Is STAN monitoring associated with a significant decrease in metabolic acidosis at birth compared with cardiotocography alone? Review of the three meta-analyses that included the recent US trial

Vayssière C¹,², Ehlinger V², Paret L¹, Arnaud C²,³.

1. Gynecology and Obstetrics Department, Paule de Viguier Hospital, CHU Toulouse, Toulouse.
2. UMR 1027 INSERM, University Paul Sabatier Toulouse III, Toulouse.
3. Clinical Epidemiology Unit, University Hospital, Toulouse, France.

ABSTRACT

We read with interest the recent meta-analysis (MA) by Blix et al. (1) reporting that intrapartum surveillance with STAN monitoring resulted in a significant decrease in metabolic acidosis at birth compared with cardiotocography (CTG) alone (OR: 0.64, 95%CI: 0.47-0.88). This finding conflicts with the Cochrane MA by Neilson et al. (2) and MA by Saccone et al. (3) which found no decrease in metabolic acidosis with STAN monitoring (RR: 0.72, CI: 0.43-1.20 and RR: 0.81, CI: 0.44-1.46, respectively).