Library Book Sale!
Books from $1 – at least 90% off!
The Library has recently updated its collection and all deselected items are on sale. You can find these bargains in the Medical Library on the book sale trolley – or ask at the Medical Library’s front desk.

NSQHS Standards Live PubMed Searches!
Health Libraries Australia (HLA) has created a table of live PubMed searches (i.e. constantly updated) for 11 topics aligned to the NSQHS standards. The Library has embedded this table (with permission and attribution) on our website for your use, along with other PubMed search filters.

Access via Research Tips > Specific searches / search filters
Or via the Standards tab on our Statistics & Standards and Guidelines & EBP guides.
Staff publications

The full text of these recent staff publications is displayed in print in the Library and linked to in the Staff Publications page where possible:

The latest Staff Publications include a Cochrane Review, a Meta-analysis and a RCT!

Go to: AA - WNHS / Most Recent Staff Publications / KEMH on our Staff Publications page!

We have completed staff publication records for 2017, 2016 and most of 2015 and will continue to work backwards as well as adding new research in 2018 when it appears! If we have missed your publication or need to change your details please Let Us Know!

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Featured Library Resource

Multicultural & Consumer Health Information Guide!

Have you visited our Multicultural & Consumer Health Information Guide lately? We have updated this guide to include Cultural & Religion Information Sheets (WA Government Office of Multicultural Interests) for 7 religions.

Access via Quick Links or under eLibrary on the Library Home page
New Books

New Ebooks!
Access these books online from the links provide (or the Library catalogue)

- Gahart's 2019 Intravenous Medications: a handbook for nurses and health professionals (35th ed)
- Pediatric Injectable Drugs: the teddy bear book (11th ed)
- Anti-infection handbook (Australian)
- Fundamentals of pediatric imaging (2nd ed)
- Kaufman's Clinical Neurology for Psychiatrists (8th ed)
- Breast tomosynthesis

New Print Books!
A complete list of new books in the medical library is available on the website (see ‘Announcements’).
Neonatal nursing in Australia and New Zealand: principles for practice

ACORN standards for perioperative nursing in Australia (15th ed.)

The breastfeeding atlas (6th ed.)

Psychosocial issues in palliative care: a community based approach for life limiting illness (3rd ed.)

Evidence-based sexual and reproductive health care: policies, clinical procedures, and related research

Effective leadership, management and supervision in health and social care (2nd ed.)

Medical law and ethics (7th ed.)

Prenatal and postnatal care: a woman-centered approach (2nd ed.)

Women’s gynecologic health (3rd ed.)
News & Events from the WNHL

Pamphlet services

Smoking and mental health

Your newborn baby's hearing screen

New books from the WNHL

10 things every parent needs to know

Cystic fibrosis: a guide for patient and family

It's ok that you're not ok: meeting grief and loss in a culture that doesn't understand.

Miscarriage: what every woman needs to know

The psychology of babies: how relationship support development from birth to two

Siblings: brothers and sisters of children with disability
Articles of Interest

Clinics reviews & themed journal issues:

Managing menopause by combining evidence with clinical judgement (Clinical Obstetrics & Gynecology)

Pediatric rheumatology (Pediatric Clinics of North America)

Update on mechanisms and management of Patent Ductus Arteriosus (Seminars in Perinatology)

Midwifery special issue on education: A call to all the world's midwife educators! (Midwifery)

New and updated Cochrane reviews:

Acute tocolysis for uterine tachysystole or suspected fetal distress (new)
WNHS first author! There is insufficient evidence to determine the effects of tocolytics for uterine tachysystole or suspected fetal distress during labour. The clinical significance for some of the improvements in measures of fetal well-being with tocolytics is unclear.

Metformin for women who are overweight or obese during pregnancy for improving maternal and infant outcomes (new)
There is insufficient evidence to support the use of metformin for women with obesity in pregnancy for improving maternal and infant outcomes. Metform was associated with increased risk of adverse effects, particularly diarrhoea.

Vaginal preparation with antiseptic solution before cesarean section for preventing postoperative infections (updated)
Vaginal preparation with povidone-iodine or chlorhexidine solution compared to saline or not cleansing immediately before cesarean delivery probably reduces the risk of post-cesarean endometritis.

Infant position in neonates receiving mechanical ventilation (highlighted)
Updated November 2016 - Evidence of low to moderate quality favours the prone position for slightly improved oxygenation in neonates undergoing mechanical ventilation; no evidence to suggest that particular body positions during mechanical ventilation of the neonate are effective in producing sustained and clinically relevant improvement.

Continuous intravenous perioperative lidocaine infusion for postoperative pain and recovery in adults
It is uncertain whether IV perioperative lidocaine, when compared to placebo or no treatment, has a beneficial impact on pain scores in the early postoperative phase, and on gastrointestinal recovery, postoperative nausea, and opioid consumption.

**Prescribed hypocaloric nutrition support for critically-ill adults (new)**

Very low-quality evidence for the effects of prescribed hypocaloric nutrition support on mortality in hospital, in the ICU and at 30 days, as well as in length of hospital and ICU stay, infectious complications and the length of mechanical ventilation. The reasons for downgrading this evidence were unclear or high risk of bias in the included studies, imprecision and inconsistency.

