



Noticias NEWS Nouvelles

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January 31,

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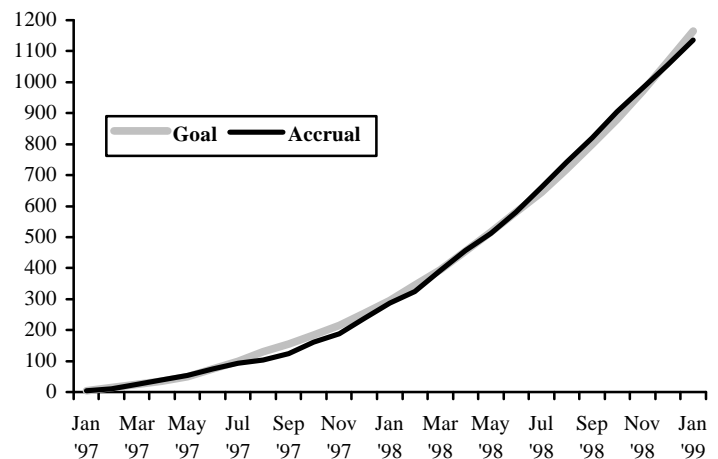
website: www.utoronto.ca/breech

Total recruited in January: 80
Overall Total: 1135

Remember!

This is the time when our recruitment needs to climb to 100+ per month in order to finish in July 2000.

Let's all work together to make it happen.



Mugs this month:

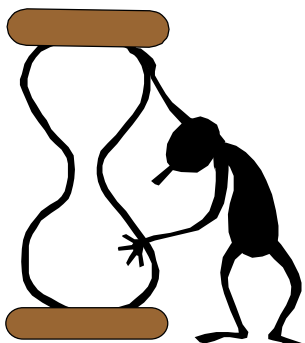
(for centres reaching or passing their annual goal)



Jinnah PMC, Karachi, PAKISTAN (#7); Riverside, Ottawa, CANADA (#6); Jundiaí, São Paulo, BRAZIL (#4); Treliske, Truro, UK (#2); Christian Medical College, Vellore, INDIA (#2); Liverpool Women's, Liverpool, UK; Edith Wolfson, Holon, ISRAEL; Sótero del Rio, Puente Alto, CHILE; St Joseph's, London, CANADA.

Centres recruiting for the first time: Prof A Posasdas, Buenos Aires, ARGENTINA.

The Interim Analysis of the first 1000 patients...



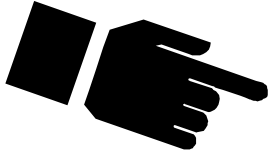
There are currently **284** incomplete cases. That number must reach **0** by February 15. (An incomplete case is one with missing booklets, or data queries that are not yet answered.)

Check the recruitment table to see your status. A shaded box indicates that all your booklets are in. A huge "Thank you" to this group.

To anyone with data still outstanding: we are waiting to get your courier packages and faxes! We cannot proceed without your vital contribution.

Cord Blood

There are still some centres in which cord blood is being gathered from fewer than 50% of participants. We want to remind everyone again that base deficit is a neonatal outcome for the Term Breech Trial, and that it is an expectation of the trial that cord gases (in particular base deficit, cord pH and HCO_3) will be obtained. If you are having difficulty meeting this requirement in the great majority of your cases, please contact us so that we can decide how to proceed.



Tips and reminders for vaginal breech deliveries

- Oxytocin augmentation for poor progress in the active phase of labour should be used with caution. However, if contractions are infrequent or weak during pushing in the 2nd stage of labour, oxytocin should be used.
- The actual delivery of the fetus should proceed in an orderly fashion. Once the fetus has delivered spontaneously to the umbilicus, there should be gentle traction while encouraging the mother to push. If the fetal condition deteriorates, and the time to proceed to Caesarean section has passed, there should not be any delay in proceeding with the delivery of the fetus
- Caesarean section, within a reasonable period of time, should be available for all breech deliveries if there are signs of fetal distress. If a decision for Caesarean section has been made in advanced labour, tocolysis with a beta-mimetic may be useful to make the mother more comfortable and prevent rapid progress and unplanned vaginal delivery while preparing for Caesarean section (even in the absence of hyperstimulation).

Prenatal Classes

Don't forget to get the support of local prenatal educators for the Term Breech Trial. We can provide you with a package of TBT information tailored to the needs of your groups, including brochures, posters, videos etc. Let us know what you need and we'll try to help.



Data Form Notes

We have had enquiries about the completion of Question 4 in the *Labour & Delivery Form* (re: principal method of fetal heart rate monitoring in labour).



The intent of this question was only to refer to women who, in fact, had a course of labour, but the wording does not make that sufficiently clear. The data from this question will not be used if there is no labour.

In completing forms for women with no labour, either mark the type of fetal monitoring used prior to C/S or leave it blank.



