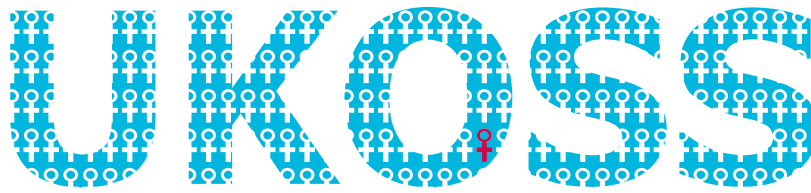
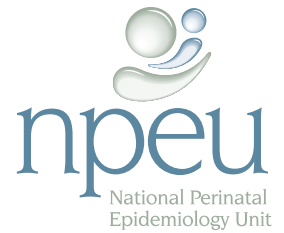




Royal College of
Obstetricians
and Gynaecologists



UK Obstetric Surveillance System



NEWSLETTER 29 - April 2012

New published results – Uterine rupture by intended mode of delivery in the UK: A national case-control study

The results of the UKOSS uterine rupture study have recently been published in PLoS Medicine. Between April 2009 and April 2010, 159 women experienced uterine rupture in the UK, of whom 139 had previously delivered by a caesarean section. The estimated incidence of uterine rupture was 0.2 per 1000 maternities overall, but in women with a previous caesarean section, 2.1 and 0.3 per 1000 maternities ended in uterine rupture in women planning vaginal delivery and caesarean delivery, respectively. For women with a previous caesarean section, the risk of uterine rupture was also increased with the number of previous caesarean sections the women had, less than 12 months since the last caesarean delivery and labour induction and/or oxytocin use.

Two women died following uterine rupture (giving a case fatality rate of 1.3%) and there were 18 perinatal deaths associated with uterine rupture among 145 infants (giving a perinatal mortality rate of 124 per 1000, significantly higher than the national rate of 7.5 per 1000).

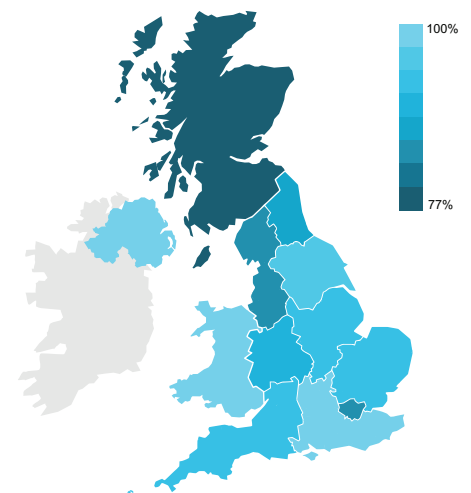
This study shows that although uterine rupture is associated with significant mortality and morbidity, even amongst women with a previous caesarean section planning a vaginal delivery, it is a rare occurrence.

For women with a previous caesarean section, risk of uterine rupture increases with number of previous caesarean deliveries, a short interval since the last caesarean section and labour induction and/or augmentation, and these factors should be considered when counselling and managing the labour of women with a previous caesarean section.

The full results are available to download free at:
<http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1001184>



UKOSS Regional Card Return Rates - Nov 2011 - Feb 2012



Funding: This study represents independent research commissioned by the National Institute for Health Research (NIHR) under its Programme Grants for Applied Research Programme (Grant Reference Number RP-PG-0608-10038). The views expressed are those of the author(s) and not necessarily those of the NHS, the NIHR or the Department of Health.

THIS MONTH

- Dr Marian Knight awarded NIHR Professorship

- Meet a UKOSS Reporter



Thanks to the following hospitals who have returned cards for the last three months:

