

Women and Children's

Current Awareness Bulletin

January 2026

Our Current Awareness Bulletins provide details of recently published articles in a given subject. They are a quick and easy way to keep up to date.

Please contact the Academy Library to request any articles:

 ruh-tr.library@nhs.net

 01225 82 4897/4898



Carry out basic searches using the Knowledge and Library Hub.



Sign up to NHS OpenAthens to access our subscriptions.



Contact us to receive our bulletins via email each month.



Get personalised alerts via our KnowledgeShare service.

ruh.nhs.uk/library

New training via MS Teams available from the Academy Library:

- **Bitesize searching databases for evidence: a quick guide to help you develop your literature searching skills**
45 minutes. Learn how to transform a question into a search strategy, and how to find the best evidence in a database.
Next sessions: 22nd January 2026 @ 2pm and 13th February 2026 @ 3pm
- **Simple and painless evidence into practice (BMJ Best Practice and the LKS Hub)**
30 minutes. Learn about quick and hassle-free ways to seamlessly incorporate evidence into your daily work.
Next sessions: 16th January 2026 @ 10am and 2nd February 2026 @ 11am
- **Quickfire health literacy: communicating with patients more effectively**
30 minutes. Learn about the communication barriers patients may encounter, and ways to ensure they get the most from their care.
Next sessions: 7th January 2026 @ 2pm and 19th February 2026 @ 3pm

Book a session today at <https://forms.office.com/e/HyiSXfDaYV> (these sessions will be held on a monthly basis)

1. Preoperative sleep quality and anxiety as predictors of postoperative pain and recovery in Gynecologic oncology surgery: A prospective observational study

Authors: Akdemir, Celal;Turan, Suna A. şkın;Balcı, Mücahit Furkan;Özen, Süleyman;Şeker, Nefise;Bayramoğlu, Denizhan;Bayramoğlu, Zeynep and Sancı, Muzaffer

Publication Date: 2026

Journal: Journal of Psychosomatic Research

Abstract: Purpose: This study evaluated associations between preoperative sleep quality, anxiety, and short-term postoperative outcomes in patients undergoing gynecologic oncology surgery.; Methods: This prospective observational study included 72 women undergoing open gynecologic cancer surgery. Preoperative sleep quality and anxiety were assessed 24-48 h before surgery using the Pittsburgh Sleep Quality Index (PSQI) and the Beck Anxiety Inventory (BAI). Postoperative pain was measured using the Numerical Rating Scale (NRS) at 0, 4, 8, 12, and 24 h. Complications, rescue analgesia use, and length of stay were recorded.; Results: Poor sleep quality (%31.9) and clinically significant anxiety (%19.4) were both associated with higher mean postoperative pain scores (PSQI ≥ 5 : 6.3 ± 1.2 vs 5.1 ± 1.3 , $p = 0.002$; BAI ≥ 16 : 6.5 ± 1.1 vs 5.2 ± 1.4 , $p = 0.001$). In adjusted analyses, higher PSQI ($\beta = 0.112$, 95 % CI 0.039-0.185, $p = 0.003$) and higher BAI scores ($\beta = 0.044$, 95 % CI 0.023-0.065, $p < 0.001$) remained significantly associated with increased mean pain. Poor sleep quality was also linked to longer hospitalization (4 vs 3 days, $p < 0.001$) and higher complication rates (%52.2 vs %12.2, $p < 0.001$). Elevated anxiety was similarly associated

with higher complication rates (%57.1 vs %17.2, $p = 0.004$) and more frequent rescue analgesia use (%64.3 vs %29.3, $p = 0.014$).; Conclusion: Preoperative sleep disturbances and anxiety are significantly associated with worse postoperative pain, higher complication rates, and prolonged recovery; routine screening and targeted interventions may therefore improve surgical outcomes.; Trial Registration: The study was retrospectively registered at ClinicalTrials.gov (Identifier: NCT07036549) on June 24, 2025. (Copyright © 2024. Published by Elsevier Inc.)

2. Recent advances and future directions in gynecologic radiation oncology

Authors: Ariani, Rojine T. and Venkat, Puja S.

