopia. Just like UKOSS, each of the countries or regions actively surveys serious, rare disorders in pregnancy and produce regular reports. Our most recent joint work has been in Covid-19 where we compared the data across 10 countries to understand the impact of different policies.

What was the purpose of the recent meeting in Canada?

We meet in person once a year to share learning and experiences across the countries. This year we met at McMaster University in Hamilton, Ontario in May. Much was discussed over the three days. We heard about the progress that newer groups have made in starting their surveys, and progress as many countries start collecting data for a joint study on perinatal hysterectomies. We talked about the challenges of co-ordinating, such as sharing data and getting grants, and ensuring our work reflects the priorities and experiences of both high and low-middle income countries.

What are the plans for the future of INOSS?

As a result of the meeting in Canada, and the expanding group, we are now developing 6 work streams to progress our joint ideas. Amongst others, these include answering: what are the methodological processes involved in starting and co-ordinating an EOSS? How can we better involve women and the public in our work? Can we facilitate easier international data sharing? Are there lessons we could helpfully share in external educational resources? What topics are priorities for future joint studies across countries?

Interested in joining the UKOSS Steering Committee?

There are currently two vacancies on the UKOSS Steering Committee for both a Welsh Representative and an ICU/Critical Care Representative.

The UKOSS Steering Committee is multi-disciplinary and meets three times a year. Its main responsibilities are to consider applications for new studies on the UKOSS programme and to monitor the progress of ongoing studies. Membership is not remunerated but meetings may be considered as part of continuing professional development.

Applications will be assessed on the basis of the following desirable criteria:

- Evidence of contribution to UKOSS at a local level: for example, co-ordinating UKOSS reporting at a local level, returning monthly reports and completing data collection forms.
- Evidence of forging links within and without one's own professional group and with wider multi-disciplinary teams.
- Evidence of interest in UKOSS: for example, proposing new topic areas, making study applications and/or using UKOSS data in presentations or publications.
- Research, audit and confidential enquiry or clinical governance experience in obstetrics/maternity care.
- Experience of committee works (local or national).

If you would like to apply, please submit a two page CV and a short covering letter stating why you would like to undertake the role to UKOSS at *ukoss@npeu.ox.ac.uk*.

The deadline for applications is 2nd September 2024.

For an informal discussion, please contact Melanie O'Connor, UKOSS Programme Manager (*melanie.oconnor@npeu.ox.ac.uk*).



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Studies are additionally funded by Alexion, Chadburn Lectureship funds, Glaxo Smith Kline via OXON Epidemiology, Heart Research UK and portfolio funders to the RECOVERY Trial

