

Women and Children's

Current Awareness Bulletin

December 2025

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30 minutes. Learn about the communication barriers patients may encounter, and ways to ensure they get the most from their care.
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Book a session today at <https://forms.office.com/e/HyiSXfDaYV> (these sessions will be held on a monthly basis)

1. Through the lens of social workers: Issues raised in the family talk intervention in pediatric oncology

Authors: Ayoub, Maria;Eneslått, Malin;Lövgren, Malin;Kreicbergs, Ulrika and Udo, Camilla

Publication Date: 2026

Journal: Social Work in Health Care

Abstract: Families affected by cancer need psychosocial support, however few family interventions have been scientifically evaluated. The Family Talk Intervention (FTI) was pilot tested in pediatric oncology with 26 families. Issues raised and addressed during FTI meetings were explored by analyzing hospital social workers' (HSWs) fieldnotes. The findings show a range of severity in the family issues raised. These encompassed families' wellbeing, communication, conflicts, strengths, and needs for further support. Findings indicate that FTI can be a structured, yet flexible, way for HSWs to identify and address the complex psychosocial needs of these families.

2. Avoiding Complications and Optimizing Outcomes of Cast Treatment in Pediatric Orthopaedics

Authors: Belthur, Mohan V.;Ranade, Ashish S.;Herman, Martin J. and Halanski, Matthew A.

Publication Date: 2026

Journal: Instructional Course Lectures

Abstract: Despite recent advances in orthopaedics, casting remains an important and commonly used nonsurgical treatment modality for fractures and pediatric orthopaedic conditions. Casts and splints are used to maintain or obtain the alignment of a body segment. Over the past few decades, with the growing popularity of internal and external fixation techniques, there has been a loss of training emphasis on the art and science of cast treatment, resulting in a loss of awareness of cast-related complications. Knowledge of appropriate cast materials, the correct cast technique, postapplication care, and risk factors for cast-related complications is critical. These strategies emphasize the importance of precision and patient-specific care in pediatric orthopaedics.

3. Artificial Intelligence and Mental Health of Children and Adolescents: Current Status and Perspectives

Authors: Dritsona, Adelais;Koutroumpa, Maria-Emmanouela;Sergentanis, Theodoros N. and Tsitsika, Artemis K.

Publication Date: 2026

Journal: Advances in Experimental Medicine and Biology

Abstract: Background/aim: Artificial Intelligence (AI) involves creating systems capable of performing tasks typically requiring human cognitive functions, such as learning, reasoning, and decision-making. Over time, the field advanced toward more specialized, practical applications. Key AI areas include problem-solving, knowledge representation, decision-making, and natural language processing. This literature review aims to synthesize studies on the implementation of AI in the field of mental health of children and adolescents, tracing the current status and perspectives.; Methods: Eligible studies were sought in PubMed, Google Scholar, PsycInfo; end-of-search was set at May 31, 2024.; Results: AI is being increasingly utilized in the field of mental health to assist in diagnosing and managing conditions, such as mood disorders, autism spectrum disorders, and other mental health issues in children and adolescents. Technologies, such as mobile applications and wearable devices analyze behaviors, speech patterns, and emotions, offering valuable insights to forecast mood shifts and detect early signs of mental health problems. These tools support users in managing their emotions and stress, making mental health care more personalized and easier to access. Virtual therapists and AI chatbots offer private, convenient support, allowing young people to tackle their mental health concerns at their own convenience.; Conclusions: AI has the potential to improve mental health care by advancing diagnosis, treatment, and early

intervention. However, its integration must be done thoughtfully, with continuous research to address ethical and technical issues, including data privacy, algorithm biases, the need for human oversight, obtention of informed consent, transparency, and the avoidance of discrimination. Collaboration among various professionals is key to ensuring that AI is used in a responsible and effective way to enhance mental health care systems. (© 2026. The Author(s), under exclusive license to Springer Nature Switzerland AG.)

4. Feeding practices and concerns as mediators between maternal mental health and eating behaviours in early childhood

Authors: Lazarus, Monica A.;Franzolini, Beatrice;Eriksson, Johan G.;Chong, Mary F. -F;Ying, Toh Jia;de Iorio, Maria;Meaney, Michael J.;Godfrey, Keith M.;Yap, Fabian;Chen, Helen;Chong, Yap Seng;Kee, Michelle Z. L. and Fogel, Anna M.