Publication Date: 2026

Journal: Current Opinion in Obstetrics & Gynecology

3. Obstetrics and Gynecology Resident Comfort in Caring for Pregnant People with Physical Disabilities

Authors: Carlson, Susan;Aitelli, Audrey;Dotters-Katz, Sarah and Kalpakjian, Claire

Publication Date: 2026

Journal: American Journal of Perinatology

Abstract: Objective: Pregnant people with disabilities face higher complication rates, yet few guidelines exist on caring for this population. This study evaluates obstetrics and gynecology (OBGYN) residents' comfort in caring for pregnant people with physical disabilities. Study Design: A 19-question e-survey was developed and piloted for content and face validation. Likert scale was used to assess comfort in caring for pregnant patients with physical disabilities. The e-survey was sent to U.S. OBGYN residents via CREOG-coordinator listserv, a listserv to all U.S. OBGYN residency coordinators, in February 2024, with three reminder emails. Descriptive statistics were used to analyze the data, and variables with clinical and statistical significance were considered for adjustment in regression models. Results: Eighty-eight residents completed the survey. The mean age was 29 years; 88% identified as female. All ACOG regions were represented. Eight and 44% reported formal education on disability care in residency and medical school, respectively. Seventy-three percent felt uncomfortable positioning disabled patients for a pelvic examination, 59% felt uncomfortable discussing sexual health practices, and 89% felt uncomfortable making recommendations regarding the mode of delivery. Those without education in residency were 91% less likely to be comfortable making recommendations regarding the mode of delivery (absolute risk reduction aRR]: 0.09; 95% confidence interval CI]: 0.01 and 0.59). Only 30% were comfortable discussing lactation/breastfeeding with patients with physical disabilities; residents without personal experience including caring for family members or friends or other caretaking experiences were 66% less likely to be comfortable (aRR: 0.34; 95% CI: 0.12 and 0.99). A total of 92.5% of residents wanted more education in this space. Of those 83, 71, and 82% desired didactics,

patient panels, and simulations, respectively. Conclusion: Among responding residents, comfort in caring for pregnant people with physical disabilities is low. Additional training is necessary to adequately care for this population. Key Points: OBGYN resident comfort with disability care is low. Few residents receive formal disability training. Formal education improves disability care comfort.

4. Using artificial intelligence as a technological tool in gynecologic and obstetric health: A narrative literature review

Authors: Dos Santos, Gustavo Gonçalves

Publication Date: 2026

Journal: International Journal of Gynaecology and Obstetrics: The Official Organ of the International Federation of Gynaecology and Obstetrics

Abstract: Maternal mortality remains a critical global public health issue, particularly in low- and middle-income settings where failures in surveillance, early diagnosis, and clinical decision making compromise obstetric care. In this context, the present study aimed to critically review the scientific literature on the use of artificial intelligence (AI) in gynecologic and obstetric health, focusing on the prevention of avoidable deaths and severe maternal events. This is a narrative literature review with a qualitative and exploratory-interpretative approach, conducted between May and June 2025 in relevant electronic databases, following structured axes for narrative reviews and well-defined eligibility criteria. A total of 403 records were identified, of which 17 studies met the criteria and were included in the analysis, supported by the Interface de R pour les Analyses Multidimensionnelles de Textes et de Questionnaires software. The results showed that AI has been used to predict obstetric risks such as pre-eclampsia, postpartum hemorrhage, and preterm birth through machine learning algorithms, neural networks and predictive models based on electronic health records and laboratory tests. Tools such as clinical decision support systems, portable devices, and mobile applications have also optimized care, particularly in regions with limited infrastructure. However, challenges remain concerning the validation of algorithms across diverse populations, the inclusion of sociodemographic variables, and ethical considerations. In conclusion, AI is a promising technology in obstetric care, with the potential to reduce maternal morbidity and mortality. Nevertheless, its implementation requires ethical guidelines, adequate professional training, and inclusive public policies that promote digital equity in maternal and child healthcare. (© 2025 The Author(s). International Journal of Gynecology & Obstetrics published by John Wiley & Sons Ltd on behalf of International Federation of Gynecology and Obstetrics.)