**Omega-3 fatty acids for the primary and secondary prevention of cardiovascular disease (highlighted, conclusions changed)**

This is the most extensive systematic assessment of effects of omega-3 fats on cardiovascular health to date. Moderate- and high-quality evidence suggests that increasing EPA and DHA has little or no effect on mortality or cardiovascular health (evidence mainly from supplement trials). Previous suggestions of benefits from EPA and DHA supplements appear to spring from trials with higher risk of bias. Low-quality evidence suggests ALA may slightly reduce CVD event risk, CHD mortality and arrhythmia.

**Uterotonic agents for preventing postpartum haemorrhage: a network meta-analysis (highlighted)**

Ergometrine plus oxytocin combination, carbetocin, and misoprostol plus oxytocin combination were more effective for preventing PPH ≥ 500 mL than the current standard oxytocin. Ergometrine plus oxytocin combination was more effective for preventing PPH ≥ 1000 mL than oxytocin. Carbetocin had the most favourable side-effect profile amongst the top three options; however, most carbetocin trials were small and at high risk of bias.

**Evidently Cochrane:**

**Do memories matter? Is reminiscence over-rated as a therapy for people with dementia?**

In this blog, dementia care practitioner and researcher Bob Woods talks about reminiscence therapy and the evidence which he and his colleagues brought together in their recent Cochrane Review.

**Venous leg ulcers: a holistic approach to healing**

In this blog, Sarah Chapman from Cochrane UK looks at the latest evidence on dressings to treat venous leg ulcers and nurse Helen Cowan offers her perspective from clinical practice, reflecting on the importance of seeing beyond the wound.

**Other items of interest:**

*ACOG Committee Opinion No. 745: Mode of Term Singleton Breech Delivery (Obstetrics & Gynecology)*

Updated.

*Risk of recurrent shoulder dystocia: are we any closer to prediction? Systematic Review (Journal of Maternal-Fetal & Neonatal Medicine)*
Recurrent shoulder dystocia is an unpredictable obstetric complication with potentially devastating consequences. Individual assessment and thorough counselling should be offered to women contemplating a subsequent planned vaginal birth with specific attention paid to those women where the estimated birthweight is >4000 g or greater than in the index pregnancy.

**Many Women With Early Breast Cancer May Not Need Chemotherapy (JAMA)**
Clinical Trials update - For many women with early breast cancer, chemotherapy provides no added benefit to endocrine therapy.

**Long-acting Reversible Contraception—Highly Efficacious, Safe, and Underutilized (JAMA)**
Clinical update

**Postpartum intrauterine devices: clinical and programmatic review (AJOG)**
This review focuses on the most recent clinical and programmatic updates on postpartum intrauterine device practice. It discusses postpartum intrauterine device expulsion and continuation, eligibility criteria and contraindications, safety in regards to breastfeeding, and barriers to access.

**The use of O-ring retractors at Caesarean section: A systematic review and meta analysis (EJOG)**
This review concludes that O-ring retractors do not reduce the incidence of the common measurable complications of CS. There may be a subgroup where these retractors are useful, but present evidence does not justify their routine use at CS.

**Development of a core outcome set for trials on induction of labour (COSIOL): An international multi-stakeholder Delphi study (BJOG)**
Trials on induction of labour should include this core outcome set to standardise reporting.

**Urinary stress incontinence and other maternal outcomes two years after Caesarean or vaginal birth for twin pregnancy: a multicentre randomised trial (BJOG)**
Among women with twin pregnancy and no prior history of urinary stress incontinence, a management strategy of planned caesarean compared with planned vaginal birth reduces risk of problematic urinary stress incontinence at two years postpartum.

**Considering the biology of late recurrences in selecting patients for extended endocrine therapy in breast cancer (Cancer Treatment Reviews)**
Extending 5 years of tamoxifen with 5 years of tamoxifen or AI reduces late recurrence risk by 2-5%, but results of extending AI-based therapy are inconsistent. Multiple tools predict late recurrence risk, but not necessarily benefit from extended endocrine therapy. Patients with high expression of estrogen-responsive genes in the primary tumor might benefit most from extended endocrine therapy.

**Systematic review and meta-analysis of broad-reach physical activity interventions for cancer survivors (2013-2018): We still haven’t found what we’re looking for (Cancer Treatment Reviews)**
Distance based interventions may increase physical activity of cancer survivors. Studies are targeting a subset of cancer survivors which limits generalizability. Many studies have methodological limitations. Overall, reviewed interventions show limited effect on physical activity behavior. New approaches are needed to support physical activity levels of cancer survivors.

**Contingency Management Versus Psychotherapy for Prenatal Smoking Cessation: A Meta-Analysis of Randomized, Controlled Trials (Women’s Health Issues)**
Contingency management seems to be a safe and efficacious prenatal smoking cessation treatment. Psychotherapy alone did not show an effect on prenatal smoking abstinence.

**Maternal intimate partner violence victimization and child maltreatment (Child Abuse & Neglect)**  
Data taken from the 14 and 30-year follow-ups of the Mater-University of Queensland Study of Pregnancy (MUSP) - 2064 mothers and children whose data on maternal IPV and child maltreatment was available, were analysed. In families with maternal IPV, two in five children reported being maltreated, compared to one in five children maltreated in families without maternal IPV.

**Effectiveness of training to promote routine enquiry for domestic violence by midwives and nurses:**  
*A pre-post evaluation study (Women and Birth)*  
Training can assist midwives and nurses to recognise signs of DV, ask women about what would be helpful to them, and address perceived organisational barriers to routine enquiry. Practice guidelines and clear referral pathways following DV disclosure need to be implemented to support gains made through training.

For more popular articles, see the [Journal Alerts](#) guide.