



Royal College of
Obstetricians
and Gynaecologists

NEWSLETTER 77 - January 2026

The UKOSS Team would like to wish
you all a very Happy New Year!

There are already a number of new additions to the UKOSS programme planned for 2026, the first of which will be endocrine neoplasia (more details about this below). Details of all new studies will be announced on our website and we will of course email all reporters with the protocols and case definitions.

Does UKOSS make a difference to policy and clinical guidelines?

Yes! In the 20 years since the platform's inception, UKOSS publications have been cited by policymakers and clinicians globally.

A newly published study explores how evidence gathered through UKOSS has been cited in policy and clinical guidelines. Since 2005, 96 articles reporting UKOSS data have been published, about two-thirds of which have been mentioned at least once in a policy document or clinical guideline.

The findings suggest that UKOSS evidence is meeting an important need for information that policymakers and clinicians cannot easily get from other sources. The contribution of UKOSS to the UK and worldwide response to Covid-19 was particularly noteworthy and is explored in depth in the paper. Going forward, there is scope to speed up the translation of evidence into policy and practice – which means making sure we keep asking the right questions and plan for effective communication and dissemination. Read the full publication [here](#).

Reference: Tunn R and Knight M. Use of evidence from the UK Obstetric Surveillance System in policy and clinical practice: a descriptive study using citation tracking [version 1; peer review: awaiting peer review]. NIHR Open Res 2026, 6:5 (doi.org/10.3310/nihropenes.14196.1)

Figure 1. Geographic distribution of policy citations of UK Obstetrics Surveillance System evidence

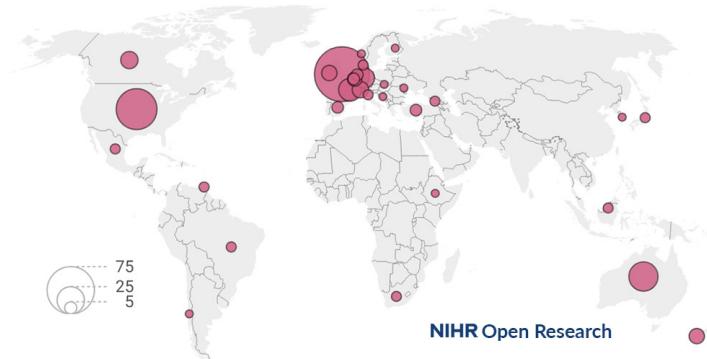
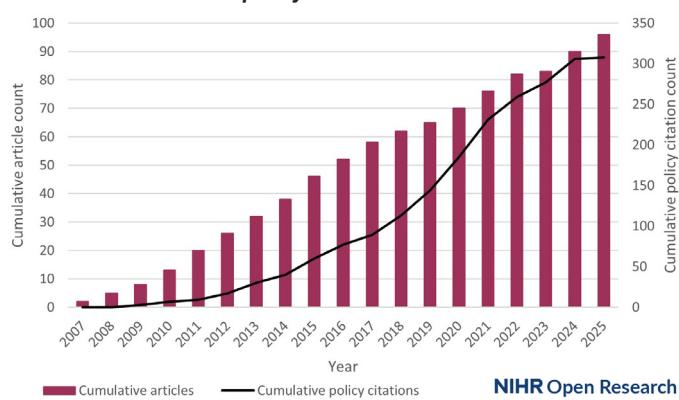


Figure 2. UK Obstetrics Surveillance System publications and policy citations over time



- Meet a member of the UKOSS Steering Committee
- New addition to the UKOSS programme coming soon



Hospital Monthly Reporting Rates over SIX MONTHS (June - November 2025)

6 months reported, 4 or 5 months reported, 2 or 3 months reported, 1 month reported, 0 months reported

Aberdeen Maternity Hospital
Airedale General Hospital
Altnagelvin Area Hospital
Aneurin Bevan University Health Board
Arrowe Park Hospital
Ayrshire Maternity Unit
Barnet Hospital (Royal Free London NHS Foundation Trust)
Barnsley Hospital
Basildon University Hospital
Basingstoke and North Hampshire Hospital
Bedford Hospital
Borders General Hospital
Bronglais Hospital
Broomfield Hospital
Caithness General Hospital
Calderdale Royal Hospital
Chesterfield Royal Hospital
Colchester General Hospital
Conquest Hospital (East Sussex Healthcare NHS Trust)
Countess of Chester Hospital
Craigavon Area Hospital
Croydon University Hospital
Cumberland Infirmary
Daisy Hill Hospital
Darent Valley Hospital
Darlington Memorial Hospital
Derriford Hospital
Diana Princess of Wales Hospital
Doncaster Royal Infirmary
Dorset County Hospital
East Surrey Hospital
Epsom General Hospital
Forth Valley Royal Hospital
Frimley Park Hospital
George Eliot Hospital
Glan Clwyd District General Hospital
Giangwili General Hospital
Gloucestershire Royal Hospital
Good Hope Hospital
Harrogate District Hospital
Heartlands Hospital
Hereford County Hospital
Hinchinbrooke Hospital
Homerton University Hospital
Hull Royal Infirmary
Ipswich Hospital
James Paget University Hospital
Jersey General Hospital
Kettering General Hospital
King's College Hospital
King's Mill Hospital
Kingston Hospital
Lancashire Teaching Hospitals (Royal Preston Hospital)
Leeds General Infirmary
Leighton Hospital
Lincoln County Hospital
Lister Hospital
Medway Maritime Hospital
Midland Metropolitan University Hospital
Milton Keynes University Hospital
New Cross Hospital
Norfolk & Norwich University Hospital
North Devon District Hospital
North Manchester General Hospital
North Middlesex University Hospital
Northampton General Hospital
Northumbria Specialist Emergency Care Hospital
Northwick Park Hospital
Nottingham City Hospital
Ormskirk District General Hospital
Peterborough City Hospital
Pilgrim Hospital
Pinderfields General Hospital