5. Nursing Approach and Interventions to Prevent Nutritional Deficiencies in Paediatric Oncology: a Scoping Review

Authors: Endal, Håkon;Danielsen, Inger J. and Landsem, Inger P.

Publication Date: 2026

Journal: International Journal of Nursing Practice

Abstract: Aim: This review aimed to describe how nursing care is reported to prevent nutritional deficiencies in paediatric oncology care.; Background: Paediatric oncology patients are at risk of nutritional deficits due to several factors, such as the treatment, side effects, family situation, and well-being.; Methods: This review followed JBI methodology for scoping reviews and reported in line with the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR). Searches were conducted using the databases PubMed, EMBASE and CINAHL. The analysis was conducted according to deductive content methodology. Findings were categorised using an existing model for causes of nutritional deficit in paediatric oncology care.; Results: The search identified 1736 published articles, and 32 were included. Nurses can reduce nutritional deficits by conducting symptom assessment and screening, educating the family, planning, documenting, coordinating care, building a positive environment and helping the child to cope through playfulness.; Conclusions: Nutritional nursing care in paediatric oncology is complex and multifaceted. Several aspects must be considered to prevent nutritional deficits in paediatric cancer care. Nurses' approach and interventions in nutritional care in paediatric oncology involve a plethora of skills and knowledge, from assessment of symptoms to administration of drugs to patient and family collaboration and customised care. (© 2025 John Wiley & Sons Australia, Ltd.)

6. The emerging role of cholesterol metabolism in gynecologic cancer development and therapy

Authors: Liu, Hejing;Zhou, Yujia;Zhang, Jiamin;Miao, Liqing;Wu, Qianqian;Zhu, He;Pan, Shuya and Zhu, Xueqiong

Publication Date: 2026

Journal: Apoptosis : An International Journal on Programmed Cell Death

Abstract: The significance of cholesterol metabolism in cancer is a topic of renewed interest. Cholesterol is an essential factor for mammal cells, for it is not only involved in constituting the cell membrane, but also serves as a precursor to steroid hormones and bile acids. Numerous studies have provided increasing evidence of its high relevance to cancer progression. Targeting cholesterol metabolism by using cholesterol metabolism inhibitors has offered another therapeutic strategy for reversing drug resistance in tumors. Here, the regulatory process of cholesterol homeostasis under normal physiological conditions was introduced. Then, the mechanism by which cholesterol metabolism disorder caused gynecologic cancer development and therapy resistance was summarized. Finally, the therapeutic strategies

7. What do we know about sleep? A review of the literature on sleep disorders and mental health problems in children

Authors: Orska, Aleksandra;Jowik-Krzemińska, Katarzyna;Konecki, Mateusz and Tyszkiewicz-Nwafor, Marta

Publication Date: 2026

Journal: Psychiatry Research

Abstract: Sleep problems are one of the key, but insufficiently addressed, health issues in children and adolescents. 40-50 % of youth are thought to be impacted by them. This review examines the connections between sleep disorders (SD) and mental health conditions such as anxiety disorders, bipolar disorder, depression, ADHD, and eating disorders, such as anorexia nervosa, bulimia nervosa, binge eating disorder, night eating disorder, and aversive-restrictive food intake disorder, revealing the interrelationships between these phenomena. Various SDs, such as insomnia, obstructive sleep apnea, circadian rhythm disorders, and chronotype, are investigated. SD can be correlated with and caused by the development of mental health disorders, as well as be a direct consequence or exacerbating factor. During adolescence, sleep disruption exacerbates heterogeneously the susceptibility to disordered mental health. It hinders its treatment, leading to chronic symptoms and a significant deterioration in quality of life, creating a vicious cycle. We explore and attempt to integrate the neurobiological pathophysiology of disorders and their connections to sociobehavioral concepts of psychopathology in this article. This comprehensive review provides an overview of the most recent findings on SD, with emphasis on how they affect mental health in childhood and adolescence. Additionally, it highlights the use of pharmacological and behavioral approaches to the treatment of insomnia, with and without comorbidities. The study aims to encourage clinicians to broaden their awareness of the interdisciplinary nature of sleep and mental health, which is essential to the care of young patients. (Copyright © 2025. Published by Elsevier B.V.)

