HACs Information Kit

The Australian Commission on Safety and Quality in Health Care has developed the HACs information kit. The information kit includes a suite of resources for clinicians, safety and quality professionals, and executives to put in place strategies that reduce the occurrence of hospital-acquired complications (HACs). It includes fact sheets on pressure injury; delirium; healthcare-associated infection; third and fourth degree perineal laceration during delivery; neonatal birth trauma and many more.

Access the kit from our Statistics & Standards page.

New QuickSearch!

QuickSearch is the new portal for online resources! It searches across the Library’s ejournals and ebooks, as well as searching the Internet for relevant open source resources.

QuickSearch does not search for print books and it is not a replacement for a comprehensive literature search. Other ways of searching (e.g. databases, journal title search & catalogue) are still available from the Library Home page.
QuickSearch is a quick and easy way to find full text on your topic. Simply type keyword(s) in the search box and click Go. You will be taken to a results page. Click on the title for more details and options (e.g. send to EndNote, email). Click on Full text available to access full text. ‘Tweak’ your results via the options on the right.

For more helpful tips on using QuickSearch see our QuickSearch Guide or contact the Library E: KEMH.Library@health.wa.gov.au  T: 6458 1499

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:

This book Testes and ovaries has a chapter Fertility treatment for women with POCs by WNHS staff - Fiona Langdon, Jennifer Pontre and Roger Hart. It is available from the Library as both a print book and an ebook - you can access it from the staff publications guide!
See more great research by your colleagues!
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**!

**Featured Library Resource**

**DynaMed Plus**

*DynaMed Plus* outscored both UpToDate and Clinical Key in the **2018 KLAS Report**:

How do **Clinical Decision Support—Point of Care Clinical Reference solutions** compare?

<table>
<thead>
<tr>
<th>1. EBSCO Health</th>
<th>Nursing Reference Center (nursing reference)</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. EBSCO Health</td>
<td><em>DynaMed</em> and <em>DynaMed</em> Plus (disease reference)</td>
<td>91.3</td>
</tr>
<tr>
<td>3. Elsevier</td>
<td>Clinical Pharmacology powered by ClinicalKey (drug reference)</td>
<td>87.2</td>
</tr>
<tr>
<td>4. Wolters Kluwer</td>
<td><em>UpToDate</em> (disease reference)</td>
<td>86.4</td>
</tr>
<tr>
<td>5. Elsevier</td>
<td><em>ClinicalKey</em> (disease reference)</td>
<td>82.0</td>
</tr>
</tbody>
</table>

This month *DynaMed Plus* selected the following as the “article most likely to inform clinical practice”:

**High-flow warm humidified supplemental oxygen may be less likely to require escalated care than standard-flow oxygen in infants with bronchiolitis with hypoxemia.**


- A randomized trial with 1,472 non-critical infants with bronchiolitis with hypoxemia
compared high-flow (2 L/kg/min, max 25 L/min) vs. standard-flow (≤ 2 L/min) supplemental oxygen.

- High-flow oxygen had lower rates of escalated care than standard-flow oxygen (12% vs. 23%, p < 0.001). There were no significant differences between groups in time on supplemental oxygen or length of hospital stay.
surgery (7th ed)

New Print Books!
A complete list of new books in the medical library is available on the website (see ‘Announcements’)

Behavioral interventions in cognitive behavior therapy: practical guidance for putting theory into action (2nd ed)

Indigenous children growing up strong: a longitudinal study of Aboriginal and Torres Strait Islander Families

Dropping the baby and other scary thoughts: breaking the cycle of unwanted thoughts in motherhood

The practice of counselling and...
Managing and sharing research data: a guide to good practice

Australian pharmaceutical formulary and handbook: the everyday guide to pharmacy practice (24th ed)

Clinical supervision (2nd ed)

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News & Events from the WNHL

Pamphlet service

Protect your child: childhood immunisation defends against 16 serious diseases (Healthy WA). Replaces Your guide to understanding childhood immunisation (Australian Government) which is currently out of print.

