

Outcome Group Presentation:

CHORIO GROUP

I. Boucoiran,
February 19, 2021

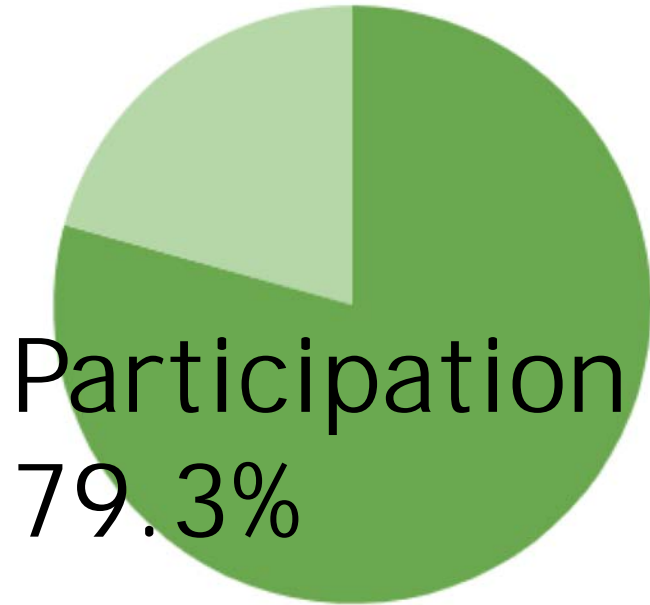
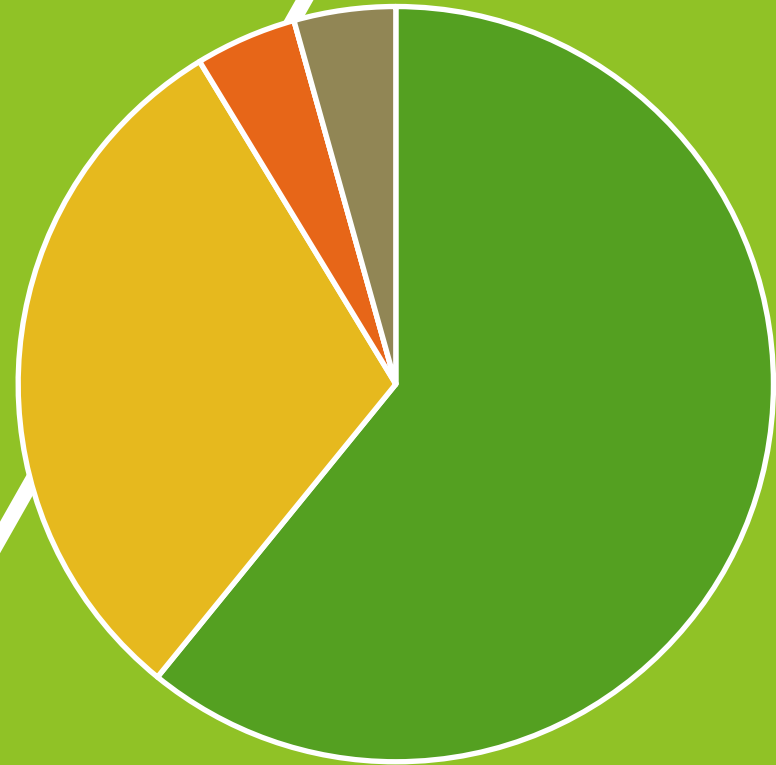


Survey

Objectives

- ▶ to describe the practices regarding chorioamnionitis

Isolated fever is an indication to start antibiotics



always Most of time sometime
rarely never don't know

QI Chorio group

Diagnosis

- ▶ Clinical diagnosis
 - ▶ Term
 - ▶ Preterm
- ▶ Laboratory diagnosis
- ▶ Histopathological diagnosis

Management

- ▶ Antipyretic
- ▶ Antibiotics
 - ▶ Which?
 - ▶ When to stop?

CHORIO CRITERIA

TERM PREGNANCIES

$T^{\circ} \geq 38.0^{\circ} \text{C}$ twice 30 min apart
Or $\geq 39^{\circ} \text{C}$ at least one^{*}

+ *One other sign*

Fetal tachycardia
>160/min for ≥ 10 min

Leukocytosis
>15,000 wbc/mm³ in absence of corticosteroids

Purulent amniotic fluid from the
cervical os

Choosing Antibiotics: 2 avenues

SYSTEMATIC REVIEW

AOGS
Acta Obstetrica et Gynecologica
Scandinavica

Determining the optimal antibiotic regimen for chorioamnionitis: A systematic review and meta-analysis

Nouf Alrowaily¹ | Rohan D'Souza^{1,2}  | Susan Dong^{2,3} | Soneya Chowdhury² |
Michelle Ryu^{4,5} | Stefania Ronzoni⁶ 

