

THE LANCET

Supplementary appendix

This appendix formed part of the original submission and has been peer reviewed.
We post it as supplied by the authors.

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Supplementary Table 1: Recruitment by centre

Centre	Planned delivery (n=448)	Expectant management (n=451)
St Thomas' Hospital, London	40 (9%)	40 (9%)
Darent Valley Hospital	22 (5%)	20 (4%)
St Mary's Hospital, Manchester	28 (6%)	22 (5%)
Bradford Royal Infirmary	16 (4%)	12 (3%)
West Middlesex University NHS Trust	26 (5%)	31 (7%)
Nottingham City Hospital	11 (3%)	15 (3%)
Leeds Teaching Hospitals - St James'	18 (4%)	15 (3%)
Liverpool Women's	22 (5%)	24 (5%)
Queens Medical Centre	10 (2%)	13 (3%)
Royal Victoria Infirmary	18 (4%)	21 (5%)
James Cook University Hospital	18 (4%)	19 (4%)
Sunderland Royal Hospital	17 (4%)	21 (5%)
University College Hospital	10 (2%)	14 (3%)
Birmingham Women's Hospital	11 (3%)	9 (2%)
St George's Hospital	8 (2%)	7 (2%))
Royal Stoke University Hospital	7 (2%)	7 (2%)
Western Sussex Hospitals	7 (2%)	11 (2%)
Whittington Hospital	4 (1%)	3 (1%)
ABM University Hospitals, Wales	23 (5%)	22 (5%)
Birmingham City Hospital	8 (2%)	7 (2%)
Birmingham Heartlands Hospital	6 (1%)	1 (0%)
Warrington and Halton Hospitals	2 (0%)	3 (1%)
Chesterfield Royal Hospital	5 (1%)	8 (2%)
Royal United Hospital, Bath	4 (1%)	5 (1%)
Kingston Hospital NHS Trust	16 (4%)	11 (2%)
Leighton Hospital	6 (1%)	7 (2%)
Leicester Royal infirmary	8 (2%)	8 (2%)
Shrewsbury and Telford Hospital NHS Trust	2 (0%)	3 (1%)
Royal Preston Hospital	2 (0%)	3 (1%)
Northampton General	6 (1%)	7 (1%)
Gloucestershire Royal Hospital	0 (0%)	2 (0%)

St Michael's Hospital, Bristol	2 (0%)	5 (1%)
Royal London Hospital	5 (1%)	5 (1%)
Whipps Cross Hospital	9 (2%)	7 (2%)
New Cross Hospital, wolverhampton	4 (1%)	4 (1%)
Cambridge University Hospitals	3 (1%)	0 (0%)
Chelsea and Westminster Hospital	2 (0%)	5 (1%)
Royal Bolton Hospital	4 (1%)	2 (0%)
St Helier Hospital	2 (0%)	2 (0%)
University Hospital, Lewisham	0 (0%)	2 (0%)
Luton and Dunstable	1 (0%)	0 (0%)
Epsom Hospital	2 (0%)	0 (0%)
Queen Elizabeth Hospital, Greenwich	5 (1%)	1 (0%)
Queen's Hospital, Romford	2 (0%)	2 (0%)
Croydon University Hospital	23 (5%)	25 (6%)
Broomfield Hospital, Chelmsford	3 (1%)	0 (0%)

Supplementary Table 2: Additional maternal demographic and pregnancy characteristics at trial entry

	Planned delivery (n = 448)	Expectant management (n = 451)
Median (IQR) gestational age at booking (weeks)	10 (8 to 12)	10 (8 to 12)
Deprivation Index quintile (England only)		
1 (Least deprived)	41/425 (10%)	25/428 (6%)
2	53/425 (13%)	53/428 (12%)
3	64/425 (15%)	72/428 (17%)
4	106/425 (25%)	118/428 (28%)
5 (Most deprived)	161/425 (38%)	160/428 (37%)
Centre in Wales (quintiles not available)	23	22
Parity (previous pregnancies ≥24 weeks' gestation)*		
0	254 (57%)	260 (58%)
1	104 (23%)	103 (23%)
2	49 (11%)	52 (12%)
>2	41 (9%)	36 (8%)
Mode of previous deliveries		
Total number of previous deliveries	368	335
Spontaneous vaginal delivery	241/368 (66%)	201/335 (60%)
Assisted vaginal delivery	20/368 (5%)	24/335 (7%)
Caesarean section	102/368 (28%)	110/335 (33%)
Unknown	5/368 (1%)	0/335 (0%)
Previous pregnancies <24 weeks' gestation		
0	295 (66%)	309 (69%)
1	96 (21%)	87 (19%)
2	28 (6%)	33 (7%)
>2	29 (7%)	22 (5%)
Body mass index (kg/m²)		
<18.5	4 (1%)	4 (1%)
18.5-24.9	126 (28%)	114 (25%)
25.0-29.9	120 (27%)	146 (32%)
30.0-39.9	161 (36%)	153 (34%)
≥40.0	37 (8%)	34 (8%)

