





# NEWSLETTER 72 - October 2024

# Breast cancer in pregnancy – results published!

We are pleased to announce that the results for the Breast Cancer in pregnancy study have now been published in NIHR Open Research.



From October 2015 – September 2017, 84 women (incidence of 5.4/100,000 maternities, 95% CI 4.37, 6.70) received a breast cancer diagnosis during pregnancy (women diagnosed pre-pregnancy or with a recurrence were excluded). 11% of women had undergone in vitro fertilisation (IVF) which is higher than the estimated 2.6% IVF pregnancies in the UK at that time. 30 women (36%) underwent surgery during pregnancy and 37 (44%) received chemotherapy. Three women had major maternal morbidity during pregnancy, two women died and there were two perinatal deaths.

The study concluded that the incidence of newly diagnosed breast cancer in pregnancy in the UK is comparable to that reported in other countries. The higher proportion of IVF pregnancies amongst pregnant women diagnosed with breast cancer may be explained by relatively advanced maternal age, but requires further investigation. Management of breast cancer varies considerably and despite generally good short-term outcomes for both mothers and babies, a larger prospective study is required to allow longer-term follow-up.

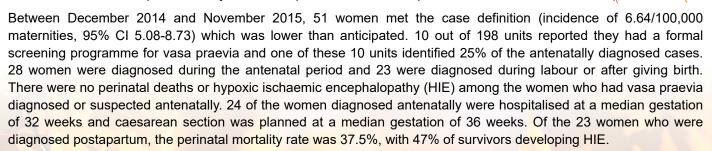
The full paper can be found here https://openresearch.nihr.ac.uk/articles/4-40.

**Reference:** Hardy C, Brand A, Jones J et al. The UK Breast Cancer in Pregnancy (UKBViP) Study. Incidence, diagnosis, management and short-term outcomes of breast cancer first diagnosed during pregnancy in the United Kingdom: A population-based descriptive study. NIHR Open Research 2024, 4:40.



## Vasa Praevia study results!

The results of the vasa praevia study have been published in NIHR Open Research.



The study concluded that there was a higher perinatal morbidity and mortality rate for those who were not diagnosed antenatally, however there were good outcomes when vasa praevia was diagnosed during pregnancy.

The full paper can be found here https://openresearch.nihr.ac.uk/articles/4-49.

**Reference:** Attilakos G, David AL, Tunn R et al. Incidence and outcomes of vasa praevia in the United Kingdom. NIHR Open Research 2024, 4:49.









#### Hospital Monthly Reporting Rates over Six Months (March 2024 - August 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 Bronglais Hospital Broomfield Hospital** 

**Chesterfield Royal Hospital** City Hospital (Birmingham) **Colchester General Hospital Conquest Hospital (East Sussex Healthcare NHS Trust)** 

**Countess of Chester Hospital Craigavon Area Hospital Croydon University Hospital** 

**Daisy Hill Hospital Darent Valley Hospital Darlington Memorial Hospital Diana Princess of Wales Hospital** 

**Dorset County Hospital** 

**Dumfries & Galloway Royal Infirmary** 

**Epsom General Hospital** Forth Valley Royal Hospital **George Eliot Hospital** 

**Glan Clwyd District General Hospital** 

**Gloucestershire Royal Hospital** 

**Good Hope Hospital Harrogate District Hospital Heartlands Hospital Hinchingbrooke Hospital Hull Royal Infirmary** 

**James Paget University Hospital Kettering General Hospital** King's College Hospital

**King's Mill Hospital** 

**Lancashire Teaching Hospitals (Royal Preston Hospital)** 

**Leeds General Infirmary Leighton Hospital Lincoln County Hospital Lister Hospital** 

**Manor Hospital (Walsall) Medway Maritime Hospital New Cross Hospital** 

**Ninewells Hospital & Medical School Norfolk & Norwich University Hospital** 

**North Devon District Hospital North Manchester General Hospital** 

**Northampton General Hospital Northumbria Specialist Emergency Care** 

Hospital

**Northwick Park Hospital Nottingham City Hospital** 

**Ormskirk District General Hospital** 

**Peterborough City Hospital** 

**Pilgrim Hospital** 

**Pinderfields General Hospital** Prince Charles Hospital

**Princess of Wales Hospital** 

Princess Royal Hospital (Telford)

Queen Alexandra Hospital

Queen Elizabeth Hospital (Gateshead) Queen Elizabeth Hospital (King's Lynn)

Queen Elizabeth the Queen Mother

Hospital

Queen's Hospital (Burton-on-Trent)