▶ Eg BC: cefazolin + metronidazole

Choosing Antibiotics: 2 avenues

ACOG GUIDELINES

- ▶ Ampicillin + Gentamicin or Tobramycin

ANTIMICROBIAL STEWARDSHIP

- ▶ Review local cases of maternal and neonatal sepsis
- ▶ Eg BC: cefazolin + metronidazole

Next steps (1)

- ▶ Each site to develop preprinted orders / clinical protocols addressing DIAGNOSIS AND TREATMENT
 - ▶ Aims:
 - ▶ decrease the treatment of isolated fever in term pregnancies
 - ▶ Stop antibiotics at delivery or after 1 dose postpartum
- ▶ Collaborations with pathologists to allow for better standardisation of histological diagnosis (eg Redline criteria)

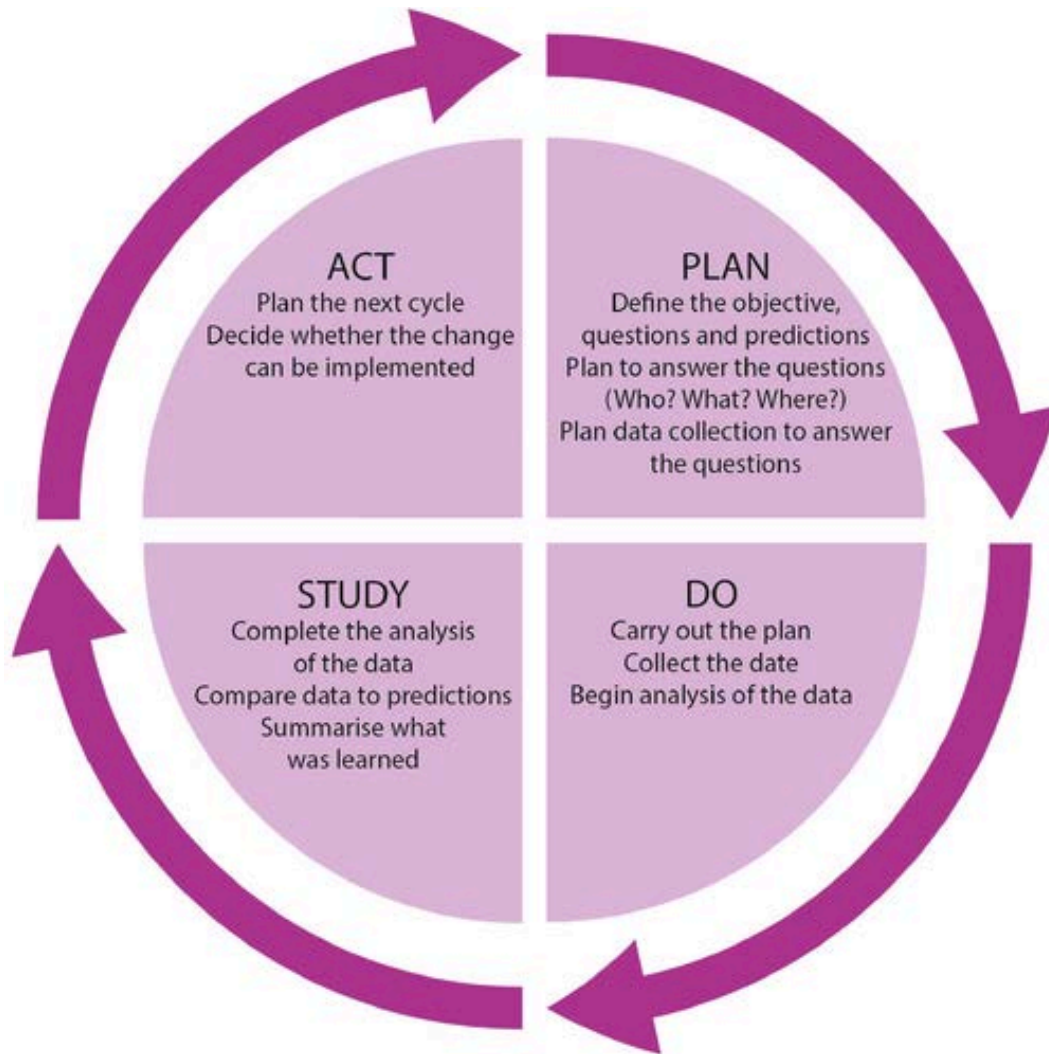
Next steps (2)

- ▶ Improve data collection +++

Babies Inborn >=2019	# of Yes	# of No	# of Not done	# of Unknown	# of Empty	% of valid results
Histological	1333	6542	4041	3009	353	51,5%
Suspected	782	10867	N/A	1452	2177	76,2%
SysAntibiotics24	9492	5264	N/A	186	336	96,6%
CervixDischarge	167	9991	N/A	5100	20	66,5%
FetalTachycardia	764	10969	N/A	3525	20	76,8%
MaternalFever	546	10995	N/A	3717	20	75,5%
Leukocytosis	1629	9053	N/A	4576	20	69,9%

- ▶ Evaluation of ACOG criteria to predict early onset neonatal sepsis among preterm births

Thank you



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