**Appendix S1.** Secondary outcome measures and medical definitions

**Predefined secondary outcomes included:**

Abdominal circumference Z-score;

Uterine artery Doppler waveform pulsatility index;

Middle cerebral artery Doppler waveform pulsatility index;

Umbilical artery Doppler waveform pulsatility index;

Ductus venosus Doppler waveform pulsatility index;

Maternal systolic blood pressure (mmHg);

Maternal diastolic blood pressure (mmHg);

New onset preeclampsia after randomisation;

Randomisation to delivery interval (days);

Gestational age at delivery (days);

Caesarean section delivery;

Fetal death;

Birthweight (grammes);

Customised birthweight percentile;

Neonatal death;

Major neonatal morbidity (one or more of bronchopulmonary dysplasia, intraventricular haemorrhage grade 3-4, periventricular leukomalacia, retinopathy of prematurity ≥grade 3 requiring treatment and necrotising enterocolitis confirmed surgically);

Neonatal use of surfactant;

Number of days of ventilator use,

Duration of neonatal unit admission;

Incidence of maternal side effects.

**Medical definitions used:**

**Gestational hypertension:** Systolic blood pressure ≥140 mmHg and/or diastolic blood pressure ≥ 90mmHg on at least two occasions four hours apart after 20 weeks gestation.

**Preeclampsia**: New onset hypertension arising after 20 weeks gestation with evidence of;

Significant proteinuria identified by dipstick proteinuria (≥ 1+) subsequently confirmed by spot urine protein/creatinine ratio (PCR) ≥ 30mg/mmol and/or 24 hour urine protein excretion >0.3g OR any multi-system complication, including: Haematological involvement: thrombocytopenia (platelet count <100 x 109/L), haemolysis (features on blood film such as fragmented cells and helmet cells and/or reduced haptoglobin), disseminated intravascular coagulation; renal insufficiency: serum creatinine > 90 umol/L (new onset); liver involvement: raised serum transaminases >45U/L (new onset), severe epigastric or right upper quadrant pain, neurological involvement, seizure (eclampsia), hypereflexia with sustained clonus, severe headache, persistent visual disturbances (photopsia, scotomata, cortical blindness, retinal vasospasm), stroke.

**Customised birthweight percentile:** Birthweight centiles were adjusted for infant sex, gestation at delivery, and maternal variables of parity, ethnicity, height, and early pregnancy weight21 and used to identify small for gestational age infants.

**Neonatal respiratory support:** Ventilator use support - any mechanical ventilation with endotracheal tube in situ, continuous positive airway pressure (CPAP) or non-endotracheal support including nasal CPAP, other respiratory support such as nasal high flow delivery of an air/oxygen mix through any high flow device and oxygen only support: via head box, cot or nasal.

**Bronchopulmonary dysplasia:** the requirement for ambulatory oxygen therapy > 36 weeks corrected gestational age.

**Intraventricular haemorrhage:** Grade 1 – subependymal germinal matrix haemorrhage, grade 2 – intraventricular haemorrhage with no ventricular distension, grade 3 – intraventricular haemorrhage with ventricle distended with blood and grade 4 – intraparenchymal haemorrhage

**Periventricular leukomalacia:** ischemic brain injury affecting the periventricular white matter in the boundary zones supplied by the terminal branches of both the centripetal and centrifugal arteries.

**Retinopathy of prematurity:** Stage 1 – demarcation line separating avascular from vascular retinal regions, stage 2 – ridge, defined as demarcation line increased in volume to extend out of the plane of the retina, stage 3 – ridge with extra retinal fibrovascular proliferation and stage 4 – retinal detachment.

**Necrotising enterocolitis:** At least four of the symptoms: systemic (at least one of the following) – apnoea, bradycardia, temperature instability, lethargy OR intestinal (at least one of the following) – residuals more than 25% of previous feed on two consecutive occasions, abdominal distention, bilious vomiting, faecal blood WITH or WITHOUT x-ray findings of (at least one of the following) - pneumatosis intestinalis, portal vein gas, persistent dilated loop on serial x-rays AND the infant warranted treatment that included nil by mouth and antibiotics.

**Persistent primary pulmonary hypertension of the newborn:** Echo cardiac (shunting) or clinical evidence, oxygen requirement unexplained by chest x-ray or loud P2, or differential pre and post-ductal TCPO2 without co-existing lung disease.Australian and New Zealand Neonatal Network. ANZNN 2018 Data Dictionary.