Recruitment

Recruiting centres
as of January 31, 1999

Annual Goal	Jan-Dec	Jan-Jun	Jul-Sep	Oct-Dec	Jan	Total	Cases outstanding for interim analysis
	97	98	98	98	99		

(shaded area is prior to recruitment)

(shaded area = none)

CANADA	151	63	51	11	15	9	149	16
PAKISTAN	35	13	54	15	39	10	131	13
UK	150	43	32	16	13	6	110	20
ARGENTINA	43	13	26	21	25	7	92	23
INDIA	45	14	18	26	11	7	76	29
BRAZIL	42	1	19	25	17	11	73	18
AUSTRALIA	51	14	36	12	9		71	13
ISRAEL	96	15	21	12	13	5	66	21
SOUTH AFRICA	41	12	28	18	5	2	65	44
JORDAN	42	1	10	12	22	8	53	13
USA	114	16	11	11	11	2	51	13
CHILE	46	7	3	18	19	5	52	15
ZIMBABWE	39		1	18	5	4	28	6
FINLAND	13	15	4	1	2		22	2
YUGOSLAVIA	15	5	10		1		16	10
SWITZERLAND	9	3	6	1	4		14	2
EGYPT	12		4	3	5	2	14	3
POLAND	22	1	6	5	1		13	5
PORTUGAL	7			3	8		11	3
MEXICO	12		3	5			8	8
THE NETHERLANDS	5			5	3		8	1
GERMANY	7	1		2	3	1	7	4
ROMANIA	9				2	1	3	2
NEW ZEALAND	5				1		1	
DENMARK No longer recruiting							1	
Total	1011	237	343	240	234	80	1135	284

CANADA								
Riverside, Ottawa	6	19	10	3	3	1	36	
Guelph General	4	8	1		3	2	14	3
St Joseph's, London	11	7	3			1	11	1
Sunnybrook & Women's College, Toronto	8	6	2	1			9	
St Boniface, Winnipeg	10	4	3			2	9	
Misericordia, Edmonton	9		6	1	1		8	3
Grey Nuns', Edmonton	9		6			1	7	
St Joseph's, Hamilton	8		2		3	2	7	1
Foothills, Calgary	12		2		4		6	
BC Women's, Vancouver	19	1	4				5	2
Kingston General	6		2	3			5	
Scarborough Centenary	7	3	1				4	
Regina General	9	1	3				4	
Royal Victoria, Barrie	4	1	2				3	
Ottawa General	7	1		1			2	2
York County, Newmarket	5			2			2	
Montfort, Ottawa	6		1				1	
Royal Alexandra, Edmonton	11				1		1	
Centre(s) no longer recruiting							15	4

PAKISTAN								
Jinnah PMC, Karachi	14	6	46	15	27	5	99	2
Civil, Karachi	11				12	5	17	9
Aga Khan Univ, Karachi	6	7	2				9	2
Liaquat National, Karachi	4		6				6	

**Recruiting centres
as of January 31, 1999**

Annual Goal	Jan-Dec	Jan-Jun	Jul-Sep	Oct-Dec	Jan	Total	Cases outstanding for interim analysis
	97	98	98	98	99		

(shaded area is prior to recruitment)

(shaded area = none)

UK								
Treliske, Truro	11	5	4	7	5	2	23	10
Bradford Royal Infirmary	11	7	5	2			14	
Arrowe Park, Wirral	11	6	6	1	1		14	1
Liverpool Women's	14	7	3	1	1	2	14	1
Leeds General Infirmary	11	7	3		2		12	1
Ormskirk General	3		2	3	1	1	7	
Peterborough Maternity Unit	9	3	2		1		6	2
Friarage, Northallerton	4	3	2				5	
St John's, Chelmsford	10		3				3	3
Pilgrim, Boston	5		1	1		1	3	
Ipswich	10	2					2	
Royal United, Bath	9			1	1		2	1
Lewisham	7	1					1	
St James's University, Leeds	12	1					1	1
Northern General, Sheffield	8		1				1	
North Staffordshire, Stoke on Trent	15				1		1	
Centre(s) no longer recruiting							1	

ARGENTINA								
LC Lagomaggiore, Mendoza	19		18	18	22	4	62	17
Maternidad "Martin", Rosario	11	7	7	1	1	1	17	1
Ramos Mejia, Buenos Aires	3		1	2	2		5	4
Prof A Posadas, Buenos Aires	10					2	2	
Centre(s) no longer recruiting							6	1

INDIA								
Nowrosjee Wadia, Mumbai	13	12	8	7	5	1	33	4
Christian Medical College, Vellore	14	2	10	10	4	3	29	15
LTMCC & LTMGH, Mumbai	18			9	2	3	14	10

BRAZIL								
Jundiaí, São Paulo	6		8	12	3	6	29	13
ISCMPA, Porto Alegre	13		1	9	8	3	21	5
Hosp das Clinicas da UFPE, Recife	10		7	2	2	1	12	
Materno Infantil, Goiânia	13	1	3	2	4	1	11	