Health Events happening in April

16th – 22nd April - National Advance Care Planning
24th – 30th April - World Immunisation Week

New books from the WNHL
Bed rest mom: surviving pregnancy-related bed rest with your sanity and dignity intact

Before birth: a week-by-week guide to your baby’s development during pregnancy

Being a great single parent

Connect to sleep: theory and neurosciences of gentle bedtimes 0-12 months

The unspeakable loss: how do you live after a child dies?

Articles of Interest

Clinics reviews & themed journal issues:

Prenatal screening for fetal and obstetric complications: New opportunities and challenges (Seminars in Fetal & Neonatal Medicine)
New and updated Cochrane reviews:

**Mefloquine for preventing malaria in pregnant women (new & highlighted)**
Mefloquine is efficacious for malaria prevention in pregnant women. The drug has been found to be safe in terms of adverse pregnancy outcomes. However, it is not as well tolerated as other antimalarial drugs.

**Massage, reflexology and other manual methods for pain management in labour (updated)**
Massage, warm pack and thermal manual methods may have a role in reducing pain, reducing length of labour and improving women’s sense of control and emotional experience of labour, although the quality of evidence varies from low to very low and few trials reported on safety as an outcome.

**Relaxation techniques for pain management in labour (updated)**
Relaxation, yoga and music may have a role with reducing pain, and increasing satisfaction with pain relief, although the quality of evidence varies between very low to low. There was insufficient evidence for the role of mindfulness and audio-analgesia. The majority of trials did not report on the safety of the interventions.

**Paracetamol (acetaminophen) for patent ductus arteriosus in preterm or low birth weight infants (conclusions changed)**
At least 19 ongoing trials have been registered. Such trials are required before any recommendations for the possible routine use of paracetamol in the newborn population can be made.

**Laryngeal mask airway versus bag-mask ventilation or endotracheal intubation for neonatal resuscitation (conclusions changed)**
LMA can achieve effective ventilation during neonatal resuscitation in a time frame consistent with current neonatal resuscitation guidelines. Compared to BMV, LMA is more effective in terms of shorter resuscitation and ventilation times, and less need for endotracheal intubation (low- to moderate-quality evidence).

**Antifibrinolytics for heavy menstrual bleeding (updated)**
Antifibrinolytic treatment (such as TXA) appears effective for treating HMB compared to placebo, NSAIDs, oral luteal progestogens, ethamsylate, or herbal remedies, but may be less effective than LIUS. The evidence was of very low to moderate quality.

**Non-invasive brain stimulation techniques for chronic pain (updated)**
There is very low-quality evidence that single doses of high-frequency rTMS of the motor cortex and tDCS may have short-term effects on chronic pain and quality of life but multiple sources of bias exist that may have influenced the observed effects.

**Early intervention (mobilization or active exercise) for critically ill adults in the intensive care unit (new)**
There is insufficient evidence on the effect of early mobilization of critically ill people in the ICU on physical function or performance, adverse events, muscle strength and health-related quality of life at this time.
Risperidone for psychosis-induced aggression or agitation (rapid tranquillisation) (new)
The review authors conclude that at the moment, there is weak, unclear evidence regarding the use of risperidone for calming people who are aggressive due to psychosis, and no firm conclusions can be made.

Antidepressants versus placebo for panic disorder in adults (new)
Antidepressants may be more effective than placebo in treating panic disorder. Efficacy can be quantified as a NNTB of 7, implying that seven people need to be treated with antidepressants in order for one to benefit.

Evidently Cochrane:

Preventing type 2 diabetes in people with ‘prediabetes’: do diet and exercise work?
This recent Cochrane Review tried to clarify whether diet, physical activity or both combined can stop (or at least delay) people with prediabetes developing type 2 diabetes.

Other items of interest:

Risk thresholds for alcohol consumption: combined analysis of individual-participant data for 599 912 current drinkers in 83 prospective studies (The Lancet)
In current drinkers of alcohol in high-income countries, the threshold for lowest risk of all-cause mortality was about 100 g/week – this is less than the limits recommended by most guidelines.