Princess Alexandra Hospital
Princess Anne Hospital
Princess Elizabeth Hospital (Guernsey)
Princess of Wales Hospital
Princess Royal Hospital (Telford)
Queen Alexandra Hospital
Queen Charlotte's and Chelsea Hospital
Queen Elizabeth Hospital (Gateshead)
Queen Elizabeth Hospital (King's Lynn)
Queen Elizabeth Hospital (Woolwich)
Queen Elizabeth the Queen Mother Hospital
Queen's Hospital (Burton-on-Trent)
Queen's Hospital (Romford)
Queen's Medical Centre
Raigmore Hospital
Rosie Maternity Hospital
Rotherham District General Hospital
Royal Albert Edward Infirmary
Royal Alexandra Hospital
Royal Berkshire Hospital
Royal Bolton Hospital
Royal Bournemouth Hospital
Royal Cornwall Hospital
Royal Derby Hospital
Royal Free Hospital
Royal Hampshire County Hospital
Royal Surrey County Hospital
Royal United Hospital
Royal Victoria Infirmary
Salisbury District Hospital
Scarborough Hospital
Scunthorpe General Hospital
Simpson Centre for Reproductive Health
Singleton Hospital
South West Acute Hospital
Southend University Hospital
Southmead Hospital
St George's Hospital
St Helier Hospital
St James's University Hospital
St John's Hospital
St Mary's Hospital (Isle of Wight)
St Mary's Hospital (Manchester)
St Michael's Hospital
Stoke Mandeville Hospital
Sunderland Royal Hospital
The Great Western Hospital
The Hillingdon Hospital
The Jessop Wing
The Portland Hospital
The Tunbridge Wells Hospital
Torbay Hospital
Ulster Hospital
University Hospital Coventry
University Hospital Lewisham
University Hospital of North Tees
University Hospital of Wales
Victoria Hospital (Blackpool)
Victoria Hospital (Kirkcaldy)
Warrington Hospital
Warwick Hospital
Watford General Hospital
West Cumberland Hospital
West Suffolk Hospital
Western Isles Hospital
Wexham Park Hospital
Whiston Hospital
Whittington Hospital
William Harvey Hospital
Wishaw General Hospital
Worcestershire Royal Hospital
Worthing Hospital
Wrexham Maelor Hospital
Wythenshawe Hospital
York Hospital
Ysbyty Gwynedd District General Hospital

Bassetlaw Hospital
Chelsea & Westminster Hospital
Dumfries & Galloway Royal Infirmary
Guy's and St Thomas' Hospital
James Cook University Hospital
John Radcliffe Hospital
Liverpool Women's Hospital
Manor Hospital (Walsall)
Musgrove Park Hospital
Ninewells Hospital & Medical School
Prince Charles Hospital
Princess Royal University Hospital
Royal Jubilee Maternity Service
Royal Lancaster Infirmary
Royal Sussex County Hospital
St Peter's Hospital
St Richard's Hospital
Stepping Hill Hospital
Tameside General Hospital
University Hospital of North Durham
University Hospital of North Midlands
Birmingham Women's Hospital
Furness General Hospital
Lancashire Women and Newborn Centre
Leicester Royal Infirmary
Luton and Dunstable University Hospital
Princess Royal Maternity Hospital
Queen Elizabeth University Hospital (Glasgow)
Royal Oldham Hospital
St Mary's Hospital (London)
Antrim Hospital
Bradford Royal Infirmary
Princess Royal Hospital (Haywards Heath)
Royal Devon & Exeter Hospital
University College Hospital

Leicester General Hospital
Newham General Hospital
Nobles Hospital (Isle of Man)
Royal London Hospital
Russells Hall Hospital
West Middlesex University Hospital
Whipps Cross University Trust Hospital

NEW CONDITION starting early this year!