Publication Date: 2026

Journal: Appetite

Abstract: Background: The impact of maternal mental health on child eating beyond infancy is understudied. This study explores whether maternal feeding practices and concerns mediate the association between maternal depression and anxiety symptoms and eating behaviours at age three years.; Methods: Data from 409 mother-child dyads in the Growing Up in Singapore Towards healthy Outcomes cohort were analysed. Maternal mental health was assessed using the Beck Depression Inventory-II and State-Trait Anxiety Inventory, feeding practices and concerns with the Preschooler Feeding Questionnaire, and child eating behaviours with the Children's Eating Behaviour Questionnaire. Structural equation modelling was used to test pathways.; Results: Depression symptoms in mothers showed direct and indirect links to child eating behaviours. For example, maternal depression symptoms were directly associated with enjoyment of food ($B = 0.011$, $p = 0.015$) and indirectly with food responsiveness ($B = 0.004$, $p = 0.034$) via use of food to calm the child. Anxiety symptoms, however, had only indirect associations with child eating behaviours through maternal feeding concerns, not practices. For example, maternal anxiety symptoms were indirectly linked with food responsiveness through perceived difficulty in feeding ($B = -0.001$, $p = 0.011$).; Conclusions: Depression and anxiety symptoms influence children's eating behaviours differently. Anxiety symptoms were linked with child eating behaviours only through maternal feeding concerns, whereas depression symptoms were linked with child eating behaviours both directly and indirectly via feeding to calm the child. As maternal anxiety symptoms are linked with more child eating concerns, the validity of mother-reported child eating behaviours requires consideration. (Copyright © 2025 Elsevier Ltd. All rights reserved.)

5. Associations between multiple neurodevelopmental disorders and mental health in children

Authors: Zhou, Xiaoyun;Jia, Frank;Bambling, Matthew;Edirippulige, Sisira;Whiteford, Harvey and Lin, Jialing

Publication Date: 2026

Journal: Journal of Affective Disorders

Abstract: Competing Interests: Declaration of competing interest None.; Objective: This study investigated the association between multiple NDDs and the prevalence and severity of current depression and anxiety among children aged 3-17 years.; Methods: We analyzed parent- or caregiver-reported data from 2016 to 2023 US National Survey of Children's Health. Children aged 3-17 years were included. We considered a broader spectrum of NDDs by including behavioral problems and grouped children based on the number of NDDs (out of ten): no multiple NDDs (none or one NDD), two NDDs, three NDDs, four NDDs, and five or more NDDs. Four mental health outcomes were measured: depression (yes/no), anxiety (yes/no), depression severity (mild/moderate/severe), and anxiety severity (mild/moderate/severe). Multinomial logistic regression models were used.; Results: Among 267,044 children (mean age = 10.2 years; male = 51.8 %), 10.6 % had multiple NDDs. The increasing number of co-occurring NDDs was associated with higher odds of prevalence and severity of depression and anxiety. Children with multiple NDDs were 4.7-5.3 times more likely to have depression and 5.8-12.9 times more likely to have anxiety compared with those without multiple NDDs. These positive associations remained consistent for mild or moderate depression (adjusted odds ratios ORs]: 5.0-5.6) and for mild or moderate anxiety (adjusted ORs: 5.6-8.9). The associations were more pronounced for severe mental health conditions, with children being 7.8-16.9 times more likely to experience severe depression and 8.1-34.9 times more likely to experience severe anxiety.; Conclusions: The cumulative mental health burden associated with multiple NDDs emphasizes the need for integrated screening and tailored interventions to support this population. (Copyright © 2025 The Authors. Published by Elsevier B.V. All rights reserved.)

6. Drug repurposing in gynaecological cancers: Proven drugs for new challenges

Authors: Alghalayini, Amani;Sarker, Farhana A.;Dickson, Kristie-Ann;Bowden, Nikola A. and Marsh, Deborah J.

