

# Systematic Review: Cervical Ripening in the Outpatient Setting

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A PCORI Virtual Multi-Stakeholder Workshop

*August 22<sup>nd</sup>, 2019*

# Housekeeping

- Participants' lines are live
  - Please mute your line when you are not speaking to reduce background noise
- Today's conversation is being recorded and will be posted to the PCORI website
- We will take stakeholder comments in the order indicated
- If you wish to speak during the open comments/questions period, please indicate this by typing using the "raise hand" function or you can type "permission to speak" in the chat box
- Comments and questions from participants may be submitted via the chat window
  - We cannot guarantee a question will be addressed

# Agenda

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# Agenda

- Welcome
- Background and goals for the webinar:
  - Background
  - Proposed Systematic Review Key Questions (KQs)
    - PICOTS
- Moderated discussion
- Summary and closing remarks
- Adjourn

# *Welcome and Introductions*

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# Welcome!



## Today's PCORI Representatives:

- **Bill Lawrence, MD, MS**, Senior Clinical Advisor, Office of the Chief Engagement and Dissemination Officer, PCORI
- **Michelle Althuis, PhD, MA**, Program Officer, Research Synthesis, Office of the Chief Science Officer, PCORI

# Order of Comments Representatives



- **National Partnership for Women & Families**

- **Carol Sakala, PhD, MSPH,** Director of Childbirth Connection Programs

- **Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)**

- **Kathleen Rice Simpson, PhD, RN, CNS-BC, FAAN**

- **University of California San Diego (UCSD)**

- **Maryam Tarsa, MD,** Quality Improvement Rep for Department of OBGYN at UCSD

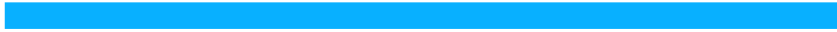
- **Food and Drug Administration (FDA)**

- **Audrey Gassman, MD,** Deputy Director of the Division of Bone, Reproductive & Urologic Products (DBRUP)

- **Nurse Practitioners in Women's Health (NPWH)**

- **Susan Kendig, JD, MSN, WHNP-BC, FAANP,** Director of Policy

# *Background*





# Background and Goals

- **Goals for the Systematic Review:**
  - To integrate information on the effectiveness and harms of outpatient cervical ripening, and related patient preferences, and inform American College of Obstetrics & Gynecology (ACOG) clinical practice guidelines on the topic.
  - PCORI is commissioning, via the Agency for Healthcare Research and Quality (AHRQ), a systematic evidence review to understand the options available to monitor fetal wellbeing in the outpatient setting and to understand which CR methods are appropriate for women experiencing fetal demise.
- **Goal for this webinar:** to receive stakeholder input on the Key Questions for this Systematic Review.

# Questions for Participants

- We are asking participants to provide their thoughts on the planned systematic review and the research questions (see Key Questions in subsequent slides).
- Please provide any feedback you have OR
- Address one of the following sample questions:
  - How would a current systematic review in this topic area be helpful?
  - Do you have input on the treatments, comparisons, outcomes or populations that should be considered as the review protocol is refined?
  - What are other important patient characteristics not reflected in the key questions?
  - Are there nuances regarding this topic not adequately captured by the key questions?

# *Proposed Systematic Review Key Questions (KQs)*

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# What is a systematic review?

- A systematic review evaluates and synthesizes all available evidence from a body of research.
  - Transparent methods
  - Employs strategies to minimize bias
- Primary **goals of a systematic review** are to:
  - Provide access to high-quality evidence from research
  - Guide future research
  - Establish core building blocks for clinical and policy guideline development
- See Cochrane Consumer Network [“What is a systematic review?”](#)

# KQ 1: What are the effectiveness and potential harms of CR in the outpatient compared to the inpatient setting?

<b>Population</b>	Pregnant women $\geq$ 37 wk undergoing CR
<b>Intervention</b>	CR, inpatient setting
<b>Comparator</b>	CR, outpatient setting
<b>Outcomes</b>	Maternal & infant health outcomes Maternal & infant mortality and morbidity
<b>Timing</b>	Follow-up not limited
<b>Setting</b>	Inpatient & outpatient
<b>Study design</b>	RCTs Consider cohorts for harms

## KQ 2: What are the comparative effectiveness and potential harms of different methods of CR evaluated in the outpatient setting (balloon catheter, prostaglandins, etc.)?

