

## MATERNAL DIET SYNTHESIS

Research Gaps from Cochrane Reviews (Cochrane Library Issue 3, 2006)

The faces indicate the direction of findings in each review:

- ☺ **Likely to be effective**
- ☹ **Both benefits and risks**
- ❓ **Uncertain or limited effect**
- ☹ **Likely to be ineffective or potentially harmful**

*Important research implications are more likely to arise from reviews with uncertain findings or where the benefits and risks are mixed*

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### DURING PREGNANCY

- ☹ **Dietary advice can increase pregnant women's energy and protein intakes but is unlikely to significantly benefit infant or maternal health (Kramer 2003)**  
The modest benefits indicate that nutritional advice in this area is not an important topic for further research
- ☺ **Balanced energy/protein supplementation improves fetal growth and may reduce the risk of fetal and neonatal death (Kramer 2003)**
  - Future energy/protein supplementation trials should focus on confirming the evidence of reduced risk of stillbirth and neonatal death
  - Any future trials should also assess the effects on women, including duration of labour, caesarean section, and postpartum weight retention
- ☹ **High-protein or balanced protein supplementation alone is not beneficial and may be harmful to the infant (Kramer 2003)**  
Future trials of high protein supplementation or isocaloric protein supplementation during pregnancy are not indicated
- ☹ **Protein/energy restriction of pregnant women who are overweight or exhibit high weight gain is unlikely to be beneficial and may be harmful to the infant (Kramer 2003)**  
Future trials of protein/energy restriction during pregnancy are not indicated
- ❓ **Low salt diet during pregnancy unlikely to prevent pre-eclampsia (Duley 2005)**  
Future trials not seen as a priority
- ❓ **Advice to lower dietary salt during pregnancy unlikely to prevent pre-eclampsia (Duley 1999)**  
Future trials not seen as a priority
- ☺ **Fibre supplements to relieve constipation in pregnancy (Jewell 2001)**  
Need to compare daily fibre supplements with common treatments such as increased exercise

**? Antigen avoidance diet during pregnancy for preventing atopic disease in the child (Kramer 2006)**

- Need larger trials with longer follow-up with more information on potential adverse effects
- Need more information on women's experiences and adherence with diet

**? Maternal hydration for increasing amniotic fluid volume (Hofmeyr 2002)**

- Investigating potential benefits and harms of maternal hydration for oligohydramnios is worthwhile
  - Use of maternal hydration prior to external cephalic version at term is worth investigating
  - Need to investigate the possible negative effect of starvation (and decreased water intake) during labour on amniotic fluid level
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## **DURING LABOUR**

**? Restricting oral fluid and food intake during labour (Singata 2002)**

- Cochrane protocol
- Cochrane review in progress

**? Hydration (oral or intravenous) in preterm labour for preventing preterm birth (Stan 2002)**

- Sample sizes of the included trials were too small to assess substantive outcomes such as perinatal mortality and morbidity
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## **POSTPARTUM**

**? Diet, exercise or both for postpartum weight loss (Amorim 2006)**

- Cochrane protocol
- Cochrane review in progress

**? Antigen avoidance diet during lactation for preventing/treating atopic disease in the child (Kramer 2006)**

- Need larger trials with longer follow-up with more information on potential adverse effects
  - Need more information on women's experiences and adherence with diet
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