**Queen's Medical Centre** Raigmore Hospital

**Rosie Maternity Hospital** 

**Rotherham District General Hospital** 

Royal Albert Edward Infirmary

Royal Alexandra Hospital Royal Cornwall Hospital

**Royal Hampshire County Hospital** 

**Royal Jubilee Maternity Service** 

**Royal Lancaster Infirmary** 

Royal Surrey County Hospital

**Royal Sussex County Hospital** 

Royal United Hospital

**Royal Victoria Infirmary** Salisbury District Hospital

Scunthorpe General Hospital

Simpson Centre for Reproductive Health

Singleton Hospital

**Southend University Hospital** Southern General Hospital

St Helier Hospital

St James's University Hospital

St John's Hospital

St Mary's Hospital (Isle of Wight)

St Mary's Hospital (Manchester)

St Michael's Hospital Stoke Mandeville Hospital

Sunderland Royal Hospital

The Great Western Hospital

The Jessop Wing The Portland Hospital

Torbay Hospital

**Ulster Hospital** 

**University Hospital Coventry University Hospital Lewisham** 

**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

West Suffolk Hospital Western Isles Hospital

Wexham Park Hospital

Whiston Hospital

Whittington Hospital William Harvey Hospital

**Wishaw General Hospital** 

Worthing Hospital

Wrexham Maelor Hospital Wythenshawe Hospital Yeovil Women's Hospital

York Hospital

Ysbyty Gwynedd District General

Hospital

Antrim Hospital

Caithness General Hospital

Calderdale Royal Hospital

**Cumberland Infirmary** 

**Doncaster Royal Infirmary** 

East Surrey Hospital

Frimley Park Hospital

Furness General Hospital

Glangwili General Hospital

Guy's and St Thomas' Hospital Hereford County Hospital

Homerton University Hospital

**Ipswich Hospital** 

James Cook University Hospital

Jersey General Hospital

Kingston Hospital

Lancashire Women and Newborn Centre

Leicester General Hospital

Liverpool Women's Hospital

Milton Keynes University Hospital Musgrove Park Hospital

Nobles Hospital (Isle of Man)

Poole Hospital

Princess Alexandra Hospital

Princess Anne Hospital

Princess Elizabeth Hospital (Guernsey)

Princess Royal Maternity Hospital

Princess Royal University Hospital

Queen's Hospital (Romford) Royal Berkshire Hospital

Royal Derby Hospital

Royal Devon & Exeter Hospital

South West Acute Hospital

St George's Hospital

St Mary's Hospital (London)

St Richard's Hospital

Tameside General Hospital

The Tunbridge Wells Hospital

Watford General Hospital

West Cumberland Hospital

West Middlesex University Hospital Derriford Hospital

North Middlesex University Hospital Queen Charlotte's and Chelsea Hospital

Queen Elizabeth Hospital (Woolwich)

Royal Free Hospital

Russells Hall Hospital Scarborough Hospital

St Peter's Hospital

Stepping Hill Hospital

The Hillingdon Hospital

Leicester Royal Infirmary

Royal Oldham Hospital

Airedale General Hospital

Barnet Hospital (Royal Free London NHS

Foundation Trust)

Birmingham Women's Hospital

Chelsea & Westminster Hospital John Radcliffe Hospital

Luton and Dunstable University Hospital

Newham General Hospital

Princess Royal Hospital (Haywards Heath)

Royal Bolton Hospital Royal London Hospital

Southmead Hospital University College Hospital

Whipps Cross University Trust Hospital

Worcestershire Royal Hospital

## New study starting – Haemophagocytic Lymphohistiocytosis (HLH)

HLH is a rare and often life threatening condition characterised by the coexistence of immune dysregulation and unchecked inflammation. Primary HLH is genetic in origin and often diagnosed in infancy. Secondary HLH is the form typically seen in adults, and arises secondary to a trigger condition such as an infection, malignancy or rheumatic disease. Historically, HLH associated with an underlying rheumatic disease has been termed Macrophage Activation Syndrome (MAS) but modern guidelines advocate that all forms of this disease are now referred to as HLH, regardless of the underlying driver. HLH is clinically associated with fever, cytopaenia, liver dysfunction, hepatosplenomegaly, hypertriglyceridaemia and hyperferritinaemia and treatment involves the use of immunosuppressive agents.

MBRRACE-UK maternal mortality reports 2013-2021 documented 8 maternal deaths secondary to HLH, however the incidence of the women who survived is unknown.

**Objective:** Determine the incidence of HLH in the pregnant population, describe the main aetiologies of HLH in pregnancy, document the outcomes for both mother and fetus/neonate and describe the treatments used.

