## **Results of Topic Selection Process & Next Steps**

- The topic, Comparative effectiveness of common treatment options for preterm labor, was found to be addressed by several recent systematic reviews and clinical guidelines
- Given that the existing guidelines, reviews, and ongoing clinical trials, cover this nomination, no further activity will be undertaken on this topic.

## **Topic Description**

Nominator(s): Individual

**Nomination Summary:** The nominator is interested in the comparative effectiveness of the most common treatments for patients in preterm labor and identifying treatments that prevent labor the longest with the fewest side effects. The nominator suggested a comparison and risk-benefit analysis of various treatment options, including bed rest, terbutaline, procardia, cerclage and magnesium sulfate. The nominator also suggested an investigation of effectiveness among specific groups: women under 18 years of age, between the ages of 18-35 years, and 35 years and older (i.e., advanced maternal age), as well as differential treatment outcomes for mothers with diabetes.

## **Staff-Generated PICO**

Population(s): Pregnant women in, or at risk of, preterm labor
Intervention(s): Interventions that treat or prevent preterm labor, including: bed rest, terbutaline, nifedipine and procardia, cervical cerclage, magnesium sulfate and other tocolytic agents
Comparator(s): Other treatment options
Outcome(s): Healthy outcomes for pregnant women experiencing preterm labor and their babies, including delay of birth, gestational age at birth, enhanced quality of life

(e.g., healthiness) and minimal adverse side effects.

**Key Questions** 1. For patients in preterm labor, what is the comparative effectiveness of the most common treatments?

- 2. Which treatments prevent the labor the longest with the fewest side effects?
- 3. Are there differential outcomes based on mother's age?
- 4. Are there differential outcomes based on the mother's health status, in particular among mothers with diabetes?

## Considerations

- The topic meets EHC Program appropriateness and importance criteria. (For more information, see <a href="http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/">http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/</a>.)
- The topic was found to be addressed by several systematic reviews and clinical guidelines, some of which are listed below:
  - American College of Obstetricians and Gynecologists (ACOG). Management of preterm labor. American College of Obstetricians and Gynecologists; Committee on Practice Bulletins— Obstetrics; 2012, June (ACOG practice bulletin; no 127).
  - Vanderbilt Evidence-based Practice Center. Progestogens for Prevention of Preterm Birth. Rockville (MD): Agency for Healthcare Research and Quality (US); 2012 Sept. (Comparative Effectiveness Review, No. 74) Available from: <u>http://www.effectivehealthcare.ahrq.gov/ehc/products/104/1239/ProgestogensPretermBirth\_FinalR</u> <u>eport\_20120823.pdf</u>.
  - University of Ottawa Evidence-based Practice Center. Terbutaline Pump for the Prevention of Preterm Birth. Rockville (MD): Agency for Healthcare Research and Quality (US); 2011 Sept. (Comparative Effectiveness Review, No. 35) Available from: <a href="http://www.effectivehealthcare.ahrq.gov/ehc/products/157/783/Terbutaline\_CER\_20111229.pdf">http://www.effectivehealthcare.ahrq.gov/ehc/products/157/783/Terbutaline\_CER\_20111229.pdf</a>.