First trimester Pregnancy-associated plasma protein-A		
Multiple of the Median		
Number recorded	159 (36%)	172 (39%)
Median (IQR)	0.80 (0.51 to 1.27)	0.85 (0.51 to 1.35)
Second trimester uterine artery Doppler mean pulsatility index		
Number recorded	89 (20%)	91 (20%)
Median (IQR)	1.20 (0.94 to 1.49)	1.09 (0.88 to 1.49)
Parameters related to diagnosis of pre-eclampsia		
Highest blood pressure reading that led to diagnosis (mmHg)		
If based on single diastolic blood pressure ≥ 110 mmHg: n (%)	53 (12%)	64 (14%)
Mean (SD) systolic blood pressure	163.8 (16.76)	166.1 (15.07)
Mean (SD) diastolic blood pressure	114.2 (6.30)	114.1 (5.24)
If based on 2 diastolic blood pressure readings ≥ 90 mmHg, mean of 2 readings: n (%)	395 (88%)	387 (86%)
Mean (SD) systolic blood pressure	149.7 (9.99)	150.0 (10.19)
Mean (SD) diastolic blood pressure	96.7 (4.37)	96.5 (4.06)
All participants: n (%)	448 (100%)	451 (100%)
Mean (SD) systolic blood pressure	151.4 (11.88)	152.3 (12.36)
Mean (SD) diastolic blood pressure	98.8 (7.30)	99.0 (7.47)
Additional parameters leading to diagnosis of pre-eclampsia (non-exclusive)		
Urinary protein-creatinine ratio ≥ 30 (mg/mmol): n (%)	405 (90%)	407 (90%)
Median (IQR) (if ≥ 30 mg/mmol)	92 (50 to 188)	87 (47 to 187)
24 hr urinary protein excretion ≥ 300 (mg/24hrs): n (%)	18 (4%)	21 (5%)
Median (IQR) (if ≥ 300 mg/24hrs)	550 (400 to 1000)	900 (600 to 50000)
Creatinine >90 μ mol/L: n (%)	14 (3%)	11 (2%)
Median (IQR) (if >90 μ mol/L)	100 (94 to 110)	99 (91 to 111)
Alanine or aspartate transaminase >70 IU/L: n (%)	19 (4%)	15 (3%)
Median (IQR) (if >70 IU/L)	107 (84 to 211)	105 (83 to 317)
Platelet count $<150 \times 10^9$ /L: n (%)	44 (10%)	43 (10%)
Median (IQR) (if $<150 \times 10^9$ /L)	130 (108 to 140)	131 (118 to 144)
Estimated fetal weight $<10^{\text{th}}$ centile on ultrasound	61 (14%)	66 (15%)
Antihypertensive medication at study entry	359 (80%)	374 (83%)

One oral agent	240/359 (67%)	241/374 (64%)
Two or more oral agents	117/359 (33%)	132/374 (35%)
One intravenous agent	2/359 (1%)	5/374 (1%)
Aspirin prescribed during pregnancy	170 (38%)	189 (42%)
Median (IQR) gestational age aspirin first prescribed (weeks)	13 (11 to 16)	12 (11 to 16)
Low molecular weight heparin prescribed during pregnancy	125 (28%)	117 (26%)
Median (IQR) Gestational age heparin first prescribed (weeks)	33 (31 to 34)	34 (31 to 35)
Most recent proteinuria reading		
Urinary protein-creatinine ratio recorded: n (%)	434 (97%)	441 (98%)
Median (IQR) (mg/mmol)	83 (42 to 186)	80 (42 to 172)
24 hr urinary protein excretion recorded: n (%)	15 (3%)	14 (3%)
Median (IQR) (mg/24hrs)	78 (31 to 550)	107 (31 to 460)
Most recent lab parameters prior to study entry		
Median (IQR) haemoglobin (g/L)	116 (108 to 124)	117 (108 to 124)
Median (IQR) platelet count ($\times 10^9/L$)	213 (174 to 255)	210 (174 to 251)
Median (IQR) creatinine ($\mu\text{mol/L}$)	59 (50 to 68)	59 (51 to 67)
Median (IQR) alanine aminotransferase (U/L)	15 (10 to 22)	15 (10 to 22)
n (%)	424 (95%)	422 (94%)
Median (IQR) aspartate aminotransferase (U/L)	20 (15 to 32)	20 (15 to 24)
n (%)	51 (11%)	59 (13%)
Median (IQR) Placental growth factor (pg/ml)	16 (12 to 43)	12 (12 to 22)
n (%)	33 (7%)	28 (6%)
Median (IQR) uric acid ($\mu\text{mol/L}$)	366 (303 to 416)	357 (300 to 424)
n (%)	166 (37%)	165 (37%)
Bishop score assessed at study entry	9 (2%)	6 (1%)
<2	2/9 (22%)	2/6 (33%)
2-6	7/9 (78%)	4/6 (67%)
Fetal growth scan in last two weeks	366 (82%)	375 (83%)
Suspected fetal growth restriction	79/366 (22%)	85/375 (23%)
Indicator of fetal growth restriction (non-exclusive)		
Abdominal circumference <10 th centile	23 (5%)	32 (7%)
Estimated fetal weight <10 th centile	67 (15%)	73 (16%)

