

### Comparison 3: "Strict" (or intensive) monitoring compared with "routine" monitoring with Pinard fetal stethoscope

Source: Martis R, Emilia O, Nurdianti DS, Brown J. Intermittent auscultation (IA) of fetal heart rate in labour for fetal well-being. Cochrane Database Syst Rev. 2017;(2):CD008680.

No. of studies	Study design	Quality assessment					No. of participants		Effect		Certainty (GRADE)	Importance
		Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Intensive Pinard	Routine Pinard	Relative (95% CI)	Absolute (95% CI)		
<b>Caesarean section</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	serious <sup>b</sup>	none	32/310 (10.3%)	46/315 (14.6%)	RR 0.71 (0.46 to 1.08)	42 fewer per 1000 (from 12 more to 79 fewer)	⊕⊕○○ LOW	critical
<b>Instrumental vaginal birth</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	serious <sup>b</sup>	none	25/310 (8.1%)	21/315 (6.7%)	RR 1.21 (0.69 to 2.11)	14 more per 1000 (from 21 fewer to 74 more)	⊕⊕○○ LOW	critical
<b>Caesarean section for fetal distress</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	serious <sup>b</sup>	none	13/310 (4.2%)	19/315 (6.0%)	RR 0.70 (0.35 to 1.38)	18 fewer per 1000 (from 23 more to 39 fewer)	⊕⊕○○ LOW	critical
<b>Fetal heart rate abnormality detected</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	not serious	none	47/310 (15.2%)	28/315 (8.9%)	RR 1.71 (1.10 to 2.65)	63 more per 1000 (from 9 more to 147 more)	⊕⊕⊕○ MODERATE	critical
<b>Early and late fetal heart rate decelerations detected</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	serious <sup>b</sup>	none	30/310 (9.7%)	23/315 (7.3%)	RR 1.33 (0.79 to 2.23)	24 more per 1000 (from 15 fewer to 90 more)	⊕⊕○○ LOW	critical
<b>Seizures in the neonatal period</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	very serious <sup>b,c</sup>	none	6/310 (1.9%)	9/315 (2.9%)	RR 0.68 (0.24 to 1.88)	9 fewer per 1000 (from 22 fewer to 25 more)	⊕○○○ VERY LOW	critical
<b>Hypoxic ischaemic encephalopathy</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	very serious <sup>b,c</sup>	none	7/310 (2.3%)	10/315 (3.2%)	RR 0.71 (0.27 to 1.84)	9 fewer per 1000 (from 23 fewer to 27 more)	⊕○○○ VERY LOW	critical
<b>Apgar &lt; 7 at 5 minutes after birth</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	very serious <sup>b,c</sup>	none	8/310 (2.6%)	9/315 (2.9%)	RR 0.90 (0.35 to 2.31)	3 fewer per 1000 (from 19 fewer to 37 more)	⊕○○○ VERY LOW	critical

No. of studies	Study design	Quality assessment					No. of participants		Effect		Certainty (GRADE)	Importance
		Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Intensive Pinard	Routine Pinard	Relative (95% CI)	Absolute (95% CI)		
<b>Perinatal mortality</b>												
1	RCT	not serious	not serious	serious <sup>a</sup>	very serious <sup>b,c</sup>	none	5/310 (1.6%)	9/315 (2.9%)	RR 0.56 (0.19 to 1.67)	13 fewer per 1000 (from 19 more to 23 fewer)	⊕○○○ VERY LOW	critical

CI: confidence interval; RCT: randomized controlled trial; RR: risk ratio.

<sup>a</sup> This study included high-risk pregnancies.

<sup>b</sup> Wide confidence interval crossing the line of no effect.

<sup>c</sup> Small sample size and/or few events.