

## MPH 2024-2025 guideline priorities : updates or new recommendations

### PPH (consolidated guideline)

New questions (new systematic reviews to be commissioned)

1. For pregnant women with iron deficiency anaemia (P), does use of intravenous iron (I) compared to oral iron or routine care (C) improve maternal outcomes (O)?
2. For all women after birth (P), does prophylactic administration of tranexamic acid in addition to usual care (I) compared to usual care alone (C) improve maternal outcomes (O)?
3. For women with retained placenta (P), does use of anaesthesia/analgesia during uterine exploration or manual removal of placenta (I) compared to no use of anaesthesia/analgesia (C) improve maternal outcomes (O)?
4. For women in the third stage of labour (P), does the use of an index test (all the various tests) (I) compared to usual care or reference gold standard (e.g. weighing blood loss) (C), improve the accuracy of postpartum haemorrhage diagnosis (O)?
5. For women with PPH and ongoing bleeding (P), do clear criteria for initiating transfusion of blood products (I) compared to usual care (C), improve maternal outcomes (O)?
6. For women with PPH and need for massive transfusion (P), do clear criteria for transfusion of blood products (I) compared to usual care (C), improve maternal outcomes (O)?
7. For pregnant women with uterine fibroids having a caesarean birth (P), does avoidance of myomectomy at time of caesarean (I) compared to caesarean birth with myomectomy (C) improve maternal health outcomes (O)?
8. For women with PPH (P), does use of cell salvage (I), compared to usual care (C), improve maternal outcomes (O)?
9. Among women with postpartum anaemia (P), does IV iron (I) compared to usual care (C), improve maternal outcomes (O)?

Existing questions to update (updates of existing systematic reviews to be commissioned)

10. For women in the second stage of labour (P), does the use of techniques to reduce perineal trauma and facilitate spontaneous birth (I) compared to usual care (C), improve maternal outcomes?
11. For women in the third stage of labour (P), does use of uterotonic (I) compared to no uterotonic or placebo (C) improve maternal outcomes (O)?
12. For all women after birth, if the third stage of labour lasts more than 30 minutes (P), does cord traction in addition to uterotonics (I) compared to standard care (C) improve maternal outcomes (O)?

Existing questions that have been addressed by existing WHO recommendations [to be incorporated from other guidelines (no updates to be conducted)]

13. For women in the third stage of labour (P), does advance misoprostol distribution to lay health workers or pregnant women (I) compared to usual care for PPH prevention or treatment (C), improve maternal outcomes (O)?
14. For all pregnant women (P), does routine/revealed ultrasound (I) as compared to selective/concealed ultrasound (C), improve maternal and foetal outcomes?
15. For all pregnant women (P), does iron supplementation (I), compared to no supplementation (C), prevent maternal anaemia?
16. For all pregnant women (P), does full blood count testing (I), compared to on-site haemoglobin testing with a haemoglobinometer (C), improve detection of anaemia (O)?
17. For women undergoing spontaneous vaginal birth (P), does routine or liberal use of episiotomy (I) as compared to usual care (C), improve maternal outcomes?
18. For women in the third stage of labour (P), does administration of IV oxytocin for postpartum haemorrhage (PPH) prevention (I) compared with IM oxytocin (C) improve maternal and infant outcomes (O)?
19. For women in the third stage of labour (P), does active management of third stage of labour with controlled cord traction (I) compared to active management of third stage with no CCT ("hands off" approach) (C), improve maternal outcomes (O)?
20. For women in the third stage of labour with a term infant (P), does early cord clamping (I) compared to late cord clamping (C), improve maternal and perinatal outcomes (O)?
21. For women in the third stage of labour (P), does uterine massage (+/- usual care) (I) compared to no uterine massage (+/- usual care) (C), improve maternal outcomes (O)?
22. For women in the third stage of labour following caesarean section (P), does removal of placenta by cord traction (I) compared to manual removal of the placenta (C), improve maternal outcomes (O)?
23. For women in the third stage of labour with retained placenta (P), does the use of intraumbilical vein injection of oxytocin (I) compared to placebo or no treatment (C) improve maternal outcomes (O)?
24. For women experiencing postpartum blood loss (P), what method of blood loss estimation (I,C) should be used to improve outcomes?
25. For postpartum women with PPH (P), does administration of oxytocin for PPH treatment (I) compared to placebo, no treatment or other treatments, improve maternal outcomes (O)?
26. For women with PPH (P), does using fluid replacement products (e.g., isotonic crystalloids, colloids) (I) versus usual care (C) improve outcomes (O)?
27. For women with PPH (P), does administration of tranexamic acid for PPH treatment (I) compared to usual care (C) improve maternal outcomes (O)?
28. For women with PPH (P), does uterine massage (I) compared to no uterine massage (C), improve maternal outcomes (O)?
29. For women with PPH (P), does the use of uterine packing (I) compared to no uterine packing (C), improve maternal outcomes (O)?
30. For women with PPH (P), does the use of recombinant factor VIIa (I) compared to usual care (C) improve maternal outcomes (O)?
31. For women with PPH (P), does intrauterine balloon tamponade in addition to standard care (I), compared to standard care alone (placebo or no treatment) (C) improve maternal outcomes (O)?

32. For women with PPH (P), does uterine artery embolization (I) compared to placebo or no treatment (C) improve outcomes?
33. For women with PPH (P), do surgical interventions (I) compared to no surgical interventions (C), improve outcomes (O)?
34. For women with PPH due to uterine atony (P), does bimanual uterine compression (I) compared to no bimanual compression (C) improve outcomes (O)?
35. For women with PPH (P), does aortic compression (I) compared to no treatment (C) improve outcomes (O)?
36. For women with PPH (P), does the use of pneumatic or non-pneumatic anti-shock garments (I) compared to no treatment (C) improve outcomes (O)?
37. Among women undergoing manual removal of retained placenta following vaginal birth (P), does antibiotic prophylaxis (I), compared with no antibiotic prophylaxis (C), prevent infectious morbidities and improve outcomes (O)?

### **Caesarean section (new reviews, pending funding)**

The clinical aspects of the conduct of a caesarean section were prioritized as a new area for guidelines. The guideline will focus on the clinical procedures which were initially categorized under three groups:

1. Surgical procedures
2. Medical procedures
3. Anesthetic procedures

Examples of the potential PICO questions the guideline will be addressing include:

- Among pregnant women having a caesarean section (P) does single layer uterine closure (I) compared to double layer uterine closure (C) improve maternal outcomes (O)?
- Among pregnant women having a caesarean section (P) does epidural anesthesia (I) compared to raquideal (C) improve maternal and newborn outcomes (O)?
- Among pregnant women having a caesarean section (P) does Indwelling bladder catheter (I) compared to no bladder catheter (C) improve maternal and newborn outcomes (O)?
- Among pregnant women having a non-emergency caesarean section (P) does longer fasting before surgery (I) compared to shorter fasting (C) improve maternal and newborn outcomes (O)?

### **Maternal peripartum infection portfolio (new systematic review to be commissioned)**

- Among pregnant women in labour (P), does antibiotic prophylaxis (I), compared with no prophylaxis or placebo (C) prevent infectious morbidities and improve outcomes (O)?