

CADTH RAPID RESPONSE REPORT: SUMMARY OF ABSTRACTS

Fall Risk Assessment Tools in Obstetric Populations: Clinical Utility and Guidelines

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Research Questions

- 1. What is the clinical utility of fall risk assessment tools in obstetric populations?
- 2. What are the evidence-based guidelines regarding the use of fall risk assessment tools in obstetric populations?

Key Findings

No relevant literature was identified regarding the clinical utility of fall risk assessment tools in obstetric populations. No evidence-based guidelines were identified regarding the use of fall risk assessment tools in obstetric populations.

Methods

A limited literature search was conducted by an information specialist on key resources including PubMed, the Cochrane Library, the University of York Centre for Reviews and Dissemination (CRD) databases, the websites of Canadian and major international health technology agencies, as well as a focused Internet search. The search strategy was comprised of both controlled vocabulary, such as the National Library of Medicine's MeSH (Medical Subject Headings), and keywords. The main search concepts were pregnancy and accidental falls. No filters were applied to limit the retrieval by study type. The search was also limited to English language documents published between January 1, 2014 and December 10, 2019. Internet links were provided, where available.

Selection Criteria

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria

Population	Obstetric populations (pre-delivery and post-delivery)
Intervention	Fall risk assessment tools (e.g., the Obstetric Falls Risk Assessment System, Fall Risk Assessment for Perinatal Patients)
Comparator	Q1: Other fall risk assessment tools; no screening for risk of falling Q2: No comparator required
Outcomes	Q1: Clinical utility (e.g., predictive accuracy, relative risk of falling) Q2: Evidence-based guidelines
Study Designs	Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, and evidence-based guidelines



Results

No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, and non-randomized studies were identified regarding the clinical utility of fall risk assessment tools in obstetric populations. No evidence-based guidelines were identified regarding the use of fall risk assessment tools in obstetric populations.

Additional references of potential interest are provided in the appendix.

Overall Summary of Findings

No relevant literature was identified regarding the clinical utility of fall risk assessment tools in obstetric populations. No evidence-based guidelines were identified regarding the use of fall risk assessment tools in obstetric populations. Therefore, no summary can be provided.

References Summarized

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-analyses

No literature identified.

Randomized Controlled Trials

No literature identified.

Non-Randomized Studies

No literature identified.

Guidelines and Recommendations

No literature identified.



Appendix — Further Information

Non-Randomized Studies

Alternative Intervention

 Danna-Dos-Santos A, Magalhaes AT, Silva BA, et al. Upright balance control strategies during pregnancy. *Gait Posture*. 2018 Oct;66:7-12. PubMed: PM30134216

No Comparator

- Inanir A, Cakmak B, Hisim Y, Demirturk F. Evaluation of postural equilibrium and fall risk during pregnancy. *Gait Posture*. 2014 Apr;39(4):1122-1125.
 <u>PubMed: PM24630464</u>
- Thompson K, Haddad L, Smith S. Reliability and validity of the postepidural fall risk assessment score. *J Nurs Care Qual.* 2014 Jul-Sep;29(3):263-268.
 PubMed: PM24375109

Clinical Practice Guidelines

 Alberta Health Services. Maternal and infant fall prevention and management [guideline]. Edmonton (AB): Alberta Health Services; 2019 Oct: https://extranet.ahsnet.ca/teams/policydocuments/1/clp-maternal-infant-fall-prevention-management-ps-96-01-guideline.pdf

See: 1.4 - Points of Emphasis (p.2) Accessed 2019 Dec 17.

 Leitch D, Maternal Newborn Child & Youth Strategic Clinical Network™. Alberta pregnancy pathways. V4.1; Edmonton (AB): Alberta Health Services; 2019 Mar: https://www.albertahealthservices.ca/assets/about/scn/ahs-scn-mncy-pp-nb-pathway.pdf

See: Physiological Health: Activities/Rest (p.33) Accessed 2019 Dec 17.

Farrell V. Falls: risk assessment and management of patient falls [clinical practice guideline]. Perth, Australia: King Edward Memorial Hospital (Obstetrics and Gynaecology); Government of Western Australia, Northern Health Service. 2018 Feb; https://www.kemh.health.wa.gov.au/~/media/Files/Hospitals/WNHS/For%20health%20 professionals/Clinical%20guidelines/OG/WNHS.OG.FallsRisksPreventionManagement.pdf

See: Procedure for falls risk management at KEMH (p.3) Accessed 2019 Dec 17.



Additional References

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- Gaffey AD. Fall prevention in our healthiest patients: assessing risk and preventing injury for moms and babies. *J Healthc Risk Manag*. 2015;34(3):37-40.
 PubMed: PM25630284