

## Learning Notice: 03/18

### CORRECTION OF:

Royal College of Physicians of Ireland GUIDELINE NO.4: THE INVESTIGATION AND MANAGEMENT OF LATE FETAL INTRA-UTERINE DEATH AND STILLBIRTH (October 2011) available at: <https://www.hse.ie/eng/services/publications/clinical-strategy-and-programmes/late-fetal-intrauterine-death-and-stillbirth.pdf>

Circulation date: 22<sup>nd</sup> February 2018

**Actions required By Whom:** Hospital Group CEOs, Hospital CEOs and Managers, Clinical Directors, Obstetric & Gynaecology Clinicians in all Directorates and Maternity Hospitals and Maternity Units, and Directors of Nursing and Midwifery.

**By When:** For **IMMEDIATE ACTION** in Maternity Hospitals and Acute Hospitals with Maternity Units/Services. Implementation should be kept under **REVIEW** as part of the Hospital/ maternity service's quality and safety structures and to ensure that this is brought to the attention of all the relevant staff.

### Learning:

The National Women & Infants Health Programme has been informed that the R.C.P.I. Clinical Practice Guideline No. 4 on ***The Investigation and Management of late Foetal Intra-Uterine Death and Stillbirth*** (October 2011) contains an error. This is on page 31 and states "*If suppression is necessary, dopamine agonists are 1st line agents to suppress lactation. Cabergoline is superior to bromocriptine (Cabergoline 1mg od for 14 days).*" This in fact should be **1mg as a once off dose**. An acceptable alternative to using the drug is not to suppress lactation pharmacologically.