AUSTRALIA								
Caroline Chisholm Centre, Liverpool	7		10	6	4		20	
Mornington Peninsula, Frankston	5	9	3	2	2		16	5
Logan, Meadowbrook	8		10				10	5
St George, Sydney	7	2	4	2			8	
King George V, Sydney	12	2	1	2	3		8	1
Gosford	7		3				3	2
Mona Vale	2		3				3	
Women's & Children's, Adelaide	3	1	1				2	
Centre(s) no longer recruiting							1	

ISRAEL								
Ma'ayney Hayeshua, Bene Beraq	10	8	7	1	2		18	6
Makassed Islamic, Jerusalem	5		9	3	1		13	8
Edith Wolfson, Holon	9		1	3	4	4	12	
Meir, Kfar Saba	14	5			1		6	3
Poriya, Tiberias	5	2	2		2		6	1
Bnai-Zion, Haifa	10			4	1		5	1
Soroka, Beer Sheba	25		2	1		1	4	2
Chaim Sheba, Tel Hashomer	18				2		2	

SOUTH AFRICA								
Medunsa	25		23	17	4		44	42
Coronation, Johannesburg	16	12	5	1	1	2	21	2

JORDAN								
Princess Badeea, Irbid	24	1	7	7	19	7	41	7
Islamic, Amman	18		3	5	3	1	12	6

Recruiting centres
as of January 31, 1999

Annual Goal	Jan-Dec 97	Jan-Jun 98	Jul-Sep 98	Oct-Dec 98	Jan 99	Total	Cases outstanding for interim analysis
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(shaded area is prior to recruitment)

(shaded area = none)

USA								
Univ Utah, Salt Lake City	6	5	2	2	1		10	1
Univ New Mexico, Albuquerque	10	6	1	1	1		9	2
St John's Mercy, St Louis	16	4	3				7	
Boston Medical Center	5		1		2	1	4	1
Univ Iowa, Iowa City	4		3				3	
Univ Michigan, Ann Arbor	8			3			3	1
Baylor College, Houston	12		1	2			3	3
Maricopa, Phoenix	8			1	2		3	2
Oregon Health Sci Univ, Portland	6			1	1		2	
Hutzel, Detroit	16				2		2	2
Univ Mississippi, Jackson	9				1	1	2	1
Univ Maryland, Baltimore	4	1					1	
Texas Tech Univ, Lubbock	6			1			1	
Harbor, Baltimore	4				1		1	
CHILE								
Sótero del Río, Puente Alto	37			18	16	4	38	12
Universidad Catolica, Santiago	9	7	3		3	1	14	3
ZIMBABWE								
Harare Maternity	39		1	18	5	4	28	6
FINLAND								
Central University, Helsinki	13	15	4	1	2		22	2
YUGOSLAVIA								
Novi Sad	15	5	10		1		16	10
SWITZERLAND								
Hôpitaux Universitaires, Geneva	7	3	4	1	3		11	1
Regionalspital, Biel	2		2		1		3	1
EGYPT								
Assiut University	12		4	3	5	2	14	3
POLAND								
NRI of Mother & Child, Warsaw	6		4	1	1		6	3
University of Gdansk	5	1	2	1			4	
Polish Mothers Memorial, Lodz	11			3			3	2
PORTUGAL								
Distrital, Faro	7			3	8		11	3
MEXICO								
Dr M G Gonzalez, Mexico DF	12		3	5			8	8
THE NETHERLANDS								
Atrium, Heerlen	5			5	3		8	1
GERMANY								
Ludwig Maximilians, Munich	4			2	3	1	6	3
University, Bonn	3	1					1	1
ROMANIA								
IOMC-Polizu, Bucharest	9				2	1	3	2
NEW ZEALAND								
Queen Mary Maternity, Dunedin	5				1		1	
DENMARK								
No Longer Recruiting							1	

January 31, 1999, centres awaiting first patient: Centre, city, COUNTRY, (annual goal) [month/year start-up package sent]

Sunderland Royal, Sunderland, UK (10) [1/99]; Grimsby District General, Grimsby, UK (-) [1/99]; Jefferson Medical College, Philadelphia, USA (6) [9/98]; CUSE (Site Fleurimont), Sherbrooke, CANADA (8) [9/98]; Countess of Chester, Chester, UK (10) [7/98]; Hosp Parroquial de San Bernardo, Santiago, CHILE (9) [6/98]; National Women's, Auckland, NEW ZEALAND (31) [5/98]; Brantford General, Brantford, CANADA (4) [5/98]; Royal University, Saskatoon, CANADA (11) [4/98]; Instituto Materno Infantil de Pernambuco (IMIP), Recife, BRAZIL (15) [3/98]; Mount Sinai, Toronto, CANADA (12) [8/97]; North Bay General, North Bay, CANADA (3) [2/97]