Umbilical artery pulsatility index >95 th centile	8 (2%)	13 (3%)
Absent or reversed umbilical artery end diastolic flow	2 (0%)	5 (1%)
Amniotic fluid index <5 th centile	4 (1%)	7 (2%)
In-patient at time of trial entry	362 (81%)	371 (82%)

Data are n (%) unless shown otherwise. n/N (%) indicates that the denominator only includes participants with a relevant measurement for that variable.

Supplementary Table 3: Additional secondary maternal outcomes

	Planned delivery (n=448)	Expectant management (n=451)
Components by category (non-exclusive)		
Maternal death	0 (0%)	1 (0%)
Central nervous system		
Eclampsia	3 (1%)	4 (1%)
Glasgow coma score <13	0 (0%)	0 (0%)
Stroke or reversible ischaemic neurological deficit	0 (0%)	0 (0%)
Transient ischaemic attack	0 (0%)	0 (0%)
Cortical blindness or retinal detachment	0 (0%)	0 (0%)
Posterior reversible encephalopathy	0 (0%)	0 (0%)
Cardiorespiratory		
Positive inotropic support	0 (0%)	1 (0%)
Infusion of a third parenteral antihypertensive drug	2 (0%)	0 (0%)
Myocardial ischaemia or infarction	1 (0%)	0 (0%)
SpO ₂ <90%	2 (0%)	3 (1%)
≥50% FiO ₂ for >1 hr	1 (0%)	0 (0.0)
Intubation (other than for caesarean section)	2 (0%)	0 (0%)
Pulmonary oedema	1 (0%)	2 (0%)
Haematological		
Transfusion of any blood product	20 (5%)	23 (5%)
Platelet count <50×10 ⁹ per L, with no transfusion	2 (0%)	4 (1%)
Hepatic		
Hepatic dysfunction	44 (10%)	63 (14%)
Hepatic haematoma or rupture	0 (0%)	0 (0%)
Renal		
Acute renal insufficiency (creatinine >150 µmol/L; no pre-existing renal disease)	3 (1%)	4 (1%)
Acute renal failure (creatinine >200 µmol/L; pre-existing renal disease)	0 (0%)	0 (0%)
Dialysis	0 (0%)	0 (0%)
Other		

Placental abruption	4 (1%)	4 (1%)
Systolic blood pressure ≥ 160 mmHg post randomisation	267 (60%)	313 (70%)
Systolic blood pressure ≥ 160 mmHg (randomisation to delivery)	203 (45%)	261 (58%)
Systolic blood pressure ≥ 160 mmHg (delivery to post-delivery discharge)	172 (39%)	173 (39%)
Highest BP recorded: randomisation to delivery		
Mean (SD) systolic blood pressure (mmHg)	159.4 (17%)	164.4 (17%)
Mean (SD) diastolic blood pressure (mmHg)	95.0 (11%)	97.7 (12%)
Highest BP recorded: delivery to post-delivery discharge		
Mean (SD) systolic blood pressure (mmHg)	155.8 (16%)	156.6 (16%)
Mean (SD) diastolic blood pressure (mmHg)	91.5 (12%)	92.5 (12%)
Antihypertensive medication: randomisation to delivery	381 (85%)	405 (90%)
One oral agent	233/381 (61%)	185/405 (46%)
Two or more oral agents	147/381 (39%)	218/405 (54%)
One intravenous agent	17/381 (5%)	37/405 (9%)
Two or more intravenous agents	3/381 (1%)	4/405 (1%)
Anti-hypertensive drugs administered (non-exclusive)		
Hydralazine	10/381 (3%)	25/405 (6%)
Labetalol	328/381 (86%)	353/405 (87%)
Methyldopa	39/381 (10%)	61/405 (15%)
Nifedipine	162/381 (43%)	222/405 (55%)
Amlodipine	5/381 (1%)	5/405 (1%)
Atenolol	2/381 (1%)	3/405 (1%)
Diltiazem	0/381 (0%)	0/405 (0%)
Doxazosin	2/381 (1%)	6/405 (2%)
Ketaserin	0/381 (0%)	0/405 (0%)
Propranolol	0/381 (0%)	1/405 (0%)
Verapamil	0/381 (0%)	0/405 (0%)
Other	2/381 (1%)	3/405 (1%)
Progression to HELLP syndrome	7 (2%)	10 (2%)
Magnesium sulfate: randomisation to delivery	31 (7%)	69 (15%)
Low molecular weight heparin: randomisation to delivery	157 (35%)	208 (46%)
Steroids for fetal lung maturation	291 (65%)	248 (55%)

