A prognostic model to guide decision-making on timing of delivery in late preterm pre-eclampsia: the PEACOCK prospective cohort study

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Plain English summary

The PEACOCK prospective cohort study

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Plain English summary

Why did we do this study?

Pre-eclampsia is a condition occurring in pregnancy. The condition can affect the health of the woman and the baby, often affecting the woman's kidneys and liver and the baby's growth. In severe cases, babies can be stillborn. Once pre-eclampsia is diagnosed, the only cure is to deliver the baby. It is often not possible to identify women and babies at high risk of the severe complications of pre-eclampsia who would benefit from early delivery. We wanted to see if we could improve the way that women with pre-eclampsia are assessed to work out who needs to be delivered early to prevent complications.

What did we do?

A total of 501 women affected by pre-eclampsia took part in our study and we measured substances in their blood. We used these results, along with other clinical measures, to see if we could improve the way that we try and tell which women need delivery soon.

What did we find?

The blood markers were not able to tell us which women needed delivery within 7 days, and they were not able to improve our detection rate of women who need delivery to prevent complications.

What does this mean for women with pre-eclampsia?

These methods cannot be recommended to plan care for women and babies affected by pre-eclampsia between 34 and 37 weeks' gestation to help tell us when the baby should be born. We need to find better tests to help find out which women and babies are most at risk of the complications of pre-eclampsia.

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This report

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