Publication Date: 2025

Journal: Biomedicine & Pharmacotherapy = Biomedecine & Pharmacotherapie

Abstract: Gynaecological malignancies, including cervical, endometrial, ovarian, vaginal and vulval cancers, pose therapeutic challenges that contribute to this group being the third most frequent cause of cancer-related deaths globally in women. While advances have been made in both screening for cervical cancer and immunisation against human papillomavirus strains in some countries, other gynaecological cancers have not seen improvements in early screening

and prevention strategies. Drugs inhibiting poly (ADP-ribose) polymerase (PARP) have been incorporated into the clinical management of homologous recombination-deficient ovarian cancers, including as maintenance therapies post-surgery; however, these constitute only around half of all ovarian cancers. Developing new therapeutic options for all gynaecological malignancies, including those that demonstrate innate or acquired resistance to standard-of-care chemotherapeutic regimens, remains a challenge. Drug repurposing, defined as the repositioning of drugs that have been approved for the treatment of specific indications to treat other conditions, demonstrates strong potential for the clinical management of gynaecological malignancies. This review highlights diverse drug repurposing approaches applied to gynaecological cancers. Examples include computational methods such as disease and drug signature matching, network or pathway mapping, genetic association studies, drug similarity networks, molecular docking, machine learning, and serendipitous clinical observations. High-throughput compound library and drug-based phenotypic screening also contribute to candidate identification. Repurposed drugs with established safety and pharmacological profiles can accelerate therapeutic discovery; however, some regulatory and industry barriers remain. Coupled with advanced patient-centred technologies, 3D tumoroids, tumour-on-a-chip, and microfluidic systems, drug repurposing strategies promise to advance personalised medicine and improve survival outcomes for women with gynaecological malignancies. (Copyright © 2025 The Authors. Published by Elsevier Masson SAS.. All rights reserved.)

7. Can artificial intelligence improve the readability of patient education information in gynecology?

Authors: Daram, Naveena R.;Maxwell, Rose A.;D'Amato, Josette and Massengill, Jason C.

Publication Date: 2025

Journal: American Journal of Obstetrics & Gynecology

8. The Evolution of Enhanced Recovery After Surgery (ERAS) in Gynecology: An Introduction

Authors: Elias, Kevin M.

Publication Date: 2025

Journal: Clinical Obstetrics & Gynecology

Abstract: Enhanced Recovery After Surgery (ERAS) represents a paradigm shift in perioperative care, emphasizing evidence-based, multimodal strategies to minimize surgical stress and accelerate recovery. Originating in colorectal surgery in the 1990s, ERAS principles have since permeated gynecologic practice, transforming care across benign, oncologic, and urogynecologic procedures. Subspecialty adaptations, including those for minimally invasive surgery, pediatric gynecology, and pelvic floor reconstruction, illustrate the flexibility of ERAS across clinical contexts. By embracing data-driven implementation and interdisciplinary collaboration, ERAS continues to redefine perioperative care in gynecology, delivering

measurable improvements in patient recovery and surgical value.

9. Fertility-Sparing Treatments in Patient With Gynecologic Cancers

Authors: Erden, Murat;Rehman, Sahar;Oh, Chien;Schwartz, Benjamin M. and Kho, Rosanne M.

Publication Date: 2025

Journal: Obstetrics and Gynecology

Abstract: Fertility preservation is a critical consideration in the care of reproductive-aged patients with gynecologic cancers, yet referral to reproductive specialists remains low, indicating a gap between guidance and practice. We compared 28 clinical guidelines that addressed fertility-sparing management of endometrial, cervical, and ovarian cancers, and reviewed diagnostic workup, eligibility thresholds, surgical approaches, and surveillance protocols. Recommendations were synthesized into stage-specific pathways to delineate areas of consensus, highlight discrepancies, and map evidence gaps. There is broad agreement across multiple independent guidelines to support fertility-sparing treatment for carefully selected patients with: grade 1, stage IA endometrioid endometrial carcinoma; stage IA1-IB1 cervical tumors measuring less than 2 cm without high-risk features; and borderline ovarian tumors and most malignant germ cell tumors. Recommendations for higher stage disease and uncommon histologies, however, diverge and remain inconsistent. Overall guideline quality was moderate to high but frequently relied on limited evidence or expert opinion outside early-stage, low-risk conditions. Synthesizing current guidance clarifies areas where practice can be standardized and prospective data are needed. Embedding routine fertility counseling and referral into standardized pathways is an important step to improve uptake while maintaining oncologic safety and preserving fertility potential. (Copyright © 2025 by the American College of Obstetricians & Gynecologists. Published by Wolters Kluwer Health, Inc. All rights reserved.)