Number of doses of steroids		
1	12/291 (4%)	14/248 (6%)
2	277/291 (95%)	229/248 (92%)
3	0/291 (0%)	0/248 (0%)
≥4	2/291 (1%)	5/248 (2%)
Suspected fetal growth restriction post randomisation	13 (3%)	41 (9%)
Indicator of fetal growth restriction (non-exclusive)		
Abdominal circumference <10 th centile	6	15
Estimated fetal weight <10 th centile	8	28
Umbilical artery pulsatility index >95 th centile	3	13
Absent or reversed umbilical artery end diastolic flow	2	3
Amniotic fluid index <5 th centile	2	7
Onset of labour		
Induced	304 (68%)	275 (61%)
Method of induction if induced (non-exclusive)		
Prostaglandin gel/pessary	275/304 (91%)	238/275 (87%)
Foley catheter	13/304 (4%)	7/275 (3%)
Artificial rupture of membranes	133/304 (44%)	120/275 (44%)
Syntocinon	99/304 (33%)	90/275 (33%)
Other	1/304 (0%)	3/275 (1%)
Estimated amount of blood loss at delivery (mls)		
Mean (SD)	559·0 (583·1)	557·9 (454·8)
Median (IQR)	406 (300 to 600)	400 (300 to 650)
Confirmed maternal sepsis (positive blood or urine cultures) between randomisation and hospital discharge	2 (0%)	6 (1%)
Blood culture	1/2 (50%)	5/6 (83%)
Urine culture	1/2 (50%)	1/6 (17%)

Data are n (%) unless shown otherwise. n/N (%) indicates that the denominator only includes participants with a relevant measurement for that variable. HELLP: haemolysis, elevated liver enzymes, low platelets syndrome.

Supplementary Table 4: Process outcomes: time between randomisation to initiation of delivery and delivery

	Planned delivery (n = 448)	Expectant management (n = 451)
Time between randomisation and initiation of delivery (days)		
Overall		
n	447	450
Median (IQR)	1 (1 to 2)	5 (3 to 8)
By gestational age at randomisation		
34⁺⁰ to 34⁺⁶		
n (%)	131 (29%)	135 (30%)
Median (IQR)	1 (1 to 2)	6 (2 to 11)
35⁺⁰ to 35⁺⁶		
n (%)	136 (30%)	131 (29%)
Median (IQR)	1 (1 to 2)	6 (3 to 10)
36⁺⁰ to 36⁺⁶		
n (%)	180 (40%)	184 (41%)
Median (IQR)	1 (1 to 2)	4 (2 to 6)
Time between randomisation and delivery (days)		
Overall		
n	447	451
Median (IQR)	2 (1 to 4)	6 (3 to 9)
By gestational age at randomisation		
34⁺⁰ to 34⁺⁶		
n (%)	131 (29%)	135 (30%)
Median (IQR)	3 (1 to 4)	7 (3 to 12)
35⁺⁰ to 35⁺⁶		
n (%)	136 (30%)	132 (29%)
Median (IQR)	2 (1 to 3)	7 (4 to 11)
36⁺⁰ to 36⁺⁶		
n (%)	180 (40%)	184 (41%)
Median (IQR)	2 (2 to 4)	5 (4 to 7)

Supplementary Table 5: Additional secondary perinatal outcomes (Intention To Treat analysis)

	Planned delivery (n = 471)	Expectant management (n = 475)
Mode of delivery		
Spontaneous vaginal	169 (36%)	139 (29%)
Spontaneous vaginal (cephalic)	165 (35%)	138 (29%)
Spontaneous vaginal (breech)	4 (1%)	1 (0%)
Assisted vaginal (cephalic)	40 (9%)	47 (10%)
Assisted vaginal – vacuum	13 (3%)	19 (4%)
Assisted vaginal – forceps	27 (6%)	28 (6%)
Caesarean section	260 (55%)	289 (61%)
Pre-labour caesarean section	153 (33%)	168 (35%)
Emergency caesarean section	107 (23%)	121 (26%)
Indication for assisted vaginal delivery (non-exclusive)		
Maternal comorbidity or disease	1/40 (3%)	3/47 (6%)
Failure to progress in second stage	16/40 (40%)	17/47 (36%)
Suspected fetal distress	28/40 (70%)	30/47 (64%)
Indication for caesarean delivery (non-exclusive)		
Maternal comorbidity or disease	40/260 (15%)	78/289 (27%)
Previous caesarean delivery/uterine surgery	57/260 (22%)	57/289 (20%)
Failure to progress in first stage	39/260 (15%)	46/289 (16%)
Failure to progress in second stage	2/260 (1%)	1/289 (0%)
Suspected fetal distress	83/260 (32%)	101/289 (35%)
Failed instrumental delivery	3/260 (1%)	1/289 (0%)
Fetal presentation not cephalic	42/260 (16%)	31/289 (11%)
Twins	6/260 (2%)	9/289 (3%)
Maternal request	7/260 (3%)	1/289 (0%)
Gestational age at delivery (days)		
<37 weeks	387 (83%)	261 (55%)
Baby sex		
Boy	240 (51%)	233 (49%)
Girl	229 (49%)	242 (51%)
Umbilical artery pH <7.05	6/281 (2%)	7/266 (3%)
Umbilical arterial pH collected	281 (60%)	266 (56%)

