



Advanced distribution of misoprostol to prevent postpartum hemorrhage at home births in Haiti

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Learning Objectives

Learners will be able to:

1. Identify safe strategies for advanced distribution of misoprostol to pregnant women
2. Demonstrate the value of a mixed methods approach
3. Discuss the importance of sustainability and scale up on the advanced distribution of misoprostol intervention in Haiti

Background

- Maternal Mortality Ratio in Haiti 529/100,000
- Postpartum hemorrhage is a leading cause of maternal death
- Majority of women deliver at home without access to a uterotonic



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Objectives

1. Assess if facility ANC visits and home visits are feasible and effective mechanisms for providing education and distributing misoprostol for self-administration for PPH prevention
2. Assess if the availability of misoprostol for preventing PPH at home births affects proportion of facility based births.
3. Determine if misoprostol is acceptable to women and their families for PPH prevention.

Methods

- Location: Northeast Department of Haiti
- Period of the study: January 2017 – November 2017
- Primary study design: Mixed-methods longitudinal (cohort)

Methods

- Intervention:
 - Recruited pregnant women at facility-based ANC visits and during home visits by a community health worker (CHW)
 - Conducted participant education
 - Distributed three 200 mcg misoprostol tabs
- Postpartum survey:
 - Administered 2 weeks after birth
 - Explored participant experience with the use of misoprostol.

Methods

- Focus groups:
 - Explored provider and community leaders experience with the misoprostol study
 - 12 focus group discussions conducted with facility based health care providers, CHWs, TBAs, and community leaders
 - Stratified by provider type
 - Analyzed for common themes

Survey Results

- 338 women were enrolled in the study
- The majority received counseling and misoprostol at ANC (68%) and the remainder received counseling and misoprostol from a CHW during home visits.

Survey Results

- 72% of participants delivered in a health facility and 80% of all participants took misoprostol.
- Among women who delivered at home, 87% took misoprostol and all took the medication correctly after delivery.
- While the majority (86%) of participants who took misoprostol experienced minor side effects, none experienced any serious adverse events related to misoprostol.

Focus Group Results

- The TBAs and CHWs felt their participation in the intervention strengthened pregnant women's trust in their work.
- The majority felt that women had positive experiences with the medication and the study.
- Several providers said the misoprostol program strengthened the collaboration between health centers, CHWs, TBAs and community leaders.

Focus Group Results

- Providers felt this was based on perception that the program was life-saving and brought positive health outcomes to their communities.
- All participants felt the intervention was acceptable to people in their communities.
- Sustainability of the intervention was important



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Key Messages

1. Advanced distribution of misoprostol to pregnant women through ANC and home visits is feasible
2. This intervention was associated with an increase in facility based births —
3. This intervention was acceptable to women, communities and providers, demonstrating the importance of sustainability and scale up

Thank you

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