10. The link between the perception of body privacy and situational anxiety: a study of women's attitudes toward gynecological examinations

Authors: Fathnezhad-Kazemi, Azita;Ahmadi-Geshlag, Mohaddeseh and Ranjbar, Minoo

Publication Date: 2025

Journal: Journal of Psychosomatic Obstetrics and Gynaecology

Abstract: Background: A gynecological examination is a crucial component of gynecological care. Many women undergoing examinations may experience anxiety, particularly when insufficient precautions are taken to ensure bodily privacy.; Objective: This study aimed to assess women's perspectives on bodily privacy during gynecological examinations and to investigate the correlation between body privacy and anxiety levels.; Methods: A single-center

cross-sectional study was conducted, enrolling 270 women who underwent gynecological examinations. Three self-report measures were utilized to assess attitudes, perceptions of bodily privacy, and anxiety after examination.; Results: The findings revealed that 74.1% of women reported feelings of shame and embarrassment, and nearly 60% experienced stress. A strong positive correlation was observed between privacy scores and anxiety ($r = 0.660$, 95% CI: 0.566-0.738, $p < 0.001$). Multiple regression analysis indicated that five variables explained 44.7% of the variance in anxiety ($R^2_{adj} = 0.447$, $p < 0.001$), with privacy being the sole variable demonstrating a significant association ($\beta = 0.649$, 95% CI: 0.368-0.489, $p < 0.001$); Conclusions: These results suggest that, from a woman's perspective, the high importance placed on bodily privacy contributes to increased anxiety during gynecological examinations. Therefore, it is paramount to prioritize patients' needs and expectations. Furthermore, educational programs and the implementation of measures, such as training caregivers to increase ethical sensitivity regarding patient privacy, could prove highly beneficial.

11. Enhanced Recovery After Surgery Updates in Gynecologic Oncology Surgery

Authors: Jhaveri, Vasanti and Huepenbecker, Sarah P.

Publication Date: 2025

Journal: Clinical Obstetrics & Gynecology

Abstract: In this review article, we aim to provide a comprehensive update on enhanced recovery after surgery (ERAS) in gynecologic oncology. Specifically, we focus on topics including pelvic exenterations, hyperthermic intraperitoneal chemotherapy, vulvar surgery, optimal intraoperative fluid management, postoperative pain control, and disparities in ERAS care. In addition, we discuss contemporary practice patterns including prehabilitation in the ERAS pathway and smartphone applications for postoperative care in gynecologic oncology patients.

12. Adherence to Oral Nutritional Support and Its Effect on Nutritional Status in Pediatric Oncology Patients

Authors: Kantar, Mehmet; Bıçaklı, Derya Hopancı; Özkan, Ayşe; İlhan, İnci; Taçyıldız, Nurdan; Kebudi, Rejin; Eker, Nurşah; Sivış, Zuhal; Demirsoy, U. Şur; Beker, Bahar; Yeşil, Şule; Varan, Ali; Demirağ, Bengü; Bayram, İbrahim; Özyörük, Derya; Ataseven, Eda; İncesoy, Sonay; Büyükkapu, Sema; Tufan, Burcu; Kızmazoğlu, Deniz, et al