Principal recorded indication for neonatal unit admission		
Number of babies admitted to the neonatal unit*	196	159
Preterm		
Prematurity	83 (42%)	40 (25%)
Cardiorespiratory		
Respiratory disease	47 (24%)	41 (26%)
Cardiovascular disease	0 (0%)	1 (1%)
Failed oximetry testing	0 (0%)	1 (1%)
Gastric, Hepatic, Metabolic		
Gastrointestinal tract disease	0 (0%)	0 (0%)
Jaundice	12 (6%)	11 (7%)
Hypoglycaemia	21 (11%)	31 (20%)
Other metabolic disease	0 (0%)	0 (0%)
Neurological		
Convulsions	1 (1%)	0 (0%)
Hypoxic ischaemic encephalopathy	0 (0%)	0 (0%)
Poor condition at birth	2 (1%)	3 (2%)
Neonatal abstinence syndrome	0 (0%)	0 (0%)
Other neurological disease	0 (0%)	0 (0%)
Infection		
Infection suspected/confirmed	9 (5%)	12 (8%)
Size, weight, feeding		
Intrauterine growth restriction/ Small for gestational age infant	8 (4%)	10 (6%)
Poor feeding or weight loss	4 (2%)	2 (1%)
Anomaly or trauma		
Congenital anomaly suspected/ confirmed	2 (1%)	0 (0%)
Birth trauma/ injury	0 (0%)	0 (0%)
Relating to carer		
Social issues/Foster care	0 (0%)	0 (0%)
Maternal admission/emergency	1 (1%)	2 (1%)
Specialist care		
Surgery	0 (0%)	0 (0%)
Palliative care	0 (0%)	0 (0%)

Monitoring or investigation		
Monitoring	4 (2%)	5 (3%)
Exclusively for specific investigation	0 (0%)	0 (0%)
Continuing care	2 (1%)	0 (0%)
Need for respiratory support	45 (10%)	48 (10%)
Type of respiratory support needed (non-exclusive)		
Endotracheal ventilation	10/45 (22%)	14/48 (29%)
Continuous positive airway pressure	36/45 (80%)	37/48 (77%)
High flow oxygen	12/45 (27%)	17/48 (35%)
Cerebral ultrasound scan performed	18 (4%)	24 (5%)
Abnormalities found	2/18 (11%)	1/24 (4%)
Intraventricular haemorrhage (IVH) Grade I-II	1/2 (50%)	0/1 (0%)
Intraventricular haemorrhage (IVH) causing ventricular distension	1/2 (50%)	0/1 (0%)
Other	0/2 (0%)	1/1 (100%)
Sepsis confirmed	3 (1%)	2 (0%)
Positive blood cultures	3/3 (100%)	1/2 (50%)
Cerebrospinal fluid cultures	0/3 (0%)	1/2 (50%)
Necrotising enterocolitis confirmed (Bell's stage 2 or 3)	0 (0%)	0 (0%)
Seizures	0 (0%)	0 (0%)
Diagnosed Encephalopathy	0 (0%)	0 (0%)
Diagnosed hypoglycaemia (blood glucose <2.6 mmol/L on ≥2 consecutive occasions)	80 (17%)	72 (15%)
Intravenous dextrose required	32/80 (40%)	32/72 (44%)
Tube feeding required	41/80 (51%)	45/72 (63%)
Method of infant feeding 24 hrs prior to discharge		
Exclusive breast-feeding	112 (24%)	139 (30%)
Mixed feeding	174 (38%)	161 (34%)
Exclusive formula feeding	176 (38%)	168 (36%)

Data are n (%) unless shown otherwise. n/N (%) indicates that the denominator only includes participants with a relevant measurement for that variable.

*Number of babies admitted to the neonatal unit (denominator for the principal recorded indications).

Supplementary Table 6: Secondary perinatal outcomes post randomisation (by Per Protocol analysis)