Surveillance period: 1st October 2024 – 30th September 2029 (5 year study)

**Case definition:** Any pregnant or recently pregnancy (<6 weeks since the end of pregnancy) woman with a diagnosis or suspected diagnosis of haemophagocytic lymphohisticcytosis (HLH) or macrophage activation syndrome (MAS).

**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 be available on the website at *www.npeu.ox.ac.uk/ukoss/current-surveillance*.

#### Final call for data collection forms!



The Thrombotic Microangiopathy Associated Pregnancy Acute Kidney Injury study has now ended. We would be very grateful if you could return any outstanding data collection forms or data queries over the next few months.

Please could you also check that no cases have been missed and notify us as soon as possible if any cases are identified.

Here is a reminder of the case definition:

All pregnant women who meet the following criteria:

A rise in serum creatinine to >200mmol/I <u>AND</u> platelet count <150x10<sup>9</sup> L <u>AND</u> at least one evidence of haemolysis (fragments on blood film, haptoglobin below lower limit of normal or lactate dehydrogenase above the upper limit of normal)

**Excluded:** All women established on renal replacement therapy prior to the acute AKI episode.

### Study finishing soon!

Please be aware that the <u>Biologics</u> study is ending this month

## **Star Reporters**



This newsletter we would like to thank Johnson Amu, Victoria Hospital (Blackpool), for being the first to report a case of peripartum hysterectomy and Nikolaos Chados, Ormskirk District General Hospital, for catching up with reporting.

Your edible goodies will be in the post very soon!

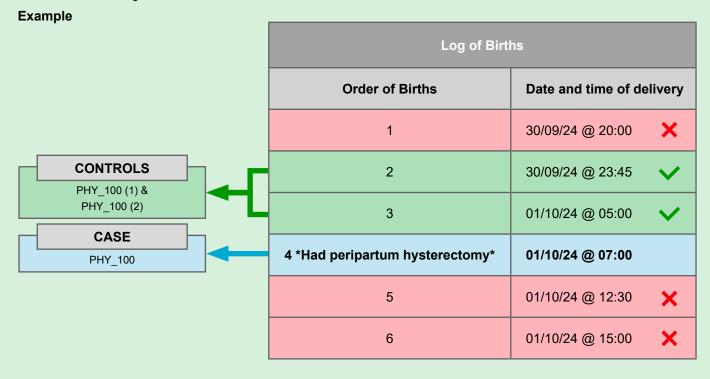




#### How do I select control forms?

The peripartum hysterectomy study is a case/control study which means that for every case reported, we will request two control forms.

The control forms should be the **TWO** women who delivered immediately **BEFORE** the case. Each control will be labelled with the original case ID then either 1 or 2.



# Case Report Summary for Studies up until the end of August 2024

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	424	402	91	311	236
Biologic Agents in Pregnancy	495	394	164	230	726
Long-term non-invasive ventilation in pregnancy	74	51	13	38	76
Peripartum hysterectomy – CASES	24	6	1	5	25
Peripartum hysterectomy – CONTROLS	N/A	6	N/A	N/A	10 controls requested
Severe Respiratory Virus – RECOVERY trial	33	33	32	1	126
Thrombotic Microangiopathy Associated Pregnancy Acute Kidney Injury	42	32	12	20	476
Transabdominal cerclage	36	20	12	8	47

#### Come and join the UKOSS Steering Committee!

There is currently a vacancy on the UKOSS Steering Committee for a Welsh Representative.

The UKOSS Steering Committee meets three times a year and is responsible for considering applications for new studies on the UKOSS programme and monitors the progress of ongoing studies.

For more information about the role, please see www.npeu.ox.ac.uk/ukoss/news/2209-applications-sought-for-welsh-representative-on-the-ukoss-steering-committee

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 6th January 2025.



#### **Gentle Reminders**

- Before returning a data collection form, **please check that all fields are completed**. If the requested information is unavailable, please note this in the final section of the form.
- If the UKOSS team find incomplete questions during data entry (we call them data queries), we will email the reporter to request the missing information.
- Please keep a record of the cases you've reported and the linked patients and if you change roles or retire, please pass on your case list to another reporter.

Taking these steps will enable us to resolve queries in a timely manner and meet the primary aims of our studies.

## GMC Revalidation and NMC Continuing Professional Development

We are aware that as part of your GMC revalidation or NMC Continual Professional Development, you are required to provide evidence of participation in national audit and research. If any UKOSS reporters would like to receive a certificate confirming their contribution to UKOSS, please email us at <a href="mailto:ukoss@npeu.ox.ac.uk">ukoss@npeu.ox.ac.uk</a> and we will get one posted out to you.