Aberdeen Maternity Hospital, Aberdeen
Airedale General Hospital, Keighley
Alexandra Hospital, Redditch
Altnagalvin Area Hospital, Londonderry
Antrim Hospital, Antrim
Arrove Park Hospital, Wirral
Ayrshire Maternity Unit, Kilmarnock
Barnet and Chase Farm Hospitals NHS Trust, Enfield
Barnsley District General Hospital, Barnsley
Basildon Hospital, Basildon
Bassetlaw District General Hospital, Worksop
Bedford Hospital, Bedford
Birmingham City Hospital, Birmingham
Birmingham Heartlands Hospital, Birmingham
Birmingham Women's Hospital, Birmingham
Borders General Hospital, Melrose
Bradford Royal Infirmary, Bradford
Bronglais Hospital, Aberystwyth
Caithness General Hospital, Wick
Causeway Hospital, Coleraine
Chelsea & Westminster Hospital, London
Chesterfield & North Derbyshire Royal Hospital, Chesterfield
City Hospitals Sunderland NHS Trust, Sunderland
Colchester General Hospital, Colchester
Conquest Hospital, St Leonards-on-Sea
Countess of Chester Hospital, Chester
Craigavon Area Hospital, Portadown
Croydon University Hospital, Thornton Heath
Cumberland Infirmary, Carlisle
Derby Hospitals NHS Foundation Trust, Derby
Derriford Hospital, Plymouth
Dewsbury and District Hospital, Dewsbury
Diana Princess of Wales Hospital, Grimsby
Doncaster Royal Infirmary, Doncaster
Dorset County Hospital, Dorchester
Dr Gray's Hospital, Elgin
Dumfries & Galloway Royal Infirmary, Dumfries
Ealing Hospital, London
Eastbourne District General Hospital, Eastbourne
East Surrey Hospital, Redhill
Epsom General Hospital, Epsom
Erne Hospital, Enniskillen
Fairfield General Hospital, Bury
Forth Park Hospital, Kirkcaldy
Forth Valley Royal Hospital, Larbert
Friarage Hospital, Northallerton
Frimley Park Hospital, Camberley
Furness General Hospital, Barrow-in-Furness
George Eliot Hospital, Nuneaton
Glan Clwyd District General Hospital, Rhyl
Gloucestershire Royal Hospital, Gloucester
Good Hope Hospital, Sutton Coldfield
Harrogate District Hospital, Harrogate
Hereford County Hospital, Hereford
Hillingdon Hospital, Uxbridge
Hinchingsbrooke Hospital, Huntingdon
Homerton University Hospital, London
Horton Hospital, Banbury
Hull Royal Infirmary, Hull
Ipswich Hospital, Ipswich
James Cook University Hospital, Middlesbrough
James Paget Hospital, Great Yarmouth
Jersey General Hospital, St Helier
John Radcliffe Hospital, Oxford
Kettering General Hospital, Kettering
King George Hospital, Ilford
King's College Hospital, London
King's Mill Hospital, Sutton in Ashfield
Lancashire Women and Newborn Centre, Burnley
Leeds General Infirmary, Leeds
Leicester General Hospital, Leicester
Leighton Hospital, Crewe
Lincoln County Hospital, Lincoln
Lister Hospital, Stevenage
Liverpool Women's Hospital, Liverpool
Macclesfield District General Hospital, Macclesfield
Mater Infirmorum Hospital, Belfast
Medway Maritime Hospital, Gillingham
Milton Keynes General Hospital, Milton Keynes
Nevill Hall Hospital, Abergavenny
New Cross Hospital, Wolverhampton
Newham General Hospital, London
Ninewells Hospital & Medical School, Dundee
Nobles Hospital, Douglas
Norfolk & Norwich University Hospital, Norwich
North Devon District Hospital, Barnstaple
North Manchester General Hospital, Manchester
North Middlesex Hospital, London
Northampton General Hospital, Northampton
Northwick Park Hospital, Harrow
Nottingham City Hospital, Nottingham
Nottingham University Hospitals NHS Trust, Nottingham
Pilgrim Hospital, Boston
Poole Hospital, Poole
Prince Charles Hospital, Methyr Tydfil
Princess Alexandra Hospital, Harlow
Princess Elizabeth Hospital, St Martins
Princess of Wales Hospital, Bridgend
Princess Royal Hospital, Haywards Heath
Princess Royal Maternity Hospital, Glasgow
Princess Royal University Hospital, Orpington