	Planned delivery (n = 342)	Expectant management (n = 470)	Adjusted effect measure* (95% CI)
Stillbirth	0 (0%)	0 (0%)	-
Neonatal deaths within 7 days of delivery	0 (0%)	0 (0%)	-
Neonatal death before discharge	0 (0%)	0 (0%)	-
Median (IQR) gestational age at delivery (days)	252 (246 to 257)	258 (251 to 260)	-4.0 (-4.6, -3.4)
Mode of delivery			
Spontaneous vaginal	127 (37%)	138 (29%)	1.21 (1.01, 1.44)
Assisted vaginal	34 (10%)	46 (10%)	0.97 (0.64, 1.46)
Caesarean section	181 (53%)	286 (61%)	0.90 (0.81, 1.00)
Median (IQR) birth weight (g)	2400 (2060 to 2780)	2483 (2150 to 2912)	-109 (-167, -51)
Median (IQR) birth weight centile†	34 (17 to 61)	30 (13 to 61)	2.5 (-2.3, 7.4)
Birth weight <10 th centile	53 (16%)	95 (20%)	0.77 (0.56, 1.05)
Birth weight <3 rd centile	13 (4%)	27 (6%)	0.69 (0.36, 1.33)
Median (IQR) Apgar score at 5 minutes post birth	10 (9 to 10)	10 (9 to 10)	-
Median (IQR) umbilical arterial pH	7.26 (7.19 to 7.30)	7.25 (7.20 to 7.30)	0.00 (-0.01, 0.02)
Umbilical arterial pH collected	201 (59%)	265 (56%)	
Number of infants admitted to neonatal unit	155 (45%)	155 (33%)	1.40 (1.18, 1.66)
Principal recorded indication for neonatal unit admission			
Prematurity	66/155 (43%)	38/155 (25%)	
Respiratory disease	34/155 (22%)	39/155 (25%)	
Hypoglycaemia	19/155 (12%)	31/155 (20%)	
Jaundice	10/155 (7%)	11/155 (7%)	
Infection suspected/confirmed	7/155 (5%)	12/155 (8%)	
Intrauterine growth restriction/ Small for gestational age infant	7/155 (5%)	10/155 (7%)	
Other	12/155 (8%)	14/155 (9%)	
Need for respiratory support	32 (9%)	46 (10%)	0.98 (0.55, 1.77)
Need for supplementary oxygen prior to discharge	47 (14%)	47 (10%)	1.41 (0.97, 2.07)
Median (IQR) supplemental oxygen required	1 (1 to 2)	2 (1 to 3)	

Cerebral ultrasound abnormalities found/ number tested	0/12 (0%)	1/20 (5%)	
Sepsis confirmed	1 (0%)	2 (0%)	
Necrotising enterocolitis	0 (0%)	0 (0%)	
Seizures	0 (0%)	0 (0%)	
Encephalopathy	0 (0%)	0 (0%)	
Hypoglycaemia during neonatal unit admission	61 (18%)	71 (15%)	
Exclusive breast-feeding 24 hrs prior to discharge	84 (25%)	139 (30%)	
Total neonatal unit stay			
Median (IQR) days in neonatal unit	6 (2 to 10)	6 (3 to 12)	-0.4 (-2.07, 1.21)
Number (%) admitted for at least one day	147 (43%)	149 (32%)	
Category of care during neonatal unit stay (separation of baby from mother)			
Median (IQR) days in intensive care	2 (1 to 3)	3 (1 to 4)	-1.4 (-2.7, 2.5)
Number (%) admitted	22 (6%)	19 (4%)	
Median (IQR) days in high dependency care	1 (1 to 3)	2 (1 to 5)	-0.6 (-3.3, 2.2)
Number (%) admitted	39 (11%)	32 (7%)	
Median (IQR) days in special care	5 (2 to 10)	6 (2 to 11)	0 (-1.7, 1.7)
Number (%) admitted	135 (40%)	139 (30%)	
Category of care during other postnatal stay (baby alongside mother)			
Median (IQR) days in transitional care	6 (2 to 8)	5 (4 to 6)	-
Number (%) admitted	26 (8%)	16 (3%)	
Median (IQR) days in postnatal care	3 (2 to 5)	3 (2 to 4)	0.25 (-0.06, 0.56)
Number (%) admitted	249 (73%)	382 (82%)	

Data are n (%) unless otherwise stated. Effect measures are risk ratios for categorical variables (risk in planned delivery group/ risk in expectant management group) and median differences for continuous variables (median in planned delivery group - median in expectant management group). CI: confidence intervals; IQR: interquartile range. n/N (%) indicates that the denominator only includes participants with a relevant measurement for that variable.

*Adjusted for centre, singleton/twin pregnancies, severity of hypertension in 48 hours prior to enrolment, parity, previous caesarean section and gestational age at randomisation.

† Birth weight centile calculated using the Stata add-in function zanthro using the British 1990 Growth Reference (reanalysed 2009).

Supplementary Table 7: Additional secondary perinatal outcomes (by Per Protocol analysis)