8. Updates in palliative care of patients with gynecologic malignancies in 2026: early integration, resource models, and emerging therapies

Authors: Pietras, Christopher;Khoo, Teresa and Karlin, Daniel

Publication Date: 2026

Journal: Current Opinion in Obstetrics & Gynecology

9. Fetal monitoring in labour (NICE guideline:NG229)

Author: National Institute for Health and Care Excellence (NICE)

Publication Date: 2025

This guideline covers methods for monitoring the wellbeing of the baby during labour. It includes risk assessment to determine the appropriate level of fetal monitoring, using clinical assessment in addition to fetal monitoring, and interpreting and acting on monitoring findings.

10. Intrapartum care (NICE guideline: NG235)

Author: National Institute for Health and Care Excellence (NICE)

Publication Date: 2025

This guideline covers the care of pregnant women and pregnant trans and non-binary people and their babies during labour and immediately after birth. It focuses on women and pregnant people who give birth between 37 and 42 weeks of pregnancy ('term'). The guideline helps women and pregnant people to make informed choices about where to have their baby and about their care in labour. It also aims to reduce variation in aspects of care.

11. Suspected sepsis in pregnant or recently pregnant people: recognition, diagnosis and early management (Nice guideline: NG255)

Author: National Institute for Health and Care Excellence (NICE)

Publication Date: 2025

This guideline covers the recognition, diagnosis and early management of suspected sepsis in pregnant or recently pregnant people. It includes recommendations on recognition and early assessment, initial treatment, escalating care, finding and controlling the source of infection, early monitoring, information and support, and training and education.

12. Suspected sepsis in under 16s: recognition, diagnosis and early management (Nice guideline: NG254)

Author: National Institute for Health and Care Excellence (NICE)

Publication Date: 2025

This guideline covers the recognition, diagnosis and early management of suspected sepsis in under 16s (not pregnant or recently pregnant). It includes recommendations on recognition and early assessment, initial treatment, escalating care, finding and controlling the source of infection, early monitoring, information and support, and training and education.

13. Child maltreatment: when to suspect maltreatment in under 18s (Nice guideline: CG89)

Author: National Institute for Health and Care Excellence (NICE)

Publication Date: 2025

This guideline covers the signs of possible child maltreatment in children and young people aged under 18 years. It aims to raise awareness and help healthcare professionals who are not child protection specialists to identify the features of physical, sexual and emotional abuse, neglect and fabricated or induced illness.

14. 2025 ESC Guidelines for the management of cardiovascular disease and pregnancy

Authors: De Backer J et al.

Publication Date: 2025

Journal: European heart journal

15. FIGO good practice recommendations on preconception care: A strategy to prevent preterm birth

Authors: Ojeda LI et al.

Publication Date: 2025

Journal: International journal of gynaecology and obstetrics: the official organ of the International Federation of Gynaecology and Obstetrics

Preterm birth (PTB) remains one of the leading causes of neonatal mortality and long-term morbidity worldwide, with minimal progress being made in reducing its incidence, particularly in low-resource settings. Preconception care is recognized as an effective strategy for PTB prevention; however, the fact that more than half of pregnancies globally are unplanned significantly limits opportunities for successful intervention. These FIGO good practice recommendations advocate shifting from pregnancy-centered care to woman-centered care and promote the integration of a baby-centered assessment into preconception care. This approach allows for the early identification and management of modifiable risk factors for PTB across various domains, including medical, obstetric, nutritional, infectious, psychological, and socio-environmental factors. The review emphasizes the importance of evidence-based interventions during the preconception period and underscores the need for policy and advocacy initiatives to promote equitable access to preconception services.

16. Guideline No. 465: Obstetrical Anal Sphincter Injuries (OASIs) Part II: Long-Term Management and Counselling Regarding Subsequent mode of delivery

Authors: Giroux M et al.

