

WHO recommendations on antenatal care for a positive pregnancy experience: web annexes*

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WHO recommendations on antenatal care for a positive pregnancy experience.

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Web annex 1: Priority questions and outcomes for the antenatal care (ANC) interventions identified for this guideline

P=Population; I=Intervention; C=Comparator; O=Outcomes

K	ey questions	Priority outcomes	
A	. Nutritional interventions		
1.	Dietary interventions A.1.1: For pregnant women (P), do diet and/or exercise interventions (I) compared with standard ANC (C) improve maternal and perinatal outcomes (O)? A.1.2: For pregnant women in undernourished populations (P), does energy and protein dietary education (I) compared with no intervention (C) improve maternal and perinatal outcomes (O)? A.1.3: For pregnant women in undernourished populations (P), do energy and protein dietary supplements (I) compared with no intervention (C) improve maternal and perinatal outcomes (O)? A.1.4: For pregnant women in undernourished populations (P), does high-protein supplementation (I) compared with no high protein supplementation (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (excessive weight gain, anaemia, gestational diabetes mellitus [GDM]) Mode of delivery Maternal satisfaction Maternal mortality Fetal/newborn morbidity (anomaly, infection, small for gestational age [SGA], low birth weight, macrosomia, preterm birth) Fetal/newborn mortality 	
2.	Iron and folic acid supplements A.2.1: For pregnant women (P), does daily iron supplementation (I) (with or without folic acid) compared with no iron supplementation or placebo (C), improve maternal and perinatal outcomes (O)? A.2.2: For pregnant women (P), does intermittent iron supplementation (I) (with or without folic acid) compared with daily iron supplementation (with or without folic acid) (C), improve maternal and perinatal outcomes (O)?	 Maternal morbidity (infections, anaemia) Maternal satisfaction Side-effects Fetal/newborn morbidity (congenital anomaly, low birth weight, preterm birth) Fetal/newborn mortality 	
3.	Calcium supplements A.3: For pregnant women (P), does calcium supplementation (I) compared with no intervention or placebo (C) improve maternal and perinatal outcomes (other than pre-eclampsia) (O)?	 Maternal morbidity (anaemia) Weight gain Maternal satisfaction Mode of delivery Side-effects Maternal mortality Fetal/newborn morbidity (preterm birth, congenital anomaly, intra-uterine growth restriction, SGA, low birth weight) Fetal/newborn mortality 	
4.	Vitamin A supplements A.4: For pregnant women (P), does vitamin A supplementation (I) compared with no intervention or placebo (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (infections, anaemia) Maternal satisfaction Side-effects Fetal/newborn morbidity (congenital anomaly, infections, low birth weight, preterm birth) Fetal/newborn mortality 	

Web annex 1: Priority questions and outcomes for the antenatal care (ANC) interventions identified for this guideline (continued)

Key questions	Priority outcomes
5. Zinc supplements A.5: For pregnant women (P), does zinc supplementation (I) compared with no intervention or placebo (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (infections) Mode of delivery Maternal satisfaction Side-effects Fetal/newborn morbidity (congenital anomaly, SGA, low birth weight, preterm birth) Fetal/newborn mortality
6. Multiple micronutrient supplments A.6: For pregnant women (P), do micronutrient supplements (I) compared with iron and folic acid supplements (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (anaemia, pre-eclampsia/eclampsia [PE/E]) Maternal satisfaction Side-effects Maternal mortality Fetal/newborn morbidity (congenital anomaly, SGA, low birth weight, preterm birth) Fetal/newborn mortality
7. Vitamin B6 (pyridoxine) supplements A.7: For pregnant women (P), does Vitamin B6 (pyridoxine) supplementation (I) compared with no intervention or placebo (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (PE/E) Maternal satisfaction Side-effects Fetal/newborn morbidity (congenital anomaly, low birth weight, preterm birth)
8. Vitamin E and C supplements A.8: For pregnant women (P), do vitamin E and C supplements (I) compared with no intervention or placebo (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (PE/E) Mode of delivery Maternal satisfaction Side-effects Fetal/newborn morbidity (congenital anomaly, infection, SGA, low birth weight, preterm birth) Fetal/newborn mortality
9. Vitamin D supplements A.9: For pregnant women (P), do vitamin D supplements (I) compared with no intervention or placebo (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (PE/E, GDM) Mode of delivery Maternal satisfaction Side-effects Maternal mortality Fetal/newborn morbidity (congenital anomaly, infection, SGA, low birth weight, preterm birth, macrosomia) Fetal/newborn mortality
10. Restricting caffeine intake A.10: For pregnant women (P), does restricting caffeine intake (I) compared with not restricting caffeine intake (C) improve maternal and perinatal outcomes (O)?	 Maternal satisfaction Fetal/newborn morbidity (SGA, low birth weight, preterm birth) Fetal/newborn mortality