Publication Date: 2025

Journal: Nutrition and Cancer

Abstract: Children with cancer frequently suffer from malnutrition caused by their disease and treatments. This study examines the rates of malnutrition, compliance with nutritional therapy, and its impact on nutritional status in pediatric cancer patients. This multicenter cross-sectional study was conducted between 2021 and 2023 at 12 pediatric hematology and oncology clinics. This study included 385 patients (aged 0.3-18 years) with leukemia-lymphoma and solid

tumors that are currently on or had newly started oral nutritional supplement (ONS) treatment. Anthropometric measurements, mid-upper-arm-circumference (MUAC), body mass index (BMI), weight-for-age (WFA), were collected, and malnutrition risk was evaluated by the nutrition screening tool for childhood cancer (SCAN). Baseline WFA-based malnutrition was 31.0%, increasing to 38.5%, while $SCAN \geq 3$ was 83.8% decreasing to 72.4% at the sixth month. Malnutrition risk was more common in sarcoma and central nervous system tumor patients. ONS adherence decreased across all cancer types during the follow-up period. Adherent patients demonstrated higher BMI scores during the study period and MUAC z - scores in the last 2 months compared to the non-adherent group ($P < 0.04$). Our study demonstrates that the use of validated nutrition screening tools, together with adherence strategies, can lead to increased weight-for-age and lower malnutrition risk screening scores.

13. Impact of adverse childhood experiences (ACEs) and positive childhood experiences (PCEs) on mental health among children aged 6-17 (2021-2022)

Authors: Lyons, Kiara and Suh, Bin

Publication Date: 2025

Journal: Journal of Affective Disorders

Abstract: Competing Interests: Declaration of competing interest No conflicts of interest to declare among any of the authors.; Background: The objectives were to 1) Examine the prevalence of mental health diagnoses, symptom severity and flourishing among children aged 6-17, 2) Examine the prevalence of household and community-based adverse childhood experiences (ACEs) and positive childhood experiences (PCEs), 3) Examine the relationship between ACEs, mental health diagnosis and symptom severity, and 4) Investigate how PCEs moderate the relationship between ACEs and mental health diagnoses.; Methods: We utilized the cross-sectional, 2021-2022 combined National Survey of Children's Health (NSCH) data. Caregiver responses for persons aged 6-17 years were included (N = 60,809). Logistic regression and moderation models were tested to assess relationships between ACEs, PCEs and different mental health diagnoses.; Results: Having 1+ ACE was associated with higher odds of anxiety (OR: 2.23), depression (OR: 2.67), ADHD (OR: 1.31), and behavior/conduct problems (OR: 1.84). In contrast, high PCEs were linked to lower odds of anxiety (OR: 0.67), depression (OR: 0.73), ADHD (OR: 0.87), and behavior/conduct problems (OR: 0.50). Community-based ACEs had a greater impact on mental health diagnoses than household-based ACEs. PCEs moderated the association between ACEs and mental health, attenuating dose-response relationships in all models.; Discussion: Our study provided more insight into the importance of examining how PCEs influence the relationship between ACEs and mental health diagnoses with the consideration of diagnosis severity. This can help to inform researchers and providers on how to develop and improve mental and behavioral health treatment interventions that are tailored to children and adolescents. (Published by Elsevier B.V.)

14. Association between a father-unfriendly workplace culture, paternity leave, mental health and child abuse

Authors: Matsushima, Midori; Li, Xiyue and Tabuchi, Takahiro

Publication Date: 2025

Journal: Children & Youth Services Review

Abstract: • Paternity leave uptake in Japan remains low due to unsupportive work environments. • 36% took leave; 14% experienced difficulty related to workplace culture. • Leave difficulty linked to depression (OR = 2.05), distress (2.18), and neglect (2.96). • Workplace hostility, not leave, was tied to worse mental health and child neglect. • Supportive workplaces and better mental health care for fathers are urgently needed. Despite policy interventions, paternity leave uptake in Japan remains low due to unsupportive workplace cultures, posing risks to fathers' mental health and child welfare. We conducted a cross-sectional study using data from the 2021 Japan COVID-19 and Society Internet Survey (JACSIS), including 929 fathers of children younger than 2 years. Fathers were categorised into four groups based on paternity leave uptake and workplace culture perceptions. Mental health outcomes were assessed using the Edinburgh Postnatal Depression Scale (EPDS) and Kessler 6 Scale (K6), while child abuse behaviours were evaluated through a validated indirect questionnaire. Logistic regression analyses were performed, adjusting for demographic, family, and COVID-19-related factors. Robustness checks were conducted following Oster's (2019) method to account for potential bias from unobserved variables. Among respondents, 36 % took paternity leave (22.2 % without difficulty, 13.8 % with difficulty); 64 % did not. Fathers who faced difficulty taking leave had higher odds of depression (OR = 2.05, 95 % CI: 1.18–3.56), psychological distress (OR = 2.18, 95 % CI: 1.14–4.20), and child neglect (OR = 2.96, 95 % CI: 1.17–7.53) compared to those who took leave without difficulty. Robustness checks confirmed that these associations were unlikely to be biased by omitted variables. Taking paternity leave in a father-unfriendly workplace was associated with poorer mental health and increased child neglect among Japanese fathers. These findings highlight the need to foster father-friendly workplace cultures, implement psychological health screenings for fathers, and strengthen support systems to prevent child neglect and promote fathers' well-being.

