

Trust Headquarters
Russell's Hall Hospital
Dudley
West Midlands
DY1 2HQ

Ref: FOI-072023-000203

Date:

Address / Email:

Dear

Request Under Freedom of Information Act 2000

Thank you for requesting information under the Freedom of Information Act 2000.

Please find attached a the completed documentation that was requested regarding the **Nausea and vomiting in pregnancy (NVP)/Hyperemesis Gravidarum (HG): a survey of UK practice.**

If you are dissatisfied with our response, you have the right to appeal in line with guidance from the Information Commissioner. In the first instance you may contact the Information Governance Manager of the Trust.

Information Governance Manager
Trust Headquarters
Russell's Hall Hospital
Dudley
West Midlands
DY1 2HQ
Email: dgft.dpo@nhs.net

Should you disagree with the contents of our response to your appeal, you have the right to appeal to the Information Commissioners Office at.

Information Commissioners Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF
Tel: 0303 123 1113
www.ico.org.uk

If you require further clarification, please do not hesitate to contact us.

Yours sincerely

Freedom of Information Team
The Dudley Group NHS Foundation Trust

000203

Nausea and vomiting in pregnancy (NVP)/Hyperemesis Gravidarum (HG): a survey of UK practice

Hospital name: Russells Hall Hospital

Trust: The Dudley Group NHS Foundation Trust

Maternal medicine network (if known):

Details of hyperemesis service		Response
Are your patients routinely offered screening for NVP/HG at their booking visit?	Yes	No
	No	
Do you offer community care for women with NVP/HG? (e.g. in a community day centre or at home)	Yes – in a community day centre	
	Yes – at home	
	Previously, in a community day centre - before COVID-19 (but not now)	
	Previously, at home – before COVID-19 (but not now)	
	No	No
Do you offer ambulatory management for women with NVP/HG?	Yes*	Yes
	Yes, before COVID-19 (but not now)	
	No	
*If Yes, where?	Early pregnancy unit	
	Emergency department	
	Acute medical unit	
	Gynaecology ward	yes
	Obstetric Unit	
	Other (please specify)	
If admitted to hospital in which locations are NVP/HG managed?	Gynaecology ward throughout entire gestation	
	Obstetric ward throughout entire gestation	
	Medical ward throughout entire gestation	
	Under the care of obstetric medicine team	
	Different setting depending on gestation (please specify e.g. gynaecology ward <18 weeks, obstetric ward >18 weeks gestation)	<16weeks to gynae beds and >16 weeks to antenatal ward
Which of the following criteria do you use for admission for inpatient management? Select all that apply.	Continued nausea and vomiting, inability to keep down oral antiemetics	Yes
	Continued nausea and vomiting associated with weight loss despite oral antiemetics	Yes
	Ketonuria	Yes

	Confirmed/suspected comorbidity (e.g. urinary tract infection)	No, unless this requires inpatient treatment
	Other, please specify:	

Assessment and management						
Which drugs/therapies are routinely recommended by your service?						
Please enter X in column:						
Therapy	As 1 st line medication	As 2 nd line medication	As 3 rd line medication	Only after 1 st trimester	For a maximum of 5 days	As required (PRN)
Ginger						
Acustimulations						
Hypnosis						
Ondansetron		X			X	X
Cyclizine	X				X	X
Domperidone						
Prochlorperazine		X			X	X
Promethazine						
Chlorpromazine						
Metoclopramide			X		X	X
Thiamine	X					
Pyridoxine	X					
Corticosteroids			X			
Diazepam						
Proton pump inhibitor						X
		Yes (please specify)				

Do you require patients to sign a risk form when prescribed any of the above?	No	No
Which IV rehydration do you routinely offer? Please select all:	0.9% Normal saline	
	Hartmann's solution	Yes
	Dextrose	
Do you offer enteral or parenteral nutrition for patients resistant to treatment?	Yes	
	No	No
Are patients routinely offered a mental health screen?	Yes	
	No	No

Pre-pregnancy counselling		Response
Does your unit offer pre-pregnancy counselling for women with a history of severe NVP/HG?	Yes	
	No	No
Do you have any further comments regarding management of NVP/HG patients in your trust?		
I think overall we have a set up that gynaecology does not have a ward and patients are scattered everywhere being looked after by nursing staff of variable experience makes ambulatory care difficult and they are not given the support as the gynae ward/staff can provide this causes delays and complaints.		