Comparison 1: Early discharge following vaginal birth compared with usual discharge

Source: Jones E, Stewart F, Taylor B, Davis PG, Brown SJ. Early postnatal discharge from hospital for healthy mothers and term infants. Cochrane Database Syst Rev. 2021;(6):CD002958.

Certainty assessment							№ of patients		Effect		O. Asia	
Nº of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Early discharge	Usual discharge	Relative (95% CI)	Absolute (95% CI)	Certainty (GRADE)	Importance
Postparti	ım depression	within 6 month	s									
2	randomized trials	serious ^a	not serious	not serious	very serious ^{b,c}	none	5/263 (1.9%)	13/271 (4.8%)	RR 0.43 (0.15 to 1.19)	27 fewer per 1000 (from 41 fewer to 9 more)	⊕○○○ VERY LOW	CRITICAL
Materna	readmission w	ithin 6 weeks		•	•			•				-
6	randomized trials	serious ^d	not serious	serious ^e	serious ^b	none	37/2213 (1.7%)	9/715 (1.3%)	RR 1.32 (0.58 to 3.02)	4 more per 1000 (from 5 fewer to 25 more)	⊕○○○ VERY LOW	CRITICAL
Women's	satisfaction w	ith postnatal ca	re (continuous d	ata)				•				
2	randomized trials	serious ^a	not serious	not serious	serious ^f	none	171	135	-	SMD 0.74 higher (0.5 higher to 0.98 higher)	⊕⊕○○ LOW	CRITICAL
Number	of women who	perceive their	hospital stay to b	e too short	•	1	1	1	1			1
1	randomized trials	serious ^a	not serious	not serious	very serious ^{b,g}	none	2/41 (4.9%)	1/41 (2.4%)	RR 2.00 (0.19 to 21.21)	24 more per 1000 (from 20 fewer to 493 more)	⊕○○○ VERY LOW	CRITICAL
Number	of women who	perceive their	hospital stay to b	e too long	,		<u> </u>	•	l			·
1	randomized trials	serious ^a	not serious	not serious	very serious ^{b,g}	none	5/41 (12.2%)	9/41 (22.0%)	RR 0.56 (0.20 to 1.52)	97 fewer per 1000 (from 176 fewer to 114 more)	⊕○○○ VERY LOW	CRITICAL
Infant mo	ortality within 2	8 days			1		!	1	!			!
1	randomized trials	very serious ^h	not serious	serious ⁱ	very serious ^{b,c}	none	3/1667 (0.2%)	1/217 (0.5%)	RR 0.39 (0.04 to 3.74)	3 fewer per 1000 (from 4 fewer to 13 more)	⊕○○○ VERY LOW	CRITICAL

Certainty assessment						№ of patients		Effect		0.4.5.6		
Nº of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Early discharge	Usual discharge	Relative (95% CI)	Absolute (95% CI)	Certainty (GRADE)	Importance
Infant mo	ortality within 1	year										
2	randomized trials	very serious ^h	not serious	serious ⁱ	very serious ^{b,g}	none	4/1716 (0.2%)	2/270 (0.7%)	RR 0.45 (0.07 to 2.77)	4 fewer per 1000 (from 7 fewer to 13 more)	⊕○○○ VERY LOW	CRITICAL
Infants re	admitted for n	eonatal morbid	lity within 7 days									
1	randomized trials	serious ^d	not serious	not serious	very serious ^{b,g}	none	1/50 (2.0%)	0/54 (0.0%)	RR 3.24 (0.13 to 77.63)	0 fewer per 1000 (from 0 fewer to 0 fewer)	⊕○○○ VERY LOW	CRITICAL
Infants re	admitted for n	eonatal morbid	lity within 28 day	s – mode of bir	th subgroups							-
5	randomized trials	serious ^d	not serious	serious ^e	serious ^b	none	26/2160 (1.2%)	8/694 (1.2%)	RR 1.30 (0.55 to 3.09)	3 more per 1000 (from 5 fewer to 24 more)	⊕○○○ VERY LOW	CRITICAL
Women b	oreastfeeding (e	exclusively or p	artially) at 6 wee	ks postpartum								-
6	randomized trials	serious ^d	serious ^j	serious ^e	serious ^b	none	641/2388 (26.8%)	315/724 (43.5%)	RR 1.15 (0.90 to 1.47)	65 more per 1000 (from 44 fewer to 204 more)	⊕○○○ VERY LOW	CRITICAL
Women b	oreastfeeding (exclusively or p	artially) at 12 wee	eks postpartum				•				
1	randomized trials	serious ^a	not serious	not serious	not serious	none	141/213 (66.2%)	119/217 (54.8%)	RR 1.21 (1.03 to 1.41)	115 more per 1000 (from 16 more to 225 more)	⊕⊕⊕○ MODERATE	CRITICAL

CI: confidence interval; RR: risk ratio; SMD: standardized mean difference.

a. The pooled effect provided by studies "B".

b. Wide confidence interval crossing the line of no effect.

c. Less than 30 events.

d. Most of the pooled effect provided by studies "B" or "C" with ≤ 50% of studies "B".

e. Time of discharge from two studies (Hellman 1962 and Smith-Hanrahan 1995) was reported as over 72 hours.

f. Less than 400 women.

g. Less than 300 women and less than 30 events.

h. Most of the pooled effect provided by studies "B" or "C" with > 50% of studies "C".

i. Time of discharge from one of the trials (Hellman 1962) was reported as over 72 hours.

j. Statistical heterogeneity ($I^2 \ge 60\%$ or $Chi^2 \le 0.05$).