15. Association of frailty with healthcare utilization and days alive at home in patients with gynecologic cancers: a population-based study

Authors: Nguyen, Julie M. V.; Zigras, Tiffany; Gayowsky, Anastasia; Marcucci, Maura; Costa, Andrew; Vicus, Danielle; Nica, Andra; Hogen, Liat and Perez, Richard

Publication Date: 2025

Journal: American Journal of Obstetrics & Gynecology

16. Intraoperative Management for Enhanced Recovery After Gynecologic Surgery

Authors: Ovsak, Gavin G.; Mena, Gabriel E. and Lasala, Javier D.

Publication Date: 2025

Journal: Clinical Obstetrics & Gynecology

Abstract: Enhanced recovery after surgery (ERAS) protocols have revolutionized perioperative care, aiming to reduce surgical stress and expedite recovery. In gynecologic surgery, anesthesiologists play a pivotal role in implementing intraoperative strategies that align with ERAS principles. This manuscript delineates evidence-based intraoperative anesthetic management techniques tailored for gynecologic procedures within an ERAS framework, including multimodal analgesia, optimal fluid management, maintenance of normothermia, and lung protective ventilation (Figure 1). The integration of these strategies has demonstrated improvements in patient outcomes, including reduced hospital stays, decreased opioid consumption, and enhanced patient satisfaction.

17. Gynecologic ERAS Preoperative Interventions

Authors: Pate, Natalie P. and Thiele, Robert H.

Publication Date: 2025

Journal: Clinical Obstetrics & Gynecology

Abstract: Enhanced recovery after surgery (ERAS) protocols have been widely adopted within gynecologic surgery to optimize perioperative outcomes. This chapter discusses the evidence behind preoperative gynecologic ERAS elements, including preadmission counseling, comorbidity optimization, fasting guidelines, preoperative medications, and prehabilitation. Much of the evidence is extrapolated from colorectal and other surgical populations but has been supported within gynecology. Prehabilitation is the newest element, aimed at improving preoperative functional status through exercise, nutrition, and psychological support, with gynecology-specific evidence emerging to support inclusion within ERAS protocols. Preoperative interventions are the foundation of ERAS bundles, and adherence to these elements should be encouraged.

18. Postoperative Enhanced Recovery After Surgery Pathways in Gynecologic Surgery

Authors: Patterson, Jenna M.;Freeman, Madeline and Hickman, Lisa C.

Publication Date: 2025

Journal: Clinical Obstetrics & Gynecology

Abstract: Surgical stress affects the physiology of nearly every organ system. Enhanced recovery after surgery (ERAS) protocols counter these stressors to maintain normal physiology and promote postoperative recovery. In gynecologic surgery, ERAS pathways are associated with many postoperative benefits, including shorter length of stay, decreased pain, faster return of bowel function and both lower complication and readmission rates. This review highlights the current evidence and recommendations regarding postoperative ERAS pathways in gynecologic surgery.