Publication Date: 2026

Journal: Journal of obstetrics and gynaecology Canada (JOGC)

The purpose of this guideline is to provide recommendations regarding long-term management for women with obstetric anal sphincter injuries (OASIs) and to describe the role of dedicated clinics. This guideline also presents key components and new algorithms for counselling and shared decision-making regarding subsequent mode of delivery post-OASIs.

17. Independent Investigation into Maternity and Neonatal Services in England – Reflections and Initial Impressions

Author: Baroness Valerie Amos

Publication Date: 2025

National Maternity and Neonatal Investigation

Since 2015, numerous investigations and reviews have produced hundreds of recommendations on maternity and neonatal services in England, yet consistent safe care remains elusive. This investigation aims to develop national recommendations to achieve reliable, compassionate care across all areas. This paper summarises the reflections of the Chair of the investigation, Baroness Amos, from early engagement with families, staff, community groups and MPs, and outlines the investigation's structure and progress. Further evidence will be gathered through a national call for evidence and site visits to 12 NHS trusts in early 2026.

18. The Maternal Care Bundle – a care bundle for reducing maternal mortality and morbidity

Publication Date: 2026

NHS England

NHSE has published a new Maternal Care Bundle, setting out national standards to reduce avoidable maternal deaths and serious harm. The bundle focuses on five high-risk areas where variation in care has been linked to poor outcomes:

- venous thromboembolism;
- pre-hospital and acute care for unwell pregnant women;
- epilepsy in pregnancy;
- maternal mental health; and
- obstetric haemorrhage.

It emphasises early risk identification, timely escalation, multidisciplinary working and tackling inequalities in outcomes. All maternity providers are expected to implement the bundle in full by March 2027, supported by national tools and measures.

19. The answer is staffing: midwives' opinions of their profession

Author: Honeyman A.

Publication Date: 2025

Journal: British Journal of Midwifery

The UK midwifery profession is significantly shortstaffed. In the last decade, the midwifery profession saw only a 7% increase in staffing levels compared to a 34% increase in the NHS workforce as a whole. This qualitative study explored why midwives leave the sector and what motivates them to remain.

20. Freedom from violence and abuse: a cross-government strategy to build a safer society for women and girls

Author: Home Office

Publication Date: 2025

Gov.uk

This strategy sets out the government's vision and actions for meeting its ambition to halve violence against women and girls (VAWG) in a decade. It prioritises prevention and tackling the root causes of VAWG, pursues perpetrators, and supports victims and survivors of violence and abuse. It argues that a 'whole of society' approach is needed to tackle VAWG, working across government, public services, and wider society to make lasting, meaningful change.

21. Improving access to postpartum contraception - a review of global guidelines with ESCRH consensus recommendations for Europe

Authors: Bombas T et al.

Publication Date: 2025

Journal: The European journal of contraception & reproductive health care: the official journal of the European Society of Contraception

Abstract

Contraceptive counselling should be an integral component of pregnancy care. The antenatal period represents a critical window of opportunity to discuss postpartum contraceptive options, enabling women to make informed reproductive health decisions. The evidence clearly demonstrates the importance of timely counselling and provision of effective postpartum contraception to optimise interpregnancy intervals and prevent unintended pregnancies and abortions. Routine antenatal counselling has been shown to be a feasible and effective alternative to traditional postnatal follow-up – which typically occurs several weeks after

childbirth, often within the primary care setting –, and the woman's preferred contraceptive method should be provided before hospital discharge following delivery whenever possible. This study provides a narrative review and comparison of the most recent global guidelines on postpartum contraception and proposes recommendations for Europe based on a European Society of Contraception and Reproductive Health (ESCRH) consensus.

22. ISUOG Practice Guidelines: point-of-care ultrasound in obstetrics and gynecology

Authors: De Robertis V et al.