Key questions		Priority outcomes		
B. Maternal and fetal assessment				
В.	1. Maternal assessment			
1.	Anaemia B.1.1: For pregnant women (P), what is the diagnostic value of on-site tests for assessing blood haemoglobin concentration (I) compared with the reference standard (full blood count) (C) to detect maternal anaemia (O)?	Sensitivity and specificity in detecting anaemia (< 11 g/dL or < 10 g/dl) and severe anaemia (< 6 g/dL)		
2.	Asymptomatic bacteriuria (ASB) B.1.2: For pregnant women (P), what is the diagnostic value of Gram stain and dipstick on-site urine tests (I) compared with the reference standard (urine culture) (C) to detect ASB (O)?	• Sensitivity and specificity in detecting asymptomatic urinary tract infections (defined as ≥ 105 CFU/mL of a single pathogen)		
3.	Intimate partner violence (IPV) B.1.3: For pregnant women (P), does routine clinical enquiry about IPV in ANC settings (I) compared with no IPV enquiry (C) increase the identification of IPV and improve maternal and perinatal outcomes (O)?	IPV Maternal satisfaction		
Gu	ideline questions with recommendations integrated from other WHO guidelines that are relevant to	ANC maternal assessment		
4.	Gestational diabetes mellitus (GDM) B.1.4: For pregnant women (P), what diagnostic criteria (I) should be used to distinguish between GDM and diabetes in pregnancy (C) to improve maternal and perinatal outcomes (O)?	Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation ¹		
5.	Tobacco use B.1.5: For pregnant women (P), does screening women for tobacco use at ANC visits (I) compared with not screening (C) improve health outcomes (O)?	Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation ²		
6.	Substance abuse B.1.6: For pregnant women (P), does screening women for alcohol and substance abuse at ANC visits (I) compared with not screening (C) improve health outcomes (O)?	Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation ³		
7.	Human immunodeficiency virus (HIV) and syphilis B.1.7: For pregnant women (P), does screening women for HIV infection in ANC settings (I) compared with not screening for HIV (C) improve health outcomes (O)?	Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation ⁴		

- 1. WHO Diagnostic criteria and classification of hyperglycaemia first detected in pregnancy. Geneva: World Health Organization; 2013 (WHO/NMH/MND/13.2; http://www.who.int/diabetes/publications/Hyperglycaemia_In_Pregnancy/en/, accessed 29 September 2016).
- 2. WHO recommendations for the prevention and management of tobacco use and second-hand smoke exposure in pregnancy. Geneva: World Health Organization; 2013 (http://www.who.int/tobacco/publications/pregnancy/guidelinestobaccosmokeexposure/en/, accessed 29 September 2016).
- 3. Guidelines for the identification and management of substance use and substance use disorders in pregnancy. Geneva: World Health Organization; 2014 (http://www.who.int/substance_abuse/publications/pregnancy_guidelines/en/, accessed 29 September 2016.
- 4. Consolidated guidelines on HIV testing services. Geneva: World Health Organization; 2015 (http://apps.who.int/iris/bitstream/10665/179870/1/9789241508926_eng.pdf, accessed 29 September 2016).