19. Implementing an Evidence-Based Neonatal Circumcision Pain Management

Protocol: A Quality Improvement Initiative

Authors: Philip, Renu Mathews;Ayala, Francisco and Wilson, Jennifer

Publication Date: 2025

Journal: Journal of Pediatric Health Care : Official Publication of National Association of Pediatric Nurse Associates & Practitioners

Abstract: Background: A lack of standardized neonatal circumcision pain management guidelines leads to inconsistencies across pediatric settings and poor outcomes, such as feeding and sleep disturbances, which can increase costs, lead to longer hospital stays, or require closer observation outside of parents' presence. Nurse practitioners (NP) are well-equipped to lead evidence-based quality improvement (QI) initiatives.; Aim: To evaluate an evidence-based neonatal circumcision pain protocol across the care continuum from preprocedural to recovery.; Methods: The Knowledge-to-Action framework and QI methodologies guided the initiative and evaluation of the new protocol's impact on neonates' pain scores and sustainability.; Intervention: Acetaminophen pre-circumcision, white noise procedural, standardized pain assessment, and acetaminophen or nonpharmacologic measures during recovery.; Results: Neonates' pain scores significantly decreased from 3.14 to 1.12 ($p < .001$) after implementation, which relied on provider compliance. Process aims were achieved in Plan-Do-Study-Act cycle 3 and sustained; 100% of providers agreed that the new protocol improved neonatal pain management.; Conclusions: Effective circumcision pain management relies on a comprehensive approach. This QI initiative highlights NP leadership in driving evidence-based change. (Copyright © 2025 National Association of Pediatric Nurse Practitioners. Published by Elsevier Inc. All rights reserved.)

20. The effect of robot-assisted surgery on the gynecology patients' experience and quality of life after surgery

Authors: Ravichandren, Nalineshwaary;Faris, Nur Aina Nabilah Binti Mohd;Ping, Tan Ee and Ayakannu, Thangesweran

Publication Date: 2025

Journal: Journal of Robotic Surgery

Abstract: Robot-assisted gynecological surgery enhances precision, shortens recovery time, and reduces postoperative complications. However, its impact on patient-reported outcomes and their quality of life remains underexplored. This study evaluates the patient's quality of life following robot-assisted gynecological surgeries, focusing on physical function, pain, vitality, and sexual health. A prospective non-randomized study was conducted, assessing quality of life using validated tools before and at multiple intervals post-surgery using the RAND-36 survey, the Brief Pain Index and the Female Sexual Function Index. Subgroups included patients undergoing robot-assisted hysterectomy, myomectomy, cystectomy or both myomectomy and cystectomy. Significant improvements in quality of life were observed as early as 3 weeks post-surgery, with continued gains at 12 and 24 weeks, where maximum quality of life was achieved. Pain scores decreased from baseline to week 3 and remained consistently low thereafter. Vitality scores returned to baseline within 3 weeks, indicating a faster recovery compared to laparoscopic and traditional open surgeries. Sexual health outcomes initially declined post-surgery but gradually improved over six months. These findings suggest that robot-assisted gynecological surgery enhances long-term quality of life and offers a quicker recovery compared to conventional surgical approaches. However, the non-randomized study design limits the generalizability of the results, underscoring the need for randomized controlled trials to validate these outcomes and further refine patient care strategies. (© 2025. The Author(s).)

21. Maternity signal system will spot and stop emerging safety concerns

Author: NHS England

Publication Date: 2025

NHS England

The sophisticated new tool rapidly analyses data being routinely recorded by maternity teams on wards to spot whether there are potential emerging safety issues which need urgent attention and action.

22. Midwifery action plan launched to ensure safe, equitable and person-centred maternity care in the UK NMC

Author: Nursing and Midwifery Council (NMC)

Publication Date: 2025

The Nursing and Midwifery Council (NMC) has today launched a detailed action plan outlining its ongoing work to ensure safe, equitable and person-centred maternity care and education across the UK.

[The plan](#) sets out our work and priorities across three key areas:

- Black maternal health
- UK-wide maternity review work, and
- Supportive actions to help midwives deliver the highest standards of care.

23. 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 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 and a look ahead to a second explainer, which will map the system for children and young people in England – setting out who is responsible for what, how services are delivered, and the levers available to improve outcomes and reduce inequalities.

24. Paediatric and perinatal pathology workforce report

Author: The Royal College of Pathologists

Publication Date: 2025

The Royal College of Pathologists

This report highlights the crisis across UK paediatric and perinatal pathology services. Severe workforce shortages prevent consultants from meeting demand, causing unacceptable delays for families awaiting test results and increased waiting times or transfer out of region for post-mortem examinations of babies and children. Urgent, long-overdue workforce strategies are needed to resolve this worsening situation.