Publication Date: 2025

Journal: Ultrasound in obstetrics & gynecology

The integration of point-of-care ultrasound (PoCUS) has transformed clinical practice by offering an affordable, portable and directly accessible diagnostic tool for bedside use. Unlike screening, targeted or referral ultrasound¹⁻³, PoCUS focuses on answering specific clinical questions or guiding procedures in real time⁴. PoCUS has been widely adopted in emergency medicine⁵⁻⁷, and its use has expanded to various specialties, including obstetrics and gynecology (Ob/Gyn), in which rapid assessment is critical for effective patient care. Initially introduced in the 1980s with portable machines, PoCUS has proved particularly valuable in low-resource settings⁸⁻¹², where access to advanced equipment and highly trained operators is limited. Although well-designed studies on the effectiveness of PoCUS in Ob/Gyn are scarce, interest in its use has grown in high-income countries due to its potential to expedite care, improve provider confidence and reduce patient anxiety^{13, 14}. Unlike conventional ultrasound examination performed by a sonographer or other specialist, PoCUS is a readily accessible tool for all providers involved in the care of patients with Ob/Gyn emergencies^{15, 16}, including emergency physicians⁵⁻⁷, family physicians¹¹, residents¹² and midwives¹⁰. Despite its advantages, PoCUS is not a replacement for comprehensive ultrasound examination performed by a specialist, but rather a complementary tool for addressing Ob/Gyn emergencies, guiding procedures and enhancing clinical decision-making. However, international guidelines are needed to standardize its applications and clarify its benefits and limitations in Ob/Gyn, ensuring optimal patient outcomes across different healthcare settings worldwide.

23. Medical treatment of fibroids: FIGO best practice guidance

Authors: Diaz I et al.

Publication Date: 2025

Journal: International journal of gynaecology and obstetrics

Even though uterine fibroids are a widespread condition, the range of approved medical treatment options remains limited. In fact, only a few drugs are officially approved for the therapy of fibroids. In both the USA and the European Medicines Agency region, selected gonadotropin-releasing hormone (GnRH) antagonists have been approved for this indication. GnRH analogs are primarily indicated for the preoperative management of uterine fibroids, largely because of their unfavorable long-term adverse effect profile. The previously approved therapy with ulipristal acetate had to undergo extensive restrictions because of safety concerns. Nevertheless, there are additional medications that may be used in clinical practice.

These include combined oral contraceptives, oral progestins, the levonorgestrel-releasing intrauterine system (LNG-IUS), and tranexamic acid. Although not specifically approved for the treatment of fibroids, these agents can reduce the intensity of bleeding in cases of heavy menstrual bleeding and thereby improve symptoms and lead to an improved quality of life for the patients.

24. Service improvement case study: Children and young people attending emergency departments

Author: Patient Perspective

Publication Date: 2025

The case study highlights the provision of services for children and young people when attending Emergency Departments and admissions to children's unit with a focus on reducing waiting times, staff in specific roles, play facilities, and support for children with autism or a learning disability. This is a study of 34 Trusts in England.]

25. RCOG launches updated Maternity Service Standards Framework

Author: Royal College of Obstetricians and Gynaecologies (RCOG)

Publication Date: 2025

The Royal College of Obstetricians and Gynaecologists (RCOG) has published its updated Maternity Service Standards Framework, which provides practical guidance to help support commissioners and service providers to deliver safer, more equitable and compassionate maternity care across the UK.

26. Evaluation of a line guard for pediatric central line-associated bloodstream infection prevention: a pre-post intervention study

Authors: Lulgjuraj D.

Publication Date: 2025

Journal: British Journal of Nursing

Clinicians strive for a central line-associated bloodstream infection (CLABSI)-free environment. Effective prevention strategies are crucial to reducing the burdens associated with these infections. The purpose of this study was to assess whether a line guard, a transparent line-to-line barrier against gross contamination, was effective in contributing to the reduction of pediatric CLABSIs.

27. Maternal social support and child developmental outcomes: an analysis of the Born in Bradford cohort

Authors: Barrass L.

Publication Date: 2025

Journal: Archives of Disease in Childhood

Women lacking social support during pregnancy often have worse mental health, but we know little about the influence of social support on child development, or the impact for migrant women. We aimed to investigate the association between maternal social support during pregnancy and child development using the Born in Bradford birth cohort.

28. Causes of trauma from children's healthcare

Author: Starlight Children's Foundation

Publication Date: 2025

This report reveals the most common causes of trauma and how play can prevent it. Based on a national survey of parents, children and health care professionals, the findings show that 1 in 9 children feel worried or upset when held down for treatment, putting an estimated 1.4 million at risk of trauma.