Key questions	Priority outcomes
8. Tuberculosis (TB) B.1.8: For pregnant women (P), does screening women for TB infection in ANC settings (I) compared with not screening for TB (C) improve health outcomes (O)?	 Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation⁵
B.2. Fetal assessment	
1. Daily fetal movement counting B.2.1: For pregnant women (P), does daily fetal movement counting (I) compared with standard ANC (C) improve maternal and perinatal outcomes (O)?	 Mode of delivery Maternal satisfaction Fetal/newborn morbidity (low birth weight, preterm birth) Fetal/newborn mortality
2. Symphysis-fundal height (SFH) measurement B.2.2: For pregnant women (P), does SFH measurement (I) compared with clinical palpation for antenatal assessment of fetal growth (C) improve maternal and perinatal outcomes (O)?	 Maternal satisfaction Fetal/newborn morbidity (SGA, low birth weight) Fetal/newborn mortality
3. Antenatal cardiotocography (CTG) B.2.3: For pregnant women (P), does routine antenatal CTG (I) compared with standard ANC (C) improve maternal and perinatal outcomes (O)?	 Reactive cardiotocography Mode of delivery Maternal satisfaction Fetal/newborn mortality
4. Ultrasound scan B.2.4: For pregnant women (P), does routine fetal ultrasound screening (I) in early pregnancy (before 24 weeks of gestation) or late pregnancy (after 24 weeks of gestation) compared with standard ANC (C) improve maternal and perinatal outcomes (O)?	 Detection of multiple pregnancy Maternal satisfaction Fetal/newborn morbidity (congenital anomaly) Fetal/newborn mortality
5. Doppler ultrasound of fetal blood vessels B.2.5: For pregnant women (P), does routine Doppler ultrasound of fetal blood vessels (I) compared with standard ANC (C) improve maternal and perinatal outcomes (O)?	 Maternal satisfaction Fetal/newborn morbidity (SGA, low birth weight) Fetal/newborn mortality
C. Preventive measures	
 Antibiotics for asymptomatic bacteriuria (ASB) C.1: For pregnant women with ASB (P), does a course of antibiotics (I) compared with no antibiotics (C) improve maternal and perinatal outcomes (O)? If so, what duration of treatment is the most effective? 	 Maternal morbidity (infections) Maternal satisfaction Fetal/newborn morbidity (low birth weight, preterm birth) Fetal/newborn mortality
2. Antibiotic prophylaxis to prevent recurrent urinary tract infections (RUTIs) C.2: For pregnant women susceptible to RUTIs (P), do prophylactic antibiotics to prevent RUTIs (I) compared with no intervention (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (infections) Maternal satisfaction Fetal/newborn morbidity (SGA, low birth weight, preterm birth) Fetal/newborn mortality

^{5.} Systematic screening for active tuberculosis: principles and recommendations. Geneva: World Health Organization; 2013 (http://www.who.int/tb/publications/Final_TB_Screening_guidelines.pdf, accessed 29 September 2016).

Web annex 1: Priority questions and outcomes for the antenatal care (ANC) interventions identified for this guideline (continued)

Ke	ey questions	Priority outcomes
3.	Antenatal anti-D immunoglobulin administration C.3: For non-sensitized RhD-negative pregnant women (P), is routine prophylactic antenatal anti-D administration (I) compared with no anti-D (C) effective for preventing Rhesus alloimmunization (O) and improving outcomes?	 Maternal alloimmunization Fetal/newborn morbidity (haemolytic disease of the newborn) Fetal/newborn mortality
4.	Preventive anthelminthic treatment C.4: For pregnant women (P), does prophylactic anthelminthic treatment (I) compared with no intervention (C) improve maternal and perinatal outcomes (O)?	 Maternal morbidity (anaemia) Maternal satisfaction Fetal/newborn morbidity (SGA, low birth weight, preterm birth) Fetal/newborn mortality
5.	Tetanus toxoid vaccination C.5: For pregnant women (P), does vaccination against tetanus (I) compared with no vaccination (C) reduce morbidity and improve outcomes (O)?	 Maternal satisfaction Side-effects Fetal/newborn morbidity (infection) Fetal/newborn mortality
Gu	ideline questions with recommendations integrated from other WHO guidelines that are relevant to	ANC
6.	Malaria prevention: intermittent preventive treatment in pregnancy (IPTp) C.6: For pregnant women (P), does IPTp (I) for malaria compared with no IPTp (C) improve health outcomes (O)?	Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation ⁶
7.	Pre-exposure prophylaxis (PrEP) for HIV prevention C.7: For pregnant women (P), does PrEP for HIV prevention (I) compared with no PreP (C) reduce HIV infection (O)?	Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation ⁷
D.	Interventions for common physiological symptoms	
1.	Nausea and vomiting D.1: For pregnant women (P), what interventions (pharmacological or non-pharmacological) for nausea and vomiting (I) compared with no interventions (C) reduce morbidity and improve outcomes (O)?	 Symptomatic relief from nausea and vomiting Side-effects Maternal satisfaction and/or women's rating of usefulness of treatment
2.	Heartburn D.2: For pregnant women (P), what interventions (pharmacological or non-pharmacological) for heartburn (I) compared with no interventions (C) reduce morbidity and improve outcomes (O)?	 Symptomatic relief from heartburn Side-effects Maternal satisfaction and/or women's rating of usefulness of treatment
3.	Leg cramps D.3: For pregnant women (P), what interventions (pharmacological or non-pharmacological) for leg cramps (I) compared with no interventions (C) reduce morbidity and improve outcomes (O)?	 Symptomatic relief from leg cramps Side-effects Maternal satisfaction and/or women's rating of usefulness of treatment

^{6.} Guidelines for the treatment of malaria, third edition. Geneva: World Health Organization; 2015 (http://apps.who.int/iris/bitstream/10665/162441/1/9789241549127_eng.pdf, accessed 28 September 2016).

