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**Comparison of the effect of fibrinogen concentrate with fresh frozen plasma (FFP) in management of hypofibrinogenenic bleeding after congenital cardiac surgeries: A clinical trial study.**
[This study aimed to compare the effect of fibrinogen concentrate with FFP on postoperative bleeding and clinical outcome after congenital cardiac surgeries in pediatric populations. Both products had a comparable effect on management of hypofibrinogenenic bleeding.]
Freely available online

**Effect of Umbilical Cord Blood Sampling versus Admission Blood Sampling on Requirement of Blood Transfusion in Extremely Preterm Infants: A Randomized Controlled Trial.**
[Initial blood sampling from placental end of umbilical cord, when combined with anemia prevention strategies, significantly prolonged the time to first transfusion and reduced the need for early transfusions among extremely premature neonates.]
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**Genetic profiling of primary orbital melanoma: an analysis of 6 cases with clinicopathologic correlation.**
Mudhar HS. *Ophthalmology* 2019;126(7):1045-1052.
[The purpose of this study was to analyze the genetic profile of 6 cases of primary orbital melanoma with clinicopathologic correlation.]
Available with an NHS OpenAthens password for eligible users

**Ibuprofen for the prevention of patent ductus arteriosus in preterm and/or low birth weight infants.**
Ohlsson A. *Cochrane Database of Systematic Reviews* 2019;6:CD004213.
[Patent ductus arteriosus (PDA) complicates the clinical course of preterm infants and increases the risk of adverse outcomes. Indomethacin has been the standard treatment to close a PDA but is associated with renal, gastrointestinal, and cerebral side effects. Ibuprofen has less effect on blood flow velocity to important organs.]

**Lipid emulsions for parenterally fed preterm infants.**
Kapoor V. *Cochrane Database of Systematic Reviews* 2019;6:CD013163.
[Conventionally used soybean oil-based lipid emulsion (S-LE) have high polyunsaturated fatty acid (PUFA) content and phytosterols that may contribute to adverse effects in preterm infants. The newer lipid emulsions (LE) from different lipid sources are currently available for use in preterm infants.]
Lipid emulsions for parenterally fed term and late preterm infants.
Kapoor V. *Cochrane Database of Systematic Reviews* 2019;6:CD013171.
[Lipid emulsions (LE) form a vital component of infant nutrition for critically ill, late preterm or term infants, particularly for those with gastrointestinal failure. Conventionally used soybean oil-based LE (S-LE) have high polyunsaturated fatty acid (PUFA) content and phytosterols, which may contribute to adverse effects including parenteral nutrition-associated liver disease (PNALD).]

**Maternal Hemoglobin Concentrations Across Pregnancy and Maternal and Child Health: A Systematic Review and Meta-analysis.**
[Maternal anemia is a well-recognized global health problem; however, there remain questions on specific hemoglobin thresholds that predict health risk or protection for mother and child. Our objective was to conduct a systematic review and meta-analysis to examine the associations of maternal hemoglobin concentrations with a range of maternal and infant health outcomes. ]
*Freely available online*

**Guidelines**
The following new guidance has recently been published:

**Magnesium sulfate: risk of skeletal adverse effects in the neonate following prolonged or repeated use in pregnancy.**
Medicines and Healthcare Products Regulatory Agency (MHRA);2019.
[Drug Safety Update. Maternal administration of magnesium sulfate for longer than 5–7 days in pregnancy has been associated with skeletal adverse effects and hypocalcaemia and hypermagnesemia in neonates. If use of magnesium sulfate in pregnancy is prolonged or repeated, consider monitoring of neonates for abnormal calcium and magnesium levels and skeletal adverse effects.]
*Freely available online*
This Bulletin was created by Barbara Peirce, Outreach Librarian of NHS East Dorset Knowledge and Library Service

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