29. Child poverty strategy: is this mission-led government in action, and will it work?

Author: Niamh Buckingham

Publication Date: 2025

Kings Fund

The government's newly launched child poverty strategy sets out a coordinated package of measures across welfare, health, housing and education to tackle child poverty. Niamh Buckingham asks, is this strategy mission-led government in action?

30. Children, violence and vulnerability 2025: mental health and experiences of violence

Author: Youth Endowment Fund

Publication Date: 2025

This research looks at how mental health and violence are connected and the ways they shape young people's lives. It finds that one in four teenage children have turned to AI chatbots for mental health support, signalling the need for support and the changing ways young people are seeking it.

31. The Children's People and Nature Survey for England: 2025 update

Author: Natural England

Publication Date: 2025

Gov.UK

Data and supporting documents, from The Children's People and Nature Survey for England 2025 (Waves 9 & 10). Waves 9 and 10 of the Children's People and Nature Survey ran between the 13 to 27 of August 2025 (during the school holidays) and 18 September and 1 October 2025 (during term-time). The survey aims to understand how children and young people aged 8 to 15 in England are engaging with the natural environment inside and outside of school.

32. Effectiveness and safety of interventions for fever-associated discomfort in children: A systematic review

Author: Corsello A.

Publication Date: 2025

Journal: British Journal of Clinical Pharmacology

Fever is one of the most frequent reasons for paediatric consultations. While traditionally managed by reducing body temperature, recent guidelines emphasize alleviating discomfort as the primary therapeutic goal. The aim of this study was to review the evidence on the effectiveness and safety of pharmacological and nonpharmacological interventions for managing discomfort in febrile children.

33. 2025 maternity survey: statistical release

Author: Care Quality Commission

Publication Date: 2025

This survey looked at the experiences of pregnant women and new mothers who used NHS maternity services in 2025. The survey shows overall improvement in many areas of maternity care over the past year, especially in experiences of communication during antenatal care and involvement in decisions during postnatal care. However, there remain other areas of maternity care where women report poorer experiences, particularly communication during postnatal care.

34. European and North American guidelines for treating irritable bowel syndrome and functional abdominal pain in childhood: a guide for health-care professionals

Author: Gordon M et al.

Publication Date: 2025

Journal: The Lancet. Child & adolescent health

Abdominal pain-related disorders of gut–brain interaction (AP-DGBI; including irritable bowel syndrome, functional abdominal pain—not otherwise specified, abdominal migraine, and functional dyspepsia) are very common among children and adolescents worldwide. Two of these disorders, irritable bowel syndrome and functional abdominal pain—not otherwise specified, have high rates of school absenteeism, psychological comorbidities, and chronicity into adulthood. A wide range of psychosocial, dietary, and pharmacological treatments have been explored for treatment of irritable bowel syndrome and functional abdominal pain—not otherwise specified in children. However, the evidence remains broad but shallow, limiting certainty about the effectiveness of specific therapies. This Health Policy translates the new evidence-based treatment guidelines for irritable bowel syndrome and functional abdominal pain—not otherwise specified produced by the European and North American societies for Paediatric Gastroenterology, Hepatology, and Nutrition into practical guidance for general paediatricians and primary care providers. This Health Policy aims to empower clinicians at all levels of care to make informed, evidence-based decisions through a shared decision-making approach tailored to the management of children with irritable bowel syndrome and functional abdominal pain—not otherwise specified.

35. UK best practice recommendations for children and young people <18 years with pre-stage 3 type 1 diabetes, on behalf of the British Society for Paediatric Endocrinology and Diabetes (BSPED)

Author: Besser REJ et al.

Publication Date: 2025

Journal: Diabetic medicine

Screening for childhood type 1 diabetes (T1D) is increasing worldwide. Historically, screening has been undertaken through research programmes, but increasingly in the UK, children and young people are also being tested in clinical care. This identifies children before the onset of clinical disease through measurement of four islet autoantibodies (IAb): anti-glutamic acid decarboxylase; anti-insulin; anti-IA2 tyrosine phosphatase; and anti-zinc transporter-8. Otherwise well individuals confirmed to have ≥ 2 IAb have early-stage T1D, meaning that they are in the pre-symptomatic phase of the disease.