^{7.} WHO guideline on when to start antiretroviral therapy and on pre-exposure prophylaxis for HIV. Geneva: World Health Organization; 2015 (http://apps.who.int/iris/bitstream/10665/186275/1/9789241509565_eng. pdf, accessed 28 September 2016).

Web annex 1: Priority questions and outcomes for the antenatal care (ANC) interventions identified for this guideline (continued)

Key questions	Priority outcomes
4. Low back and pelvic pain D.4: For pregnant women (P), what interventions (pharmacological or non-pharmacological) for pelvic and back pain (I) compared with no interventions (C) reduce morbidity and improve outcomes (O)?	 Symptomatic relief from pelvic and back pain Side-effects Maternal satisfaction and/or women's rating of usefulness of treatment
5. Constipation D.5: For pregnant women (P), what interventions (pharmacological or non-pharmacological) for constipation (I) compared with no interventions (C) reduce morbidity and improve outcomes (O)?	 Symptomatic relief from constipation Side-effects Maternal satisfaction and/or women's rating of usefulness of treatment
6. Varicose veins and oedema D.6: For pregnant women (P), what interventions (pharmacological or non-pharmacological) for varicose veins and oedema (I) compared with no interventions (C) reduce morbidity and improve outcomes (O)?	 Symptomatic relief from varicose veins and oedema Side-effects Maternal satisfaction and/or women's rating of usefulness of treatment
E. Health system interventions to improve the utilization and quality of ANC	
1. Woman-held case notes E.1: Should pregnant women carry their own ANC case notes to improve quality of care?	Maternal satisfaction
2. Midwife-led continuity of care (MLCC) E.2: Should a MLCC model of care be recommended for pregnant women to improve quality of care?	 Mode of delivery Maternal satisfaction Maternal mortality Fetal/newborn morbidity (low birth weight, preterm birth) Fetal/newborn mortality
3. Group antental care E.3: Should group ANC be recommended as an alternative to standard ANC care to improve quality of care?	 Mode of delivery Maternal satisfaction Maternal mortality Fetal/newborn morbidity (SGA, preterm birth) Fetal/newborn mortality
4. Community-based interventions to improve communication and support E.4: Should community-based interventions that increase communication with, and support for, pregnant women be recommended to improve ANC coverage and pregnancy outcomes?	 Maternal satisfaction Maternal mortality Fetal/newborn morbidity (low birth weight, preterm birth) Fetal/newborn mortality
5. Task shifting components of antenatal care delivery E.5: Should the optimization of health worker roles through task shifting be used to improve access to ANC?	 Coverage of key ANC interventions Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation⁸

^{8.} WHO recommendations: optimizing health worker roles to improve access to key maternal and newborn health interventions through task shifting. Geneva: World Health Organization; 2012 (http://apps.who.int/iris/bitstream/10665/77764/1/9789241504843_eng.pdf, accessed 28 September 2016).

Web annex 1: Priority questions and outcomes for the antenatal care (ANC) interventions identified for this guideline (continued)

Key questions	Priority outcomes	
6. Recruitment and retention of staff in rural and remote areas E.6: Should education, regulatory, financial and supportive interventions be used to improve recruitment and retention of health workers in remote and rural areas?	 Coverage of key ANC interventions Refer to the relevant WHO guideline for the priority outcomes that informed this recommendation⁹ 	
7. ANC contact schedules E.7: Should alternative models of ANC with four visits (FANC) be recommended instead of standard care of eight visits for the ANC of healthy pregnant women?	 Maternal morbidity (infections, anaemia, PE/E, GDM) Mode of delivery Maternal satisfaction Maternal mortality Fetal/newborn morbidity (SGA, preterm birth) Fetal/newborn mortality 	

^{9.} Increasing access to health workers in remote and rural areas through improved retention: global policy recommendations. Geneva: World Health Organization; 2010 (http://apps.who.int/iris/bitstream/10665/44369/1/9789241564014_eng.pdf, accessed 28 September 2016).