	Planned delivery (n = 342)	Expectant management (n = 470)
Mode of delivery		
Spontaneous vaginal	127 (37%)	138 (29%)
Spontaneous vaginal (cephalic)	125 (37%)	137 (29%)
Spontaneous vaginal (breech)	2 (1%)	1 (0%)
Assisted vaginal (cephalic)	34 (10%)	46 (10%)
Assisted vaginal – vacuum	12 (4%)	19 (4%)
Assisted vaginal – forceps	22 (6%)	27 (6%)
Caesarean section	181 (53%)	286 (61%)
Pre-labour caesarean section	92 (27%)	167 (36%)
Emergency caesarean section	89 (26%)	119 (25%)
Indication for assisted vaginal delivery (non-exclusive)		
Maternal comorbidity or disease	1/34 (3%)	3/46 (7%)
Failure to progress in second stage	13/34 (38%)	17/46 (37%)
Suspected fetal distress	25/34 (74%)	29/46 (63%)
Indication for caesarean delivery (non-exclusive)		
Maternal comorbidity or disease	25/181 (14%)	75/286 (26%)
Previous caesarean delivery/uterine surgery	30/181 (17%)	55/286 (19%)
Failure to progress in first stage	31/181 (17%)	46/286 (16%)
Failure to progress in second stage	2/181 (1%)	1/286 (0%)
Suspected fetal distress	66/181 (37%)	101/286 (35%)
Failed instrumental delivery	3/181 (2%)	1/286 (0%)
Fetal presentation not cephalic	33/181 (18%)	31/286 (11%)
Twins	2/181 (1%)	9/286 (3%)
Maternal request	5/181 (3%)	1/286 (0%)
Gestational age at delivery (days)		
<37 weeks	286 (84%)	256 (55%)
Baby sex		
Boy	176 (52%)	229 (49%)
Girl	166 (49%)	241 (51%)
Umbilical artery pH <7.05	5/201 (3%)	7/265 (3%)

Umbilical arterial pH collected	201 (59%)	265 (57%)
Principal recorded indication for neonatal unit admission		
Number of babies admitted to the neonatal unit*	155	155
Preterm		
Prematurity	66 (43%)	38 (25%)
Cardiorespiratory		
Respiratory disease	34 (22%)	39 (25%)
Cardiovascular disease	0 (0%)	1 (1%)
Failed oximetry testing	0 (0%)	1 (1%)
Gastric, Hepatic, Metabolic		
Gastrointestinal tract disease	0 (0%)	0 (0%)
Jaundice	10 (7%)	11 (7%)
Hypoglycaemia	19 (12%)	31 (20%)
Other metabolic disease	0 (0%)	0 (0%)
Neurological		
Convulsions	1 (1%)	0 (0%)
Hypoxic ischaemic encephalopathy	0 (0%)	0 (0%)
Poor condition at birth	2 (1%)	3 (2%)
Neonatal abstinence syndrome	0 (0%)	0 (0%)
Other neurological disease	0 (0%)	0 (0%)
Infection		
Infection suspected/confirmed	7 (5%)	12 (8%)
Size, weight, feeding		
Intrauterine growth restriction/ Small for gestational age infant	7 (5%)	10 (7%)
Poor feeding or weight loss	3 (2%)	2 (1%)
Anomaly or trauma		
Congenital anomaly suspected/ confirmed	0 (0%)	0 (0%)
Birth trauma/ injury	0 (0%)	0 (0%)
Relating to carer		
Social issues/Foster care	0 (0%)	0 (0%)
Maternal admission/emergency	0 (0%)	2 (1%)
Specialist care		
Surgery	0 (0%)	0 (0·0)

Palliative care	0 (0%)	0 (0.0)
Monitoring or investigation		
Monitoring	4 (3%)	5 (3%)
Exclusively for a specific investigation	0 (0%)	0 (0%)
Continuing care	2 (1%)	0 (0%)
Need for respiratory support	32 (9%)	46 (10%)
Type of respiratory support needed (non-exclusive)		
Endotracheal ventilation	6/32 (19%)	14/46 (30%)
Continuous positive airway pressure	27/32 (84%)	35/46 (76%)
High flow oxygen	8/32 (25%)	17/46 (37%)
Cerebral ultrasound scan performed	12 (4%)	20 (4%)
Abnormalities found	0/12 (0%)	1/20 (5%)
Intraventricular haemorrhage (IVH) Grade I-II	0/0 (0%)	0/1 (0%)
Intraventricular haemorrhage (IVH) causing ventricular distension	0/0 (0%)	0/1 (0%)
Other	0/0 (0%)	1/1 (100%)
Sepsis confirmed	1 (0%)	2 (0%)
Positive blood cultures	1/1 (100%)	1/2 (50%)
Cerebrospinal fluid cultures	0/1 (0%)	1/2 (50%)
Diagnosed Encephalopathy	0 (0%)	0 (0%)
Diagnosed hypoglycaemia (blood glucose <2.6 mmol/L on ≥2 consecutive occasions)	61 (18%)	71 (15%)
Intravenous dextrose required	28/61 (46%)	31/71 (44%)
Tube feeding required	33/61 (54%)	44/71 (62%)
Method of infant feeding 24 hrs prior to discharge		
Exclusive breast-feeding	84 (25%)	139 (30%)
Mixed feeding	124 (37%)	159 (34%)
Exclusive formula feeding	128 (38%)	167 (36%)