Endocrine related neoplasia syndromes

MEN1, MEN2/3 and VHL are hereditary endocrine tumour syndromes that are most frequently identified through genetic testing of at-risk family members. These genetic syndromes are rare but cumulatively are estimated to affect 100 pregnant women per year in the UK. Small studies and anecdotal case reports suggest increased maternal and neonatal complications in pregnancies among women affected by these genetic syndromes but at present there are no guidelines for the management or surveillance of pregnant women with MEN1, MEN2/3 and VHL. Adding this to data collection will enable us to determine the incidence of MEN1, MEN2/3 and VHL in pregnancy and describe the management of both maternal and neonatal outcomes.

The start date for this study is still to be confirmed but we will email all reporters with the final case definition and short protocol as soon as possible.

Peripartum Hysterectomy study ending this month

Please be reminded that the Peripartum Hysterectomy Study (PHY) is ending on 31st January.

We would be grateful if you could double check that all cases from your unit have been identified and reported to us.

Also, please do make sure that you have submitted two control forms alongside each case form (NB: the controls should be the two women who delivered immediately before the case)

UKOSS Study Day 2026 – watch this space!



We will let you know as soon as a date has been set for the next UKOSS Study Day.

New study applications

UKOSS continues to welcome study applications from all clinical and research staff. If you or your colleagues would like to approach UKOSS with new study ideas or have any questions at all regarding the study application process, then please do not hesitate to get in touch via ukoss@npeu.ox.ac.uk

Case Report Summary for Studies up until the end of December 2025

Study	Actual number of reported cases	Data collection forms returned	Number of forms returned that were found to be not cases / reported in error	Data Collection forms returned that are confirmed cases	Expected number of confirmed cases
Amniotic Fluid Embolism	453	438	173	265	251
HLH	13	10	1	9	4
Peripartum hysterectomy – CASES	295	228	10	218	400
Peripartum hysterectomy – CONTROLS	N/A	415	N/A	N/A	N/A
Severe Respiratory Virus – RECOVERY & REMAP-CAP trials	34	34	32	2	189

Star Reporters



We would like to thank **Liz Harcourt** from Glangwilli General Hospital for being the first to report in 2026 and **Elizabeth Penn** from St Mary's Hospital (Manchester) who submitted the first completed data collection form in 2026.

Your edible goodies will be in the post very soon!

Please remember...

- Please keep a record of the case IDs for all the cases you report and also the corresponding patient details.
- It is important that if you change roles or retire that you pass on your case list to another reporter and make UKOSS aware.

Come and join the UKOSS Steering Committee!

We have an exciting opportunity for a midwife, obstetrician or anaesthetist from Scotland to join the Steering Committee as our Scottish Representative.



If you would like to apply, please submit a two page CV and a short covering letter stating why you would like to undertake the role to UKOSS at ukoss@npeu.ox.ac.uk

Information about the Steering Committee can be found on our [website](#), but please do contact us at ukoss@npeu.ox.ac.uk if you have any questions.

Meet Simran Sharma, a new member of the UKOSS Steering Committee



What is your current role within the UKOSS Steering Committee?

I am the UKOSS representative for Wales. My role involves contributing to the oversight of national surveillance studies, supporting study development and delivery, and helping ensure UKOSS outputs are relevant and impactful for clinicians and patients across the UK.

Where do you currently work and what is your job title?

I am an ST7 Specialty Trainee in Obstetrics and Gynaecology at University Hospital of Wales, Cardiff, with a specialist interest in maternal medicine.

Can you give a brief overview of your career to date?

I moved to Wales to complete my medical degree at Cardiff University and fell in love with the people and the place! So much so that I have undertaken all my postgraduate training in Wales. Alongside clinical training, I have an academic background, including an MD degree I was awarded in 2025. My research so far has focused on maternal sepsis and immune-metabolic adaptations in pregnancy. I have been through the publishing process and have secured grant funding for ongoing research work. I have been involved in national and international collaborative research and aim to carry this on as a consultant. I also have a longstanding interest in leadership and service improvement within obstetrics and gynaecology.

How have you found your first few months on the Steering Committee?

I have found the first few months extremely rewarding and intellectually stimulating. It has been a privilege to work with a multidisciplinary group of clinicians, researchers, and patient representatives, and to gain insight into how large-scale national surveillance studies are developed, delivered, and translated into improvements in maternal care.

What do you enjoy most about your role on the Steering Committee?

What I enjoy most is being part of a group that has a tangible impact on improving outcomes for women and babies. I particularly value the opportunity to contribute a Welsh perspective, support high-quality study design, and help ensure that UKOSS findings inform both clinical practice and future research priorities.

What are your interests/hobbies outside of your working life?

Outside of work, I am a mum to two young children aged two and four, and much of my free time is spent with them. I particularly enjoy cooking together as a family, which is a fun (and very messy!) way to spend time together. I also love travelling as much I can!

Follow us  [@NPEU_UKOS](#)  [@ukoss.bsky.social](#)

Email: ukoss@npeu.ox.ac.uk Web: www.npeu.ox.ac.uk/ukoss

Admin team: 01865 617764

