



Noticias NEWS Nouvelles

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Total recruitment = 393
68 recruited in March.
A new record!

CENTRES RECRUITING FOR THE FIRST TIME:

LC Lagomaggiore, Mendoza, ARGENTINA (5);

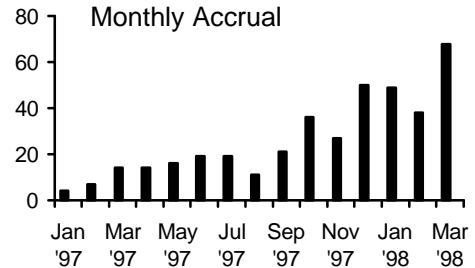
Grey Nuns', Edmonton, CANADA (2);

Mater Mothers', Brisbane, AUSTRALIA;

Regionalspital, Biel, SWITZERLAND;

Islamic, Amman, JORDAN;

Hospital das Clinicas, Recife, BRAZIL.



MUGS ARE BEING SENT TO THESE CENTRES WHICH REACHED THEIR GOAL: Mornington Peninsula, Frankston, AUSTRALIA (2nd); Friarage, Northallerton, UK; University of Utah, Salt Lake City, USA; Ma'ayne Hayeshua, Bene Beraq, ISRAEL.

We're busy organising everything for the upcoming Collaborators' Meeting, May 8-10 in Toronto.

If you haven't yet returned your attendance forms, please do it right away.

We are looking forward to seeing everyone.

It should be an exciting weekend, with plenty of time to discuss the Term Breech Trial, and to hear about other research projects at the Sunday morning presentations.

Meeting invitations are being sent to new centres as soon as we receive their completed documents.

If yours are ready, send them in by April 15 and join us in Toronto.



Data Form Notes:

Please enter only the biparietal diameter measurement in *Entry Form*, question 2. **Do not enter head circumference.** If the biparietal diameter is not known, please write 'not known' beside the boxes, and leave the boxes blank.

This question was raised recently:

Does a baby in sacrum posterior presentation require an elective Caesarean section and thus need to be excluded from the trial?

Upon careful consideration, the Steering Committee agreed that a baby in sacrum posterior position does not need to be excluded from the trial, as the baby will often rotate to a sacrum anterior position in labour. If the baby persists in a sacrum posterior position, with failure of descent in the second stage of labour, Caesarean section should be undertaken.

The final instalment of recruitment tips from previous meetings:

Direct patient contact

- have the coordinator speak to the patient about the study before any one else (Toronto/London/Sydney)
- inform each patient that she has 3 options Term Breech Trial, vaginal delivery or Caesarean; put the trial first. (Toronto/London/Sydney)
- approach all women and present the three choices, do not only approach those who are undecided about vaginal or Caesarean (Toronto/London/Sydney)
- try to encourage a decision before the patient goes home, a lot of outside influences come in to play once she leaves the hospital (Toronto/London)
- emphasise that there is uncertainty as to the outcome with either form of delivery (Toronto/London/Sydney)
- since a Caesarean delivery requires many of the same manoeuvres as a vaginal breech delivery it is not without risk to the baby (London)
- inform women that the rate of respiratory distress may be higher if a Caesarean is done electively before 39 weeks (London)
- present the idea that the breech position itself may be associated with an increase risk of adverse perinatal outcome and that the mode of delivery doesn't necessarily increase it any more (Toronto/London)
- remind women that a trial of vaginal delivery is associated with a 40-50% chance of Caesarean section (Toronto/London)
- note that the protocol for vaginal birth provides the same options for women in regards to labour events and choices as if they had a cephalic presentation (Toronto/London)
- develop a relationship of trust with the patient - the coordinator can take some time to get to know her, i.e. talk about her family, other children, etc. (Toronto)
- when the patient feels a lack of control in the decision, stress that participating in the trial is exercising control and that participation is her decision (Toronto/London)
- if there is a language barrier use an audio tape of the patient information or even translate the video script into the language needed (London)
- with any translation be sure to do a back translation to be sure of the wording (Toronto/London)
- use the word 'study' rather than 'trial' when discussing participation (Toronto/London)
- ensure that a similar message comes from different sources to make the impact stronger (i.e. coordinator, midwife, consultant, lay press, etc.) (Toronto/London/Sydney)
- discuss the trial with women who are diagnosed as having a breech presentation in labour - this is ethical, because you must discuss the mode of delivery and the trial can be included as one of the options (London)
- use business cards with all the coordinator's contact information to give to potential patients (Toronto)