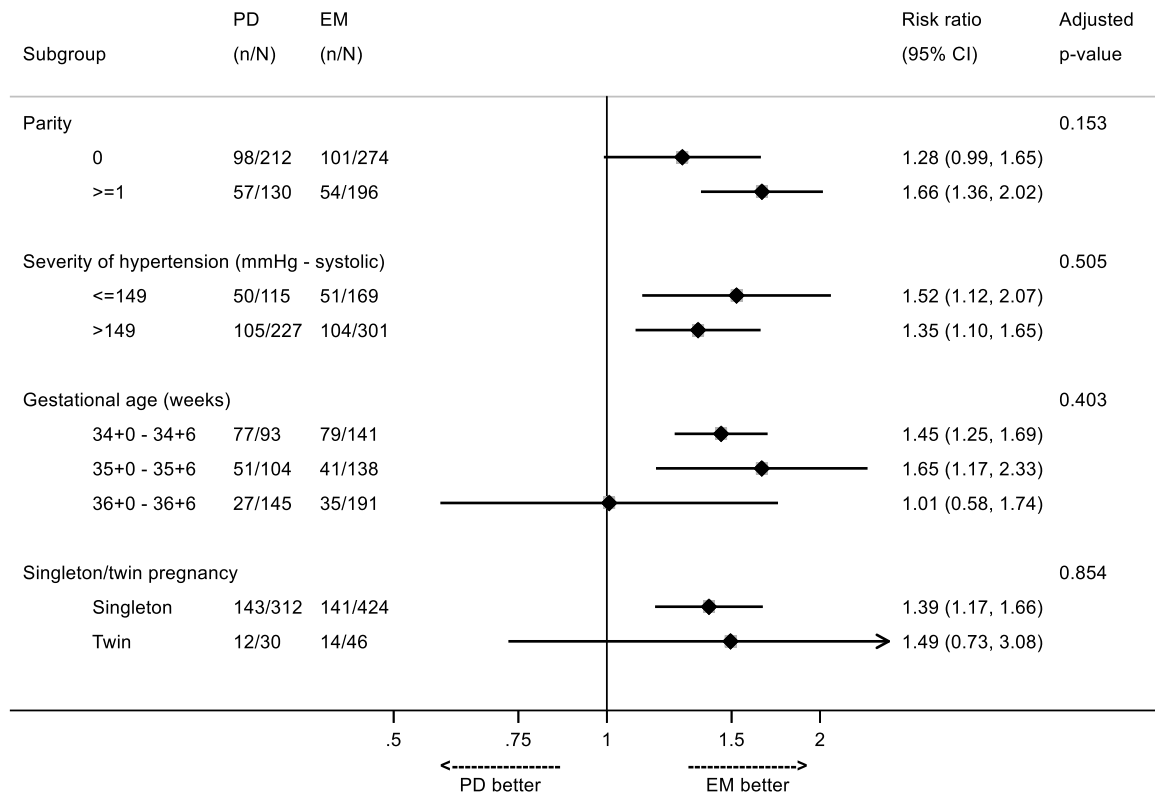
Data are n (%) unless shown otherwise. n/N (%) indicates that the denominator only includes participants with a relevant measurement for that variable.

*Number of babies admitted to the neonatal unit (denominator for the principal recorded indications).

Supplementary Table 8: Unexpected maternal and infant serious adverse events by allocation

	Planned delivery	Expectant management
Serious adverse events (SAEs)	9	12
Severity		
Mild	4	3
Moderate	2	2
Severe	3	7
Causality		
Not related	7	9
Possibly	2	2
Probably	0	1
Action taken		
Intervention stopped prior to the event started	2	5
None	7	7
Outcome		
Fatal	0	1
Not resolved	0	3
Resolved	6	7
Resolved with sequelae	1	0
Resolving	2	1
System Organ Class		
Cardiac disorders	3	3
Gastrointestinal disorders	0	1
Infections and infestations	1	0
Neoplasms benign, malignant and unspecified	0	1
Pregnancy, puerperium and perinatal conditions	4	5
Renal and urinary disorders	0	1
Respiratory, thoracic and mediastinal disorders	0	1
Vascular disorders	1	0

Supplementary Figure 1: Forest plot for sub-group analysis (Per Protocol population) of primary perinatal outcome comparing Planned Delivery (PD) with Expectant Management (EM). p-values compare risk ratios across the different sub-groups of each factor.



Supplementary Table 9: Sensitivity analysis for the primary outcome, excluding women (maternal outcome) and babies (perinatal outcome) in the planned delivery arm for whom initiation of delivery was greater than 96 hours after randomisation

	Planned delivery	Expectant management	Risk ratio (95% CI) p-value	Adjusted risk ratio (95% CI) p-value
Composite of maternal morbidity and/or recorded systolic BP \geq 160 mmHg post randomisation	274/429 (64%)	338/451 (75%)	0.85 (0.78, 0.93) 0.0003	0.85 (0.78, 0.93) 0.0003
Composite of perinatal deaths and NNU admissions up to infant hospital discharge	184/450 (41%)	159/475 (34%)	1.23 (1.03, 1.46) 0.0205	1.24 (1.06, 1.44) 0.0075

Data are n (%).

*Adjusted for centre, singleton/twin pregnancies, severity of hypertension in 48 hours prior to enrolment, parity, previous caesarean section and gestational age at randomisation.

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