Web annex 2: Changes from the approved scope of this guideline

P=Population; I=Intervention; C=Comparator; O=Outcomes

PICO questions omitted after the ANC guideline proposal was approved	Reason	Consideration of potential bias	
For pregnant women (P), which strategies for screening gestational diabetes mellitus (GDM) and subsequent management (I) compared with alternative strategies (C) reduce morbidity and improve outcomes (O)?	Several potentially relevant Cochrane reviews on GDM screening and prevention, and no diagnostic test accuracy (DTA) reviews, were identified. The WHO Steering Group therefore decided that these questions require in-depth consideration as part of specific WHO guidelines on screening, prevention and treatment of GDM, and could not be attempted within the timeframe of the ANC guideline.	Omitting these questions was not considered to bias the guideline. A specific WHO guideline on GDM is planned by the WHO Department	
For pregnant women (P), what is the prognostic value of GDM detection tests (I) compared with the reference standard (C) in detecting risk factors for poor outcomes (O)?		of Reproductive Health and Research (RHR), in collaboration with diabetes experts, and the relevant WHO departments. Once completed, this ANC guideline will be updated with the appropriate recommendation derived from the GDM guidelines.	
For pregnant women (P), does home uterine monitoring (I) compared with no intervention (C) reduce morbidity and improve outcomes (O)?	On reviewing the PICO questions, guideline methodologists and the WHO Steering Group decided that these questions were outside the scope of the ANC guideline as the target group for these interventions is women at risk of pregnancy complications, i.e. a high-risk group.	Omitting these questions was not considered to bias the guidelines.	
For pregnant women (P), does vibroacoustic stimulation (I) compared with no intervention (C) reduce morbidity and improve outcomes (O)?			
For pregnant women (P), which strategies for diagnosing syphilis (I) compared with alternative strategies (C) reduce morbidity and improve outcomes (O)?	The WHO Steering Group decided that these questions require in-depth consideration as part of a specific WHO guideline on screening for syphilis.	Omitting these questions was not considered to bias the guideline.	
For asymptomatic pregnant women (P), what is the prognostic value of syphilis detection tests (I) compared with the reference standard (C) in detecting risk factors for poor outcomes (O)?			
For pregnant women (P), does lower genital tract infection screening (and treatment) (I) compared with no intervention (C) reduce morbidity and improve outcomes (O)?	The WHO Steering Group and methodologists were unable to synthesize and evaluate the evidence needed to answer these questions within the timeframe of the ANC guideline.	Omitting these questions was not considered to bias the guideline. The value of screening and treating asymptomatic women with lower genital	
For pregnant women (P), what is the prognostic value of tests to detect lower genital tract infections (I) compared with the reference standard (C) in detecting risk factors for poor outcomes (O)?		tract infection remain priority questions for this guideline. The RHR Department is committed to formulating recommendations on these questions within the next five years.	
For pregnant women (P), does prophylactic antibiotic administration to prevent infectious events (I) compared with no intervention (C) reduce morbidity and improve outcomes (O)?			

Web annex 2: Changes from the approved scope of this guideline (continued)

PICO questions omitted after the ANC guideline proposal was approved	Reason	Consideration of potential bias
For pregnant women (P), does vaccination against haemophilus influenza type B (I) compared with no vaccination (C) reduce morbidity and improve outcomes (O)?	The WHO Steering Group decided that these questions require in-depth consideration as part of a specific WHO guideline on vaccinations in pregnancy, and could not be attempted within the time-frame of the ANC guideline.	Omitting these questions was not considered to bias the guideline. A specific WHO guideline on vaccinations in pregnancy needs to be planned.
For pregnant women (P), does vaccination against viral influenza (I) compared with no vaccination (C) reduce morbidity and improve outcomes (O)?		
For pregnant women (P), do interventions (I) to prevent domestic violence against women compared with no intervention (C) reduce morbidity and improve outcomes (O)?	On reviewing the PICO questions, guideline methodologists and the WHO Steering Group decided that this question was outside the scope of the ANC guideline as the target group for this intervention is women experiencing domestic violence (or intimate partner violence [IPV]), i.e. a high-risk group.	Omitting this question was not considered to bias the guidelines.
For pregnant women (P), does iodine supplementation (I) compared with no intervention (C) reduce morbidity and improve outcomes (O)?	A new guideline on iodine supplementation is currently in process. The recommendation on iodine will be integrated into the ANC guideline as soon as possible once the iodine guideline is completed.	Omitting this question was not considered to bias the guideline.