This is categorised into stages, where stage 1 indicates ≥ 2 IAb and normoglycaemia, and stage 2 the presence of ≥ 2 IAb and dysglycaemia. Stage 3 T1D indicates that the diagnostic threshold for T1D has been reached, which may occur with or without symptoms of diabetes.

36. Young children to be protected against chickenpox

Author: NHS England

Publication Date: 2026

The vaccination programme is being expanded to include chickenpox (varicella) for the first time, to help shield young children from getting seriously ill.

37. Government extends free NHS services for care leavers (Press Release)

Authors: Department of Health & Social Care, Department for Education, Josh McAlister OBE MP & The Rt Hon Wes Streeting MP

Publication Date: 2025

Gov.UK

A new package of measures for young people leaving care will provide free prescriptions, dental and eyecare services up to their 25th birthday, and enhanced job opportunities in the NHS.

38. Maternity services in England

Authors: Gheera, M; Harker, R; Balogun, B; Parkin, E

Publication Date: 2025

UK Parliament House of Commons Library

This briefing gives an overview of women's experiences of maternity services in England, including disparities in the care received by women from minority ethnic groups. It provides details of investigations into maternity units at individual NHS trusts, the government-commissioned national maternity and neonatal investigation, and policies to improve care. This briefing supplements the Library paper Quality and safety of maternity care (England) which contains information on key policy documents and developments.

39. What is the state of children's health in England?

Authors: Buckingham, N; Jefferies D; Purbrick-Thompson, K; Arnold, S

Publication Date: 2025

The King's Fund

This explainer – the first in a series – offers a snapshot of the current state of children's health in England, drawing on the latest available evidence. It focuses on outcomes across physical and mental health, the inequalities and wider determinants that shape those outcomes, and how well the health and care system is responding.

It closes with The King's Fund's view on priorities for action.

40. Restrictive equipment for children and young people

Publication Date: 2025

Royal College of Occupational Therapists (RCOT)

Written by occupational therapists for occupational therapists, this guidance brings together legal duties, ethical considerations and evidence-based practice into one clear, accessible framework.

41. Clinical Dietitians' Perspectives on Nutritional Management in Children's Palliative Care: A Qualitative Study

Authors: Trae G; Winger A; Nordstrom M

Publication Date: 2025

Journal: Journal of Human Nutrition and Dietetics

Four themes were developed through this analysis: First, nutrition is a core component of comprehensive palliative care; second, organisational placement affects dietitians' involvement; third, fragile structures for nutritional care; fourth, close bonds between the family and the dietitian.

42. Evaluation of a line guard for pediatric central line-associated bloodstream infection prevention: a pre-post intervention study

Author: Lulgjuraj D; Bukenmyer T; Biel N

Publication Date: 2025

Journal: British Journal of Nursing

Clinicians strive for a central line-associated bloodstream infection (CLABSI)-free environment. Effective prevention strategies are crucial to reducing the burdens associated with these infections. The purpose of this study was to assess whether a line guard, a transparent line-to-line barrier against gross contamination, was effective in contributing to the reduction of pediatric CLABSIs.

43. Digesting the problem: standardising care for children who present to ED after ingesting foreign bodies

Author: Fouche W.

Publication Date: 2025

Journal: BMJ Open Quality

Foreign body ingestion is a common reason for paediatric emergency department (ED) attendance. At baseline in the authors' institution, only 55% of children were managed in accordance with international best practice. No local guideline was in place.]

Disclaimer

The results of your literature search are based on the request that you made, and consist of a list of references, some with abstracts. Royal United Hospital Bath Healthcare Library will endeavour to use the best, most appropriate and most recent sources available to it, but accepts no liability for the information retrieved, which is subject to the content and accuracy of databases, and the limitations of the search process. The library assumes no liability for the interpretation or application of these results, which are not intended to provide advice or recommendations on patient care.