25. Effects of maternal exposure to ambient air pollution on adverse birth outcomes

Author: A report by the Committee on the Medical Effects of Air Pollutants

Publication Date: 2025

Gov.UK

This report, written by the Committee on the Medical Effects of Air Pollutants, examines the evidence regarding the impact of outdoor air pollution on adverse birth outcomes. The authors conducted a review of epidemiological research available to mid-2021. It also considers mechanistic studies and discusses how the biological impacts of air pollution might be linked to the outcomes studied. The findings show that many of the published systematic reviews were not of a suitable quality to draw firm conclusions regarding the likelihood that air pollutants (particulate matter – PM2.5 and PM10, nitrogen dioxide and ozone) are associated with low birth weight, pre-term birth or stillbirth. It concludes that new systematic reviews and meta-analyses are required that would include recently published studies.

26. Empowering minds: transforming young women's mental health

Authors: Adetola Obateru, Kadra Abdinasir, Sam Anderson, Huong Le, Bethan Bottomley and David Woodhead

Publication Date: 2025

The Pilgrim Trust

This report is an evaluation of the Young Women in Mind programme, launched by the Pilgrim Trust in 2021 to address the worsening mental health of young women aged 16-25. The Pilgrim Trust offers targeted and tailored mental health support for young women through projects across the north of England and Northern Ireland.

27. Genes, brains and self-harm: New study links adolescent risk to biology and disadvantage

Author: Russel, A

Publication Date: 2025

The Mental Elf

[Self-harm is common among adolescents and a strong predictor of suicide risk. A major new cohort study in the British Journal of Psychiatry explores how genetic risk and brain differences might explain who's most at risk, and why. The post Genes, brains and self-harm: New study links adolescent risk to biology and disadvantage appeared first on National Elf Service.]

28. Bundle of joy, bundle of nerves: What do we really know about postpartum anxiety?

Author: Shipp, L

Publication Date: 2025

The Mental Elf

[Postpartum anxiety affects more than 1 in 10 new mothers worldwide, yet researchers still can't agree on how to define or measure it. This new review in *The Lancet Psychiatry* takes stock of what we know so far and why the field urgently needs consensus. The post *Bundle of joy, bundle of nerves: What do we really know about postpartum anxiety?* appeared first on National Elf Service.]

29. Domestic violence and suicide in women: insights from a national UK study

Author: Marzecki, F

Publication Date: 2025

The Mental Elf

[Over a quarter of women who died by suicide while under UK mental health care had experienced domestic abuse. This national study reveals who is most at risk and highlights how services can adapt to help prevent tragedy. The post *Domestic violence and suicide in women: insights from a national UK study* appeared first on National Elf Service.]

30. The role of the health sector in supporting parents and caregivers to meet their parenting potential

Author: The World Health Organization

Publication Date: 2025

The World Health Organization (WHO)

[Supporting parents and caregivers requires a whole-of-society approach, with coordinated responses from the health, education, social services, private and other sectors. This brief focuses on the role of the health sector specifically. It explains why the health sector should support parents and caregivers, describes the type of support they need, and outlines the key building blocks of the health sector response.]

31. Children's legal status and their ability to make treatment decisions

Authors: Wheeler R.

Publication Date: 2025

Journal: Archives of Disease in Childhood

[Clinicians of all professions who treat children have an interest in the capabilities of their patients. Not least as to whether the child in front of them can make treatment decisions. The authors seek, briefly, to set out the clinical legal basis for a child's capability (and its limits) in England and Wales in this regard.]

32. Help improve caesarean wound care management

Author: Bristol University & PROMPT Maternity Foundation

Publication Date: 2025

Postsurgical infection following caesarean section is common, with wound dressing quality and general aftercare being integral to optimal healing and patient outcomes. Bristol University and PROMPT Maternity Foundation want to understand your professional experiences of caesarean birth wound care and treatment, as well as your views on what matters most. Your perspectives on current practice and the challenges you encounter will be vital for informing potential new solutions.

Take part in this [important survey](#) by 4 January 2026.

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