Queen Alexandra Hospital, Portsmouth
Queen Elizabeth Hospital, Gateshead
Queen Elizabeth Hospital, Kings Lynn
Queen Elizabeth Hospital, London
Queen Elizabeth II Hospital, Welwyn Garden City
Queen Elizabeth the Queen Mother Hospital, Margate
Queen's Hospital, Burton upon Trent
Raigmore Hospital, Inverness
Rosie Maternity Hospital, Cambridge
Rotherham District General Hospital, Rotherham
Royal Albert Edward Infirmary, Wigan
Royal Alexandra Hospital, Paisley
Royal Bolton Hospital, Bolton
Royal Cornwall Hospital, Truro
Royal Devon & Exeter Hospital, Exeter
Royal Hampshire County Hospital, Winchester
Royal Jubilee Maternity Service, Belfast
Royal Lancaster Infirmary, Lancaster
Royal Oldham Hospital, Oldham
Royal Preston Hospital, Preston
Royal Shrewsbury Hospital, Shrewsbury
Royal Surrey County Hospital, Guildford
Royal United Hospital, Bath
Royal Victoria Infirmary, Newcastle-upon-Tyne
Russells Hall Hospital, Dudley
Salisbury District Hospital, Salisbury
Scarborough Hospital, Scarborough
Scunthorpe General Hospital, Scunthorpe
Simpson Centre for Reproductive Health, Edinburgh
Singleton Hospital, Swansea
South Tyneside District Hospital, South Shields
Southend Hospital, Westcliff-on-Sea
Southern General Hospital, Glasgow
Southmead Hospital, Bristol
Southport & Ormskirk Hospital NHS Trust, Ormskirk
St George's Hospital, London
St Helier Hospital, Carshalton
St James's University Hospital, Leeds
St John's Unit at Howden, Livingston
St Mary's Hospital, London
St Michael's Hospital, Bristol
St Peter's Hospital, Chertsey
St Richard's Hospital, Chichester
Staffordshire General Hospital, Stafford
Stepping Hill Hospital, Stockport
Stoke Mandeville Hospital, Aylesbury
Taunton and Somerset Hospital, Taunton
The Great Western Hospital, Swindon
The Portland Hospital, London
Torbay Hospital, Torquay
Ulster Hospital, Belfast
University College Hospital, London
University Hospital Lewisham, London
University Hospital of Coventry & Warwickshire, Coventry
University Hospital of North Staffordshire, Stoke on Trent
University Hospital of North Tees, Stockton-on-Tees
Victoria Hospital, Blackpool
Wansbeck General Hospital, Ashington
Warwick Hospital, Warwick
Watford General Hospital, Watford
West Cumberland Hospital, Whitehaven
West Middlesex University Hospital, Isleworth
West Suffolk Hospital, Bury St Edmunds
West Wales General Hospital, Carmarthen
Western Isles Hospital, Stornaway
Whipps Cross University Trust Hospital, London
Whiston Hospital, Prescott
Whittington Hospital, London
William Harvey Hospital, Ashford
Wishaw General Hospital, Wishaw
Withybush Hospital, Haverfordwest
Worcestershire Royal Hospital, Worcester
Worthing Hospital, Worthing
Wrexham Maelor Hospital, Wrexham
Wythenshawe Hospital, Manchester
Yeovil Women's Hospital, Yeovil
York Hospital, York
Ysbyty Gwynedd District General Hospital, Bangor
Calderdale Royal Hospital, Halifax
Darent Valley Hospital, Dartford
Guy's and St Thomas' Hospital, London
Manor Hospital, Walsall
Pinderfields General Hospital, Wakefield
Princess Anne Hospital, Southampton
Queen Charlotte's and Chelsea Hospital, London
Royal Free Hospital, London
Royal Gwent Hospital, Newport
Royal Sussex County Hospital, Brighton
St Mary's Hospital, Manchester
St Mary's Hospital, Newport
The Jessop Wing, Sheffield
University Hospital of Wales, Cardiff
Warrington Hospital, Warrington
Wexham Park Hospital, Slough
Barnet General Hospital, Barnet
Daisy Hill Hospital, Newry
Darlington Memorial Hospital, Darlington
North Hampshire Hospital, Basingstoke
Peterborough City Hospital, Peterborough
Royal Berkshire Hospital, Reading
Tameside General Hospital, Ashton-under-Lyne
The Tunbridge Wells Hospital, Tunbridge Wells
University Hospital of North Durham, Durham