<b>Population</b>	Pregnant women $\geq$ 37 wk undergoing CR
<b>Intervention</b>	Method of CR
<b>Comparator</b>	Expectant management, no treatment or placebo, other CR methods
<b>Outcomes</b>	Maternal & infant health outcomes Maternal & infant mortality and morbidity
<b>Timing</b>	Follow-up not limited
<b>Setting</b>	Outpatient
<b>Study design</b>	RCTs Consider cohorts for harms

# KQ 3: What evidence informs preference for or tolerability of different methods of CR in the outpatient setting or outpatient compared to the inpatient setting?



<b>Population</b>	Pregnant women $\geq$ 37 wk undergoing CR
<b>Intervention</b>	1. Setting (inpatient) 2. Method CR (outpatient)
<b>Comparator</b>	1. Setting (outpatient) 2. Expectant management, no treatment or placebo, other CR methods (outpatient)
<b>Outcomes</b>	Preference & tolerability
<b>Timing</b>	Follow-up not limited
<b>Setting</b>	Inpatient & outpatient
<b>Study design</b>	RCTs Consider cohorts

# KQ 4: What are the effectiveness and potential harms of available methods for fetal surveillance in pregnant women undergoing CR with prostaglandins in the inpatient and outpatient setting?



<b>Population</b>	Pregnant women $\geq$ 37 wk CR with prostaglandins
<b>Intervention</b>	Method of fetal surveillance
<b>Comparator</b>	No fetal monitoring or another method of fetal surveillance
<b>Outcomes</b>	Maternal & infant health outcomes Maternal & infant mortality and morbidity
<b>Timing</b>	Follow-up not limited
<b>Setting</b>	Inpatient & outpatient
<b>Study design</b>	RCTs Consider cohorts



# KQ 5: What are the effectiveness and potential harms of CR among women presenting with fetal demise in the late second or third trimester, in the inpatient and outpatient setting?



<b>Population</b>	Fetal demise, 2nd/3rd trimester undergoing CR
<b>Intervention</b>	Method of CR
<b>Comparator</b>	Expectant management, no treatment or placebo, other CR methods
<b>Outcomes</b>	Maternal health outcomes Maternal & mortality and morbidity
<b>Timing</b>	Follow-up not limited
<b>Setting</b>	Inpatient & outpatient
<b>Study design</b>	RCTs

# *Moderated Discussion*

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Moderator: Bill Lawrence, MD, MS



# Order of Comments

- National Partnership for Women & Families
- Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN)
- University of California San Diego (UCSD)
- Food and Drug Administration (FDA), Division of Bone Reproductive & Urologic Products (DBRUP)
- Nurse Practitioners in Women's Health (NPWH)

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# Key Questions

- **KQ 1:** What are the effectiveness and potential harms of CR in the outpatient compared to the inpatient setting?
- **KQ 2:** What are the comparative effectiveness and potential harms of different methods of CR evaluated in the outpatient setting (balloon catheter, prostaglandins, etc.)?
- **KQ 3:** What evidence informs preference for or tolerability of different methods of CR in the outpatient setting or outpatient compared to the inpatient setting?
- **KQ 4:** What are the effectiveness and potential harms of available methods for fetal surveillance in pregnant women undergoing CR with prostaglandins in the inpatient and outpatient setting?
- **KQ 5:** What are the effectiveness and potential harms of CR among women presenting with fetal demise in the late second or third trimester, in the inpatient and outpatient setting?

# *Open Comments and Questions Period*

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# *Summary and Closing Remarks*

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# Contact Information

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***Thank you!***

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