## Comparison: Upright position compared with recumbent position in the second stage of labour without epidural analgesia

Source: Gupta JK, Sood A, Hofmeyr G, Vogel JP. Position in the second stage of labour for women without epidural anaesthesia. Cochrane Database Syst Rev. 2017;(5):CD002006.

Quality assessment							No. of participants		Effect			
No. of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Upright position	Recumbent position	Relative (95% CI)	Absolute (95% CI)	Certainty (GRADE)	Importance
Duration	of second	stage of labou	ır (minutes)									
19	RCTs	very serious <sup>a</sup>	serious <sup>b</sup>	not serious	not serious	none	3114	2697	-	MD 6.16 lower (9.74 lower to 2.59 lower)	⊕○○○ VERY LOW	critical
Mode of	birth – assi	isted vaginal b	oirth									
21	RCTs	serious <sup>c</sup>	not serious	not serious	not serious	publication bias strongly suspected	316/3223 (9.8%)	417/3258 (12.8%)	RR 0.75 (0.66-0.86)	32 fewer per 1000 (from 18 fewer to 44 fewer)	⊕⊕⊖⊖ LOW	critical
Mode of	birth – assi	isted vaginal b	oirth (sensitivity	analysis)								
10	RCTs	not serious	not serious	not serious	not serious	none	105/1284 (8.2%)	141/1250 (11.3%)	RR 0.71 (0.56-0.90)	33 fewer per 1000 (from 11 fewer to 50 fewer)	⊕⊕⊕⊕ HIGH	critical
Mode of	birth - cae	sarean section	1									
16	RCTs	serious <sup>c</sup>	not serious	not serious	serious <sup>d</sup>	none	52/2738 (1.9%)	39/2701 (1.4%)	RR 1.22 (0.81-1.81)	3 more per 1000 (from 3 fewer to 12 more)	⊕⊕○○ LOW	critical
Mode of	birth - cae	sarean section	ı (sensitivity an	alysis)	•			'			'	•
9	RCTs	not serious	not serious	not serious	serious <sup>b</sup>	none	37/1311 (2.8%)	21/1233 (1.7%)	RR 1.47 (0.88-2.46)	8 more per 1000 (from 2 fewer to 25 more)	⊕⊕⊕⊖ MODERATE	critical
Episiotor	ny											
17	RCTs	serious <sup>c</sup>	not serious	not serious	not serious	publication bias strongly suspected	945/3096 (30.5%)	1239/3052 (40.6%)	RR 0.75 (0.61-0.92)	101 fewer per 1000 (from 32 fewer to 158 fewer)	⊕⊕⊖⊖ LOW	critical
Second-	degree peri	ineal tears										
18	RCTs	serious <sup>c</sup>	not serious	not serious	serious <sup>d</sup>	none	504/3357 (15.0%)	428/3358 (12.7%)	RR 1.20 (1.00-1.44)	25 more per 1000 (from 0 fewer to 56 more)	⊕⊕⊖⊖ LOW	critical

	Quality assessment						No. of participants		Effect		Certainty	
No. of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Upright position	Recumbent position	Relative (95% CI)	Absolute (95% CI)	(GRADE)	Importance
Second-o	degree peri	neal tears (se	nsitivity analysi	s)								
9	RCTs	not serious	not serious	not serious	not serious	none	184/1528 (12.0%)	129/1449 (8.9%)	RR 1.35 (1.10-1.67)	31 more per 1000 (from 9 more to 60 more)	⊕⊕⊕⊕ HIGH	critical
Third- or	fourth-deg	gree tears										
6	RCTs	very serious <sup>a</sup>	not serious	not serious	very serious <sup>d,e</sup>	none	8/901 (0.9%)	12/939 (1.3%)	RR 0.72 (0.32-1.65)	4 fewer per 1000 (from 8 more to 9 fewer)	⊕○○○ VERY LOW	critical
Third- or	fourth-deg	gree tears (se	nsitivity analysi	s)								
3	RCTs	not serious	not serious	not serious	very serious <sup>d,e</sup>	none	6/434 (1.4%)	4/438 (0.9%)	RR 1.46 (0.44-4.79)	4 more per 1000 (from 5 fewer to 35 more)	⊕⊕⊖⊖ LOW	critical
Blood los	s > 500 ml	L										
15	RCTs	serious	not serious	not serious	not serious	publication bias strongly suspected	192/2790 (6.9%)	125/2825 (4.4%)	RR 1.48 (1.10-1.98)	21 more per 1000 (from 4 more to 43 more)	⊕⊕⊖⊖ LOW	critical
Blood los	s > 500 ml	L (sensitivity a	analysis)									
7	RCTs	not serious	not serious	not serious	serious <sup>b</sup>	none	85/1107 (7.7%)	45/1079 (4.2%)	RR 1.59 (0.90-2.80)	25 more per 1000 (from 4 fewer to 75 more)	⊕⊕⊕○ MODERATE	critical
Pain - pa	in in secon	d stage of lab	our (visual analo	gue scale)								
1	RCT	not serious	not serious	not serious	very serious <sup>d,e</sup>	none	77	78	-	MD 0.32 higher (0.16 lower to 0.8 higher)	⊕⊕⊖⊖ LOW	critical
Pain - pa	in in postpa	artum period	(visual analogue	scale)								
1	RCT	not serious	not serious	not serious	very serious <sup>d,e</sup>	none	77	78	-	MD 0.48 lower (1.28 lower to 0.32 higher)	⊕⊕⊖⊖ LOW	critical
Use of ar	y analgesia	a/anaesthesia	during second	stage of labou	r							
7	RCTs	very serious <sup>a</sup>	not serious	not serious	not serious	none	1034/1573 (65.7%)	1020/1520 (67.1%)	RR 0.97 (0.93-1.02)	20 fewer per 1000 (from 13 more to 47 fewer)	⊕⊕⊖⊖ LOW	critical
Abnorma	al fetal hear	rt rate pattern	ıs									
2	RCTs	serious <sup>c</sup>	not serious	not serious	not serious	none	10/307 (3.3%)	22/310 (7.1%)	RR 0.46 (0.22-0.93)	38 fewer per 1000 (from 5 fewer to 55 fewer)	⊕⊕⊕○ MODERATE	critical

Quality assessment							No. of participants		Effect		Containtu	
No. of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Upright position	Recumbent position	Relative (95% CI)	Absolute (95% CI)	Certainty (GRADE)	Importance
Perinatal	Perinatal death											
4	RCTs	serious <sup>c</sup>	not serious	not serious	very serious <sup>d,e</sup>	none	3/495 (0.6%)	4/487 (0.8%)	RR 0.75 (0.17-3.31)	2 fewer per 1000 (from 7 fewer to 19 more)	⊕○○○ VERY LOW	critical

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

- a Most of the pooled effect derived from studies with a moderate or high risk of bias but with a substantial proportion (i.e. > 50%) from studies with a high risk of bias.
- b Severe unexplained heterogeneity.
- 6 Most of the pooled effect derived from studies with a moderate or high risk of bias but without a substantial proportion (i.e. with < 50%) from studies with a high risk of bias.
- d Wide confidence interval crossing the line of no effect.
- e Small sample size and/or few events.