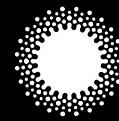


Shared Maternity Care

NEWSLETTER FROM THE GENERAL PRACTICE LIAISON UNIT



the women's
the royal women's hospital

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Antenatal beta-thalassaemia carrier screening study

The Murdoch Childrens Research Institute is conducting a study which is exploring the current thalassaemia carrier screening process. The project aims to find out how antenatal β -thalassaemia carrier screening is currently being conducted throughout Victoria, as well as exploring healthcare professionals' views about the current process used.

The researchers would like to interview GPs about their current practice and feelings towards thalassaemia carrier screening. This would involve a 20 minute interview, where a researcher will come to their practice to conduct the interview or the interview can also be conducted over the phone.

If you would be happy to participate in the study starting or you have any questions, please contact **Nicole Cousens** from the Murdoch Childrens Research Institute on 8341 6374 or Nicole.cousens@mcri.edu.au to receive further information. GP participants will receive a \$50 Coles/Myer gift voucher for their time

H1N1 vaccination and pregnancy

We usually think of the elderly, the very young and those with chronic medical illness as those at risk of complications from influenza. Pregnant women are a group that are often overlooked and the recent experience with H1N1 'swine' flu shows that they are at significant risk of complications, including early viral pneumonitis and secondary bacterial pneumonia which may require ICU admission and lead to premature delivery.

Seasonal influenza vaccination is recommended for pregnant women, particularly if they have other risk factors for complicated influenza such as renal disease, cardiac and pulmonary disease and diabetes.

The H1N1 vaccine that has recently been made available free of charge by the Federal Government is also recommended for pregnant women, regardless of gestation. Only a single dose is required.

The influenza vaccine does not contain live virus and there is no evidence of any damage to the foetus or adverse events in pregnancy. Anaphylactic hypersensitivity to eggs is a contraindication to vaccination as is a significant acute febrile illness (temperature $>38.5^{\circ}\text{C}$), previous Guillain-Barré syndrome or previous anaphylaxis to influenza vaccination.

Side effects are minimal but may include local swelling, redness, or tenderness at the injection site (10%); and fever, malaise and myalgia (1-10%) that may last 24-48 hours and usually settles with paracetamol.

A small amount of mercury is present as a preservative but the concentration is well below the accepted safe intake (one dose contains the amount of mercury found in 100g of fish), even for pregnant women, and is not a contraindication to vaccination.

Congratulations Sally and welcome Jane, our new Shared Care Coordinator

Congratulations to Sally Chambers, the Shared care coordinator and her partner Simon who had their first child, Lucy, on 15th November at The Women's. Both are now home and doing well.

Whilst Sally is on maternity leave we are delighted to welcome Jane De Marco as the shared care coordinator. Jane is a Division 2 nurse at The Women's and has worked extensively in both Pregnancy and Women's Health clinics. The shared care coordinator contact details remain the same (as below).

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Jane De Marco

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Shared Maternity Care Coordinator

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Updating 'Guidelines for Shared Maternity Care Affiliates'

Guidelines for Shared Maternity Care Affiliates' were first published in 2002 by The Royal Women's Hospital, Mercy Hospital for Women and Sunshine Hospital and have become a standard reference document for Shared Maternity Care Affiliates. Changes in maternity care, maternity services and updated information and resources have meant that the guidelines need to be revised and built upon.

The Royal Women's Hospital GP Liaison Unit is leading a new collaborative project with Mercy Hospital for Women, Sunshine Hospital and Northern Health to review and update the current guidelines. This important project will draw on current best practice, key stakeholder consultation including affiliate and consumer representation. It is hoped that as well as development of up-to-date and relevant guidelines and formalisation of Shared Maternity Care processes at the four health services, the project will lead to better support for Shared Maternity Care Affiliates and a strengthening of Shared Maternity Care for women who are best served by this model of care.

Affiliates were surveyed earlier this year regarding usefulness of key guideline content. Responses from this survey are being used to inform the guideline update project. In addition, we hope to involve affiliates in focus groups as the new guidelines take shape. If you would like more information on this project or have input you wish to provide, please contact:

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Please find enclosed

- Clinical Practice Review, Issue 7
- Centre for Women's Mental Health Newsletter