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations

Recommendation	A.1.1	A.1.2	A.1.3
Intervention	Healthy eating and physical activity	Education on increasing energy and protein intake	Balanced energy and protein supplements
Certainty of the evidence	☒ High (EGWG)☒ Moderate (macrosomia, neonatal respiratory morbidity)☐ Low☐ Very low	☐ High ☑ Moderate ☐ Low (LBW) ☐ Very low	☐ High ☑ Moderate (SGA, stillbirths) ☐ Low ☐ Very low
Effects	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Women's values	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Resource use	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Equity	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Acceptability	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Feasibility	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Balance of benefits versus disadvantages	☑ Benefits outweigh disadvantages☐ Benefits and disadvantages are balanced☐ Disadvantages outweigh benefits	 ☑ Benefits outweigh disadvantages ☐ Benefits and disadvantages are balanced ☐ Disadvantages outweigh benefits 	☑ Benefits outweigh disadvantages☐ Benefits and disadvantages are balanced☐ Disadvantages outweigh benefits
GDG decision	☒ Recommended☐ Context-specific recommendation☐ Not recommended	 □ Recommended ☑ Context-specific recommendation □ Not recommended 	□ Recommended □ Context-specific recommendation □ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	A.1.4	A.2.1	A.2.2
Intervention	High-protein supplements	Daily oral iron and folic acid supplements	Intermittent oral iron and folic acid supplements
Certainty of the evidence	□ High (SGA) □ Moderate □ Low □ Very low	☒ High (very PTB)☒ Moderate (maternal infection)☒ Low (anaemia, LBW, Hb)☐ Very low	☐ High ☑ Moderate (nausea) ☑ Low (anaemia, LBW) ☐ Very low
Effects	 □ Favours this option □ Neither favours this option nor other options ☑ Favours other options 	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Women's values	 □ Favours this option □ Neither favours this option nor other options ☑ Favours other options 	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Resource use	 □ Favours this option □ Neither favours this option nor other options ☑ Favours other options 	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Equity	 □ Favours this option □ Neither favours this option nor other options ☑ Favours other options 	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Acceptability	 □ Favours this option □ Neither favours this option nor other options ☑ Favours other options 	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Feasibility	 □ Favours this option □ Neither favours this option nor other options ☑ Favours other options 	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Balance of benefits versus disadvantages	 □ Benefits outweigh disadvantages □ Benefits and disadvantages are balanced ☑ Disadvantages outweigh benefits 	 ☑ Benefits outweigh disadvantages ☐ Benefits and disadvantages are balanced ☐ Disadvantages outweigh benefits 	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits
GDG decision	□ Recommended□ Context-specific recommendation☑ Not recommended	□ Recommended □ Context-specific recommendation □ Not recommended	 □ Recommended ☑ Context-specific recommendation □ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	A.3	A.4	A.5
Intervention	Calcium supplements	Vitamin A supplements	Zinc supplements
Certainty of the evidence	☐ High ☑ Moderate (PTB) ☐ Low ☐ Very low	 ☐ High ☑ Moderate (maternal anaemia) ☑ Low (maternal infection) ☐ Very low 	☐ High ☐ Moderate ☑ Low (PTB) ☑ Very low
Effects	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options
Women's values	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options
Resource use	 ☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options 	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options
Equity	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options
Acceptability	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options
Feasibility	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Balance of benefits versus disadvantages	 □ Benefits outweigh disadvantages □ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits (for all women) 	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits 	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits
GDG decision	 □ Recommended ☑ Context-specific recommendation □ Not recommended 	 □ Recommended ☑ Context-specific recommendation □ Not recommended 	 □ Recommended ☑ Context-specific recommendation □ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	A.6	A.7	A.8
Intervention	MMN supplements	Vitamin B6 supplements	Vitamin E and C supplements
Certainty of the evidence	☐ High (LBW) ☐ Moderate ☐ Low ☐ Very low	☐ High ☐ Moderate ☑ Low ☑ Very low	☒ High (PROM, abdominal pain)☒ Moderate (placental abruption)☐ Low☐ Very low
Effects	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Women's values	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Resource use	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Equity	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Acceptability	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Feasibility	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Balance of benefits versus disadvantages	 □ Benefits outweigh disadvantages □ Benefits and disadvantages are balanced ☑ Disadvantages outweigh benefits 	 □ Benefits outweigh disadvantages □ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits 	 □ Benefits outweigh disadvantages □ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits
GDG decision	 □ Recommended □ Context-specific recommendation ☑ Not recommended 	 □ Recommended □ Context-specific recommendation ☑ Not recommended 	 □ Recommended □ Context-specific recommendation ☑ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	A.9	A.10	B.1.1
Intervention	Vitamin D supplements	Restricting caffeine intake	Diagnosing anaemia (haemoglobinometer vs Hb colour scale)
Certainty of the evidence	☐ High ☑ Moderate (pre-eclampsia, PTB) ☐ Low ☐ Very low	☐ High☑ Moderate (LBW, pregnancy loss)☐ Low☐ Very low	 ☐ High ☑ Moderate (haemoglobinometer has better sensitivity and specificity) ☐ Low ☐ Very low
Effects	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	□ Favours this option □ Neither favours this option nor other options □ Favours other options
Women's values	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	Favours this option Neither favours this option nor other options Favours other options
Resource use	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Equity	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	□ Favours this option □ Neither favours this option nor other options □ Favours other options
Acceptability	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Feasibility	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Balance of benefits versus disadvantages	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits 	 ☒ Benefits outweigh disadvantages ☒ Benefits and disadvantages are balanced ☒ Disadvantages outweigh benefits 	 ☑ Benefits outweigh disadvantages ☐ Benefits and disadvantages are balanced ☐ Disadvantages outweigh benefits