Before the beginning: nutrition and lifestyle in the preconception period and its importance for future health (The Lancet)
Reviews published evidence and presents new data from low-income, middle-income, and high-income countries on the timing and importance of preconception health for subsequent maternal and child health.

Cervical dilatation over time is a poor predictor of severe adverse birth outcomes: a diagnostic accuracy study (BJOG)
Findings suggest that the assessment of cervical dilatation over time is a poor predictor of severe adverse birth outcomes. The validity of a partogram alert line based on the ‘one-centimetre per hour’ rule should be re-evaluated.

A systematic review of drug treatment of vulvodynia: evidence of a strong placebo effect (BJOG)
No medication has shown impact on vulvar pain in vulvodynia. There is evidence of a placebo effect.

The evidence for laser treatments to the vulvo-vagina: Making sure we do not repeat past mistakes (ANZJOG)
This review aims to examine the evidence for laser treatments to the vulvo-vagina and to evaluate its safety and efficacy.

Safety and efficacy of intravenous iron polymaltose, iron sucrose and ferric carboxymaltose in pregnancy: A systematic review (ANZJOG)
While IV iron in pregnancy improves haematological parameters, there is an absence of evidence for improvements in important maternal or perinatal outcomes.

**Comparison of staples vs subcuticular suture in class III obese women undergoing cesarean: a randomized controlled trial (AJOG)**

In class III obese women undergoing cesarean delivery, there was no difference in composite wound outcome up to 6 weeks postpartum between those who had staples and those who had subcuticular suture skin closure.

**Pelvic floor functional outcomes after total abdominal vs total laparoscopic hysterectomy for endometrial cancer (AJOG)**

These findings suggest that pelvic floor function in terms of urinary, bowel, and prolapse symptoms are unlikely to deteriorate following abdominal or laparoscopic hysterectomy and are reassuring for women undergoing hysterectomy for early-stage endometrial cancer.

**The effectiveness of the double B-lynch suture as a modification in the treatment of intractable postpartum haemorrhage (Journal of Obstetrics and Gynaecology)**

The double B-Lynch suture seems to be an effective, reliable and technically easy method. With this aspect, it might be considered before any aggressive surgical techniques, such as a hypogastric artery ligation and hysterectomy in selected cases.

**Maternal and perinatal outcomes by planned place of birth among women with low-risk pregnancies in high-income countries: A systematic review and meta-analysis (Midwifery)**

High-quality evidence about low-risk pregnancies indicates that place of birth had no statistically significant impact on infant mortality.

**Support for pregnant women identified with fear of childbirth (FOC)/tokophobia – A systematic review of approaches and interventions (Midwifery)**

The use of a valid assessment tool to identify the level of FOC in women, even if they do not raise the issue, is recommended in routine antenatal care.

**Evaluation of strategies designed to enhance student engagement and success of Indigenous midwifery students in an Away-From-Base Bachelor of Midwifery Program in Australia: A qualitative research study (Nurse Education Today)**

The introduction of an Indigenous Academic Liaison Midwife and an additional clinical placement in a high-volume tertiary hospital were perceived as valuable additions to the range of support mechanisms already in place for Indigenous Away-from-Base Bachelor of Midwifery students.

**The Barker hypothesis confirmed: association of low birth weight with all-cause natural deaths in young adult life in a remote Australian Aboriginal community (Journal of Developmental Origins of Health and Disease)**

Barker et al. proposed that low birth weight predisposes to higher death rates in adult life. The authors previously confirmed this fact in a cohort of young adults who were born in a remote Australian Aboriginal community between 1956 and 1985. They now present data in these same people with four more years of follow-up and a greater number of deaths.

**Online scan of FASD prevention and health promotion resources for Aboriginal and Torres Strait**
A range of high-quality, culturally appropriate resources were identified, however, health professionals attending the training workshops were not aware of their availability.

For more popular articles, see the Journal Alerts guide.