

GRADE tables for review question: What is the optimum position for the baby during delayed cord clamping (including after instrumental and caesarean birth)?

Table 4: Evidence profile for comparison 1: Placing the baby at the mother's abdomen versus holding the baby below the vaginal level

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Mother's abdomen level	Below vaginal level	Relative (95% CI)	Absolute		
Jaundice requiring phototherapy												
2 (Jain 2020, Mansaray 2015)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	very serious ²	none	6/124 (4.8%)	3/128 (2.3%)	RR 2.03 (0.52 to 7.93)	24 more per 1000 (from 11 fewer to 162 more)	VERY LOW	CRITICAL
Jaundice requiring transfusion												
1 (Mansaray 2015)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	very serious ³	none	0/27 (0%)	0/26 (0%)	RD 0.00 (-0.07 to 0.07)	0 per 1000 (from 70 fewer to 70 more)	VERY LOW	CRITICAL
Infant Haemoglobin at 3-4 months (Better indicated by higher values)												
1 (Jain 2020)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	serious ⁴	none	97	102	-	MD 0.3 lower (0.58 to 0.02 lower)	LOW	CRITICAL
Fall in Haemoglobin from birth to 3-4 months (Better indicated by lower values)												
1 (Jain 2020)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	serious ⁵	none	97	102	-	MD 0.2 higher (0.05 lower to 0.45 higher)	LOW	CRITICAL
Apgar score at 5 minutes (Better indicated by higher values)												
1 (Mansaray 2015)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	27	26	-	MD 0 higher (0.03 lower to 0.03 higher)	MODERATE	CRITICAL
Exclusive breastfeeding at 3-4 months												
1 (Jain 2020)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	89/97 (91.8%)	95/102 (93.1%)	RR 0.99 (0.91 to 1.07)	9 fewer per 1000 (from 84 fewer to 65 more)	MODERATE	IMPORTANT
NICU admission												
2 (Jain 2020, Mansaray 2015)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	very serious ²	none	3/124 (2.4%)	4/128 (3.1%)	RR 0.77 (0.20 to 3.03)	7 fewer per 1000 (from 25 fewer to 63 more)	VERY LOW	IMPORTANT

¹ Serious risk of bias in the evidence contributing to the outcomes as per RoB 2

² 95% CI crosses 2 MIDs

³ Sample size <200

⁴ 95% CI crosses 1 MID (0.5x control group SD for 'outcome Infant haemoglobin at 3-4 months' = 0.55)

⁵ 95% CI crosses 1 MID (0.5x control group SD for 'outcome Fall in infant haemoglobin from 3-4 months' = 0.45)

Table 5: Evidence profile for comparison 2: Placing the baby on the mothers' abdomen or chest versus holding the baby at the vaginal level

Quality assessment							No of patients		Effect		Quality	Importance
No of studies	Design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Mother's abdomen or chest	Vaginal level	Relative (95% CI)	Absolute		
Bilirubin concentration at 36-48 hours (Better indicated by lower values)												
1 (Vain 2014)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	194	197	-	MD 0.3 higher (0.29 lower to 0.89 higher)	MODERATE	CRITICAL
Appgar score at 5 minutes (Better indicated by lower values)												
1 (Vain 2014)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	no serious imprecision	none	194	197	-	MD 0.1 lower (0.2 lower to 0 higher)	MODERATE	CRITICAL
NICU admission												
1 (Vain 2014)	randomised trials	serious ¹	no serious inconsistency	no serious indirectness	very serious ²	none	1/197 (0.51%)	1/194 (0.52%)	RR 0.98 (0.06 to 15.63)	0 fewer per 1000 (from 5 fewer to 75 more)	VERY LOW	IMPORTANT

¹ Serious risk of bias in the evidence contributing to the outcomes as per RoB 2

² 95% CI crosses 2 MIDs