GDG decision	☐ Recommended ☐ Context-specific recommendation ☑ Not recommended	 □ Recommended ☑ Context-specific recommendation □ Not recommended 	 □ Recommended ☑ Context-specific recommendation □ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	B.1.2	B.1.3	B.2.1
Intervention	Diagnosing ASB: Gram stain versus dipstick	Intimate partner violence (IPV)	Daily fetal movement counting
Certainty of the evidence	 ☐ High ☐ Moderate ☐ Low ☒ Very low (Gram stain has better sensitivity and specificity) 	 ☐ High ☐ Moderate ☑ Low (improves IPV detection) ☐ Very low 	☐ High ☐ Moderate ☑ Low (no effect) ☑ Very low (no effect)
Effects	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options
Women's values	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Resource use	☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options
Equity	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Acceptability	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Feasibility	☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Balance of benefits versus disadvantages	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits 	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits 	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits
GDG decision	□ Recommended☑ Context-specific recommendation□ Not recommended	 □ Recommended ☑ Context-specific recommendation □ Not recommended 	 □ Recommended ☑ Context-specific recommendation □ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	B.2.2	B.2.3	B.2.4
Intervention	Symphysis-fundal height (SFH) measurement	Routine antenatal cardiotocography (CTG)	Early ultrasound scan
Certainty of the evidence	☐ High ☐ Moderate ☐ Low ☑ Very low	☐ High ☐ Moderate ☐ Low ☑ Very low (no evidence)	 ☐ High ☐ Moderate ☑ Low (maternal satisfaction, congenital anomalies, IOL, multiple pregnancy) ☐ Very low
Effects	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Women's values	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Resource use	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	 □ Favours this option □ Neither favours this option nor other options ☑ Favours other options
Equity	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Acceptability	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Feasibility	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	 □ Favours this option □ Neither favours this option nor other options ☑ Favours other options
Balance of benefits versus disadvantages	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits 	 □ Benefits outweigh disadvantages □ Benefits and disadvantages are balanced ☑ Disadvantages outweigh benefits 	☑ Benefits outweigh disadvantages☐ Benefits and disadvantages are balanced☐ Disadvantages outweigh benefits
GDG decision	 □ Recommended □ Context-specific recommendation ☑ Not recommended 	 □ Recommended □ Context-specific recommendation ☑ Not recommended 	☒ Recommended☐ Context-specific recommendation☐ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	B.2.5	C.1	C.2
Intervention	Routine Doppler ultrasound of fetal blood vessels	Antibiotics for ASB	Antibiotic prophylaxis to prevent recurrent urinary tract infections
Certainty of the evidence	☐ High☐ Moderate☑ Low (perinatal mortality)☐ Very low	 ☐ High (short course on LBW and ASB persistence) ☐ Moderate ☐ Low ☑ Very low (pyelonephritis) 	☐ High ☐ Moderate ☐ Low ☑ Very low
Effects	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options
Women's values	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options
Resource use	 ☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Equity	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options
Acceptability	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Feasibility	☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Balance of benefits versus disadvantages	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits 	 ☒ Benefits outweigh disadvantages ☒ Benefits and disadvantages are balanced ☒ Disadvantages outweigh benefits 	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits
GDG decision	 □ Recommended □ Context-specific recommendation ☑ Not recommended 	☒ Recommended☐ Context-specific recommendation☐ Not recommended	 □ Recommended ☑ Context-specific recommendation □ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	C.3	C.4	C.5
Intervention	Antenatal anti-D immunoglobulin administration	Prophylactic anthelminthic treatment (one dose)	Tetanus vaccination
Certainty of the evidence	☐ High ☐ Moderate ☐ Low ☑ Very low	☐ High ☑ Moderate ☑ Low ☐ Very low	 ☐ High ☑ Moderate (neonatal mortality) ☑ Low (neonatal tetanus, side-effects) ☐ Very low
Effects	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Women's values	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Resource use	 ☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options 	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Equity	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Acceptability	 ☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options 	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Feasibility	 ☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options 	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Balance of benefits versus disadvantages	 □ Benefits outweigh disadvantages ☑ Benefits and disadvantages are balanced □ Disadvantages outweigh benefits 	 ☒ Benefits outweigh disadvantages ☐ Benefits and disadvantages are balanced ☐ Disadvantages outweigh benefits 	☑ Benefits outweigh disadvantages☐ Benefits and disadvantages are balanced☐ Disadvantages outweigh benefits
GDG decision	□ Recommended☑ Context-specific recommendation□ Not recommended	 □ Recommended ☑ Context-specific recommendation □ Not recommended 	□ Recommended □ Context-specific recommendation □ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	E.1	E.2	E.3
Intervention	Woman-held case notes	Midwife-led continuity of care	Group ANC
Certainty of the evidence	☐ High ☑ Moderate (maternal satisfaction) ☐ Low ☐ Very low	 ☐ High ☒ Moderate (vaginal birth, perinatal mortality, PTB) ☒ Low (caesarean section, maternal satisfaction) ☐ Very low 	☐ High ☐ Moderate ☑ Low (PTB, maternal satisfaction) ☐ Very low
Effects	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Women's values	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Resource use	 ☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options 	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Equity	 ☐ Favours this option ☑ Neither favours this option nor other options ☐ Favours other options 	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Acceptability	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Feasibility	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Balance of benefits versus disadvantages	☑ Benefits outweigh disadvantages☐ Benefits and disadvantages are balanced☐ Disadvantages outweigh benefits	 ☒ Benefits outweigh disadvantages ☒ Benefits and disadvantages are balanced ☒ Disadvantages outweigh benefits 	 ☒ Benefits outweigh disadvantages ☐ Benefits and disadvantages are balanced ☐ Disadvantages outweigh benefits
GDG decision	☒ Recommended☐ Context-specific recommendation☐ Not recommended	 □ Recommended ☑ Context-specific recommendation □ Not recommended 	 □ Recommended ☑ Context-specific recommendation □ Not recommended