Returned all three cards. Returned two cards. Returned one card.



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Head of UKOSS Dr Marian Knight Awarded NIHR Professorship

It was announced in February that Dr Marian Knight is one of eight of the UK's most promising leaders in medical health research to be awarded one of the first NIHR professorships. Dr Knight said: "Severe illnesses in pregnancy and early childhood can be devastating for parents and families. This funding will be key to helping us work out how best to treat both pregnant women with life threatening illnesses and babies who require surgery in early life".

Professor Dame Sally Davies, Chief Medical Officer and Chief Scientific Advisor at the Department of Health said: "Each one of these professors already has an impressive track record, and I look forward to working with them in the future and seeing them flourish. They will provide much needed research leadership in their chosen field, and to help us build more capacity and capability within the NIHR in very important areas".

This award is testament to all of you who contribute to UKOSS, making it a unique resource to conduct studies of uncommon complications of pregnancy. Whilst most of the new funding will be helping to develop our sister system, BAPS-CASS, to study rare complications of infancy requiring early surgery, the funding will also enable additional work particularly around economic evaluation of treatments for severe maternal morbidity, based on UKOSS data.



Case report summary for current studies up until 02 April 2012

Disorder	Actual number of reported cases	Data collection forms returned (%)	Number of confirmed cases (%)	Expected number of confirmed cases
Adrenal Tumours	14	12 (86)	5 (42)	22
Amniotic Fluid Embolism*	154	147 (95)	104 (71)	86
Cardiac Arrest in Pregnancy (CAPS)	39	22 (56)	18 (82)	23
Gastric Banding in Pregnancy	59	33 (56)	27 (82)	55
HELLP Syndrome*	173	116 (67)	91 (78)	328
Myeloproliferative Disorders	58	42 (72)	29 (69)	113
Pituitary Tumours	79	65 (82)	38 (58)	104
Severe Maternal Sepsis*	352	227 (64)	177 (78)	263
Stage 5 Chronic Kidney Disease	This is a new study			

Funding: *These studies represent independent research commissioned by the National Institute for Health Research (NIHR) under its Programme Grants for Applied Research Programme (Grant Reference Number RP-PG-0608-10038). The views expressed are those of the author(s) and not necessarily those of the NHS, the NIHR or the Department of Health.

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Open the BARCODE READER APP* on your phone and scan the code here

*Search your app store for 'qrcode'



UKNeS programme

Thank you to all those UKOSS reporters who have returned information to us about the process of incident reporting and risk management strategies. Your help with the UK Maternal Near-miss Surveillance Programme (UKNeS) is very much appreciated.



Meet a UKOSS Reporter

Charlotte McClymont, the UKOSS/UKNeS Programme Manager interviews Alison Holloway.

Alison Holloway is the Risk Management Midwife at The Great Western Hospital in Swindon. Alison came to Swindon in 1984 to do her midwifery training and has worked there ever since. Alison has held her current post for 5 years.

CM: What are the main duties / responsibilities of your job?

AH: My main duties and responsibilities include anything with a "risk" or "governance" aspect which includes –

- Incident investigation and looking for trends
- Co-ordinating audits
- Collecting and compiling statistic reports
- Co-ordinating CNST evidence for maternity
- Multidisciplinary education around risk issues

CM: What other jobs / occupations have you had in the past?

AH: I have a general nursing background but within 18 months of qualifying as a midwife I became a community midwife and was attached to the same surgery for over 20 years.

CM: Do you have any hobbies?

AH: I am an avid reader (especially historical biographies), I also trained to teach Yoga, I love country walks and travelling.

CM: What do you like best about your job?

AH: One of the best aspects of my job is that it is varied and very interesting.

Chocolate Box



Chocolates this month go to **Pam Loughna** from Nottingham City Hospital for consistently returning forms fully completed and **Jane Stoney** from Scunthorpe General Hospital for efficient return of cards and forms.

Many thanks to you both!

CM: What do you think is particularly good about your maternity unit?

AH: The main things I think that are good about our maternity unit is that we work really well as a team and are very supportive to colleagues.

CM: What aspects of being a UKOSS reporter do you most enjoy?

AH: The aspects of being an UKOSS reporter that I most enjoy is the insight it gives in to unusual conditions, I also find it interesting the topics that clinicians choose to research.

CM: How does being a UKOSS reporter add to your role at work?

AH: Being a UKOSS reporter means I find out about patients which I wouldn't normally come across in the normal course of events.

CM: Would you recommend becoming a UKOSS reporter to other clinicians and why?

AH: I would recommend becoming a UKOSS reporter as it is a fascinating aspect to the role and it is a great learning opportunity.

Alison Holloway - The Great Western Hospital



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