Recruitment

Recruiting centres
as of March 30, 1998

Annual Goal	Jan-Jun 97	Jul-Sep 97	Oct-Dec 97	Jan 98	Feb 98	Mar 98	Total
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(shaded area is prior to recruitment)

CANADA	148	26	11	26	8	7	7	85
UK	116	18	10	15	3		8	54
PAKISTAN	20		1	12	13	10	8	44
AUSTRALIA	70	3	3	8	6	7	10	37
INDIA	27	2	7	5	3	1	8	26
USA	52	2	2	12	3	2	4	25
SOUTH AFRICA	41	6	4	2	3	3	5	23
ARGENTINA	30	2	2	9	2	1	5	21
ISRAEL	29	2	6	7	1	1	2	19
FINLAND	13	7	4	4	2		1	18
YUGOSLAVIA	15			5	4	2	2	13
CHILE	9	4	1	2		1		8
SWITZERLAND	9	2		1			2	5
JORDAN	42			1			4	5
POLAND	11			1	1	1	1	4
MEXICO	12					2		2
BRAZIL	23			1			1	2
DENMARK	8			1				1
GERMANY	3			1				1
Total	678	74	51	113	49	38	68	393

CANADA								
Riverside, Ottawa	6	10	2	7	2	1		22
St Joseph's, London	11	2	2	3	1	1		9
Doctors, Toronto	5	3	3	2				8
Guelph General	4	4	2	2				8
Women's College, Toronto	8	1		5		1		7
St Boniface, Winnipeg	10	1	1	2	1	1		6
BC Women's, Vancouver	19			1	2		2	5
Scarborough Centenary	7	2		1	1			4
Mississauga	8			1			2	3
Royal Victoria, Montreal	9	2						2
St Joseph's, Hamilton	8				1	1		2
Regina General	9			1		1		2
IKW-Grace, Halifax	15			1			1	2
Grey Nuns', Edmonton	9						2	2
Ottawa General	7	1						1
Royal Victoria, Barrie	4		1					1
Misericordia, Edmonton	9					1		1

UK								
Bradford Royal Infirmary	11	1	2	4	1		2	10
Leeds General Infirmary	11	6	1				3	10
Arrowe Park, Wirral	11	2	1	3	1		1	8
Liverpool Women's	14	4	2	1				7
Treliske, Truro	11	3		2				5
Friarage, Northallerton	4	1	2				2	5
Peterborough Maternity Unit	9	1	1	1				3
Ipswich	10			2				2
Rutherglen Maternity	8		1					1
Lewisham	7			1				1
St James's University	12			1				1
Northern General, Sheffield	8				1			1

**Recruiting centres
as of March 30, 1998**

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(shaded area is prior to recruitment)

PAKISTAN								
Jinnah PMC, Karachi	14			6	13	9	8	36
Aga Khan Univ, Karachi	6		1	6		1		8
AUSTRALIA								
Mornington Peninsula, Frankston	5	2	2	5			2	11
Logan, Meadowbrook	8				2	2	2	6
St George, Sydney	7		1	1	2	1	1	6
Caroline Chisholm Centre, Liverpool	7				1	2	3	6
King George V, Sydney	12	1		1				2
Women's & Children's, Adelaide	3			1		1		2
Gosford	7					1	1	2
Mona Vale	2				1			1
Mater Mothers', Brisbane	19						1	1
INDIA								
Nowrosjee Wadia, Mumbai	13	2	7	3	1	1	3	17
Christian Medical College, Vellore	14			2	2		5	9
USA								
Univ New Mexico, Albuquerque	10	2		4	1			7
Univ Utah, Salt Lake City	6		2	3			2	7
St John's Mercy, St Louis	16			4		1	1	6
Univ of Iowa, Iowa City	4				1	1	1	3
University of Maryland, Baltimore	4			1				1
Baylor College of Medicine, Houston	12				1			1
SOUTH AFRICA								
Coronation, Johannesburg	16	6	4	2	1	1	1	15
Medunsa	25				2	2	4	8
ARGENTINA								
Maternidad "Martin", Rosario	11	1	1	5	2	1		10
LC Lagomaggiore, Mendoza	19						5	5
Centre no longer recruiting *	Antartida Private, Buenos Aires							6
ISRAEL								
Ma'ayney Hayeshua, Bene Beraq	10		4	4	1		2	11
Meir, Kfar Saba	14	2	1	2				5
Poriya, Tiberias	5		1	1		1		3
FINLAND								
Central University, Helsinki	13	7	4	4	2		1	18
YUGOSLAVIA								
Novi Sad	15			5	4	2	2	13
CHILE								
Universidad Catolica, Santiago	9	4	1	2		1		8
SWITZERLAND								
Hôpitaux Universitaires, Geneva	7	2		1			1	4
Regionalspital, Biel	2						1	1
JORDAN								
Princess Badeea, Irbid	24			1			3	4
Islamic, Amman	18						1	1
POLAND								
University of Gdansk	5			1		1	1	3
NRI of Mother & Child, Warsaw	6				1			1
MEXICO								
Dr M G Gonzalez, Mexico DF	12					2		2