Web annex 3: Guideline Development Group (GDG) judgements related to the recommendations (continued)

Recommendation	E.4.1	E.4.2	E.7
Intervention	Participatory learning and action cycles with women's groups	Community mobilization and ANC home visits	Four-visit ANC model vs "standard" ANC models
Certainty of the evidence	 ☐ High ☐ Moderate ☑ Low (maternal mortality, perinatal mortality) ☐ Very low 	☐ High ☐ Moderate (perinatal mortality, ANC coverage 1+) ☐ Low ☐ Very low	 ☐ High ☑ Moderate (perinatal mortality) ☑ Low (maternal satisfaction) ☐ Very low
Effects	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options (8 visits)
Women's values	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Resource use	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options
Equity	☒ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Acceptability	☒ Favours this option☒ Neither favours this option nor other options☒ Favours other options	☑ Favours this option☐ Neither favours this option nor other options☐ Favours other options	☐ Favours this option ☐ Neither favours this option nor other options ☑ Favours other options
Feasibility	☐ Favours this option☑ Neither favours this option nor other options☐ Favours other options	 □ Favours this option ☑ Neither favours this option nor other options □ Favours other options 	☐ Favours this option ☐ Neither favours this option nor other options ☐ Favours other options
Balance of benefits versus disadvantages	☑ Benefits outweigh disadvantages☐ Benefits and disadvantages are balanced☐ Disadvantages outweigh benefits	☑ Benefits outweigh disadvantages☐ Benefits and disadvantages are balanced☐ Disadvantages outweigh benefits	 □ Benefits outweigh disadvantages □ Benefits and disadvantages are balanced ☑ Disadvantages (of 4 visits) outweigh benefit
GDG decision	☐ Recommended☑ Context-specific recommendation☐ Not recommended	 □ Recommended ☑ Context-specific recommendation □ Not recommended 	☑ Recommended (8 visits)☐ Context-specific recommendation☐ Not recommended

ANC: antenatal care; ASB: asymptomatic bacteriuria; CTG: cardiotocography; EGWG: excessive gestational weight gain; GDG: Guideline Development Group; Hb: haemoglobin; IOL: induction of labour; IPV: intimate partner violence; LBW: low birth weight; MMN: multiple micronutrient; PROM: prelabour rupture of membranes; PTB: preterm birth; SGA: small for gestational age



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