Home versus hospital management for placenta previa A systematic review of the literature

By Dr Kiondo Paul Obstetrician/Gynaecologist

&

Lecturer Makerere University, Faculty of Medicine Department of Obstetrics & Gynaecology

Training in Reproductive Health Research Geneva 2005

WHO Scholarship

Presentation Plan

Background
Methods
Results
Discussion
Conclusion

Background

- Low lying placenta. Incidence is 1:200 deliveries
- Painless vaginal bleeding, end of 2nd/3rd trimester. Recurs & may be severe
- Diagnosis is confirmed by sonography
- Term baby: immediate delivery
- Pre-term: conservative management
 Hospital management until delivery (expensive)

Background (cont.)

Recently, home care is suggested

- Couple is informed of need to report to hospital in time
- Studies show no benefit in hospital care
- Home care saves money
 Aim of the review: assess the safety of home management

Methods

- Searched: Cochrane library, Cochrane register of controlled Trials & Medline
- Systematic reviews of RCT's or trials with/without randomization
- Placenta previa
- Home versus hospital care
- Maternal & fetal outcomes

Results

Trial No	Trial ref.	Participants	Outcome	Comments
1/	Wing et al (7)	27-home 26-hospital	Same	Evidence level 1. Cheaper
2	Drost S & Paul K (8)	72 infant- mother pairs inpatients/ outpatients	No difference	Level 3. Home care cheaper 50%
3	Mouer JR (13)	55 inpatients 49 outpatients	No difference	Level 3. Home care cheaper

Discussion

- Only 1 RCT. Few patients. Power is low
- Rest are retrospective studies. Level
 3
- Hope that home care is cheaper, acceptable to couples
 More papers needed
 More research needed

Conclusion

- Evidence is not enough to recommend change in practice.
 More research carefully selected patients.
- Show safety of home care.