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BRAZIL							
Materno Infantil, Goiânia	13		1				1
Hospital das Clinicas, Recife	10					1	1
DENMARK							
Glostrup County, Glostrup	8		1				1
GERMANY							
University, Bonn	3		1				1

* Antartida Private is no longer doing obstetrics. The investigator, Dr Ricardo Savransky, has moved to a new hospital and plans to begin the study there.

March 30, 1998, centres awaiting first patient: Centre, city, COUNTRY, (annual goal) [month/year start-up package sent]

Liaquat National, Karachi, PAKISTAN (4) [3/98]; Instituto Materno Infantil de Pernambuco (IMIP), Recife, BRAZIL (15) [3/98]; Maricopa, Phoenix, USA (8) [3/98]; Makassed Islamic Charitable, Jerusalem, ISRAEL (-) [3/98]; Pilgrim, Boston, UK (5) [3/98]; Oakville-Trafalgar Memorial, Oakville, CANADA (5) [3/98]; Kingston General, Kingston, CANADA (6) [3/98]; Jundiaí, São Paulo, BRAZIL (6) [2/98]; York County, Newmarket, CANADA (5) [2/98]; Coombe Women's, Dublin, IRELAND (16) [2/98]; Hutzel, Detroit, USA (16) [2/98]; John Hunter, Newcastle, AUSTRALIA (9) [1/98]; Montfort, Ottawa, CANADA (6) [1/98]; University of Michigan Medical Center, Ann Arbor, USA (8) [1/98]; Grand River, Kitchener, CANADA (10) [1/98]; Ludwig Maximilians, Munich, GERMANY (4) [1/98]; North Staffordshire, Stoke-on-Trent, UK (15) [1/98]; Virchow Klinikum, Berlin, GERMANY (9) [10/97]; Mount Sinai, Toronto, CANADA (12) [8/97]; Oregon Health Sciences University, Portland, USA (6) [8/97]; Boston City, Boston, USA (5) [6/97]; Royal Bolton, Bolton, UK (10) [5/97]; St-François d'Assise, Québec, CANADA (5) [5/97]; Sinai Samaritan Med Center, Milwaukee, USA (12) [5/97]; Skejby, Aarhus, DENMARK (12) [4/97]; Nanaimo Regional General, Nanaimo, CANADA (3) [3/97]; West Cumberland, Whitehaven, UK (4) [3/97]; Medicine Hat Regional, Medicine Hat, CANADA (2) [3/97]; Albert Einstein Med Center, Philadelphia, USA (5) [2/97]; St John's, Chelmsford, UK (10) [2/97]; Markham Stouffville General, Markham, CANADA (5) [2/97]; North Bay General, North Bay, CANADA (3) [2/97]; Kalafong, Pretoria, SOUTH AFRICA (12) [1/97]; Chilliwack General, Chilliwack, CANADA (2) [1/97]; The Queen Elizabeth, Woodville, AUSTRALIA (4) [12/96]; Peter Lougheed, Calgary, CANADA (7) [12/96]; Foothills, Calgary, CANADA (12) [12/96].