

# Quick wins and easy fixes or are they?

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# Presentation overview

- Signal functions of EmOC
- Availability of drugs & equipment
- Lessons from EmOC programming:
  - Policy
  - Training
  - Management

# Principal causes of maternal death

- Hemorrhage
- Obstructed and prolonged labor
- Sepsis
- Hypertensive diseases
- Complications from unsafe abortion

# EmOC signal functions

1. Parenteral antibiotics
2. Parenteral oxytocic drugs
3. Parenteral anticonvulsants
4. Manual removal of placenta
5. Removal of retained products
6. Assisted vaginal delivery
7. Neonatal resuscitation
8. Surgery (e.g. cesarean delivery)
9. Blood transfusion

Basic EmOC

Comprehensive EmOC

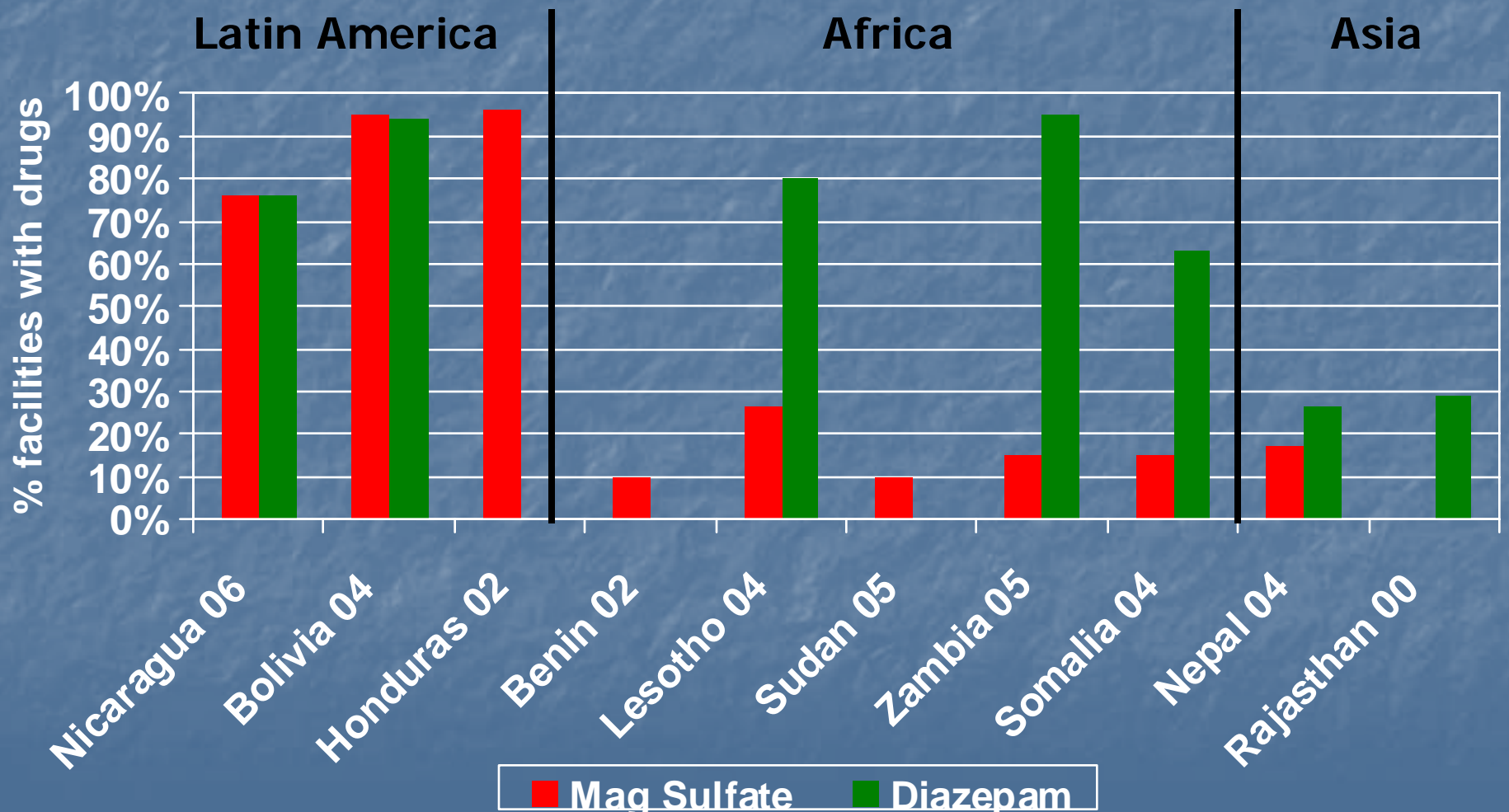
# For discussion today

- **Parenteral anticonvulsants** for severe pre-eclampsia and eclampsia
- **Removal of retained products of conception** with suction, surgical or medical evacuation
- **Assisted vaginal delivery** with forceps or vacuum extraction
- **Neonatal resuscitation** with ambu bag and mask

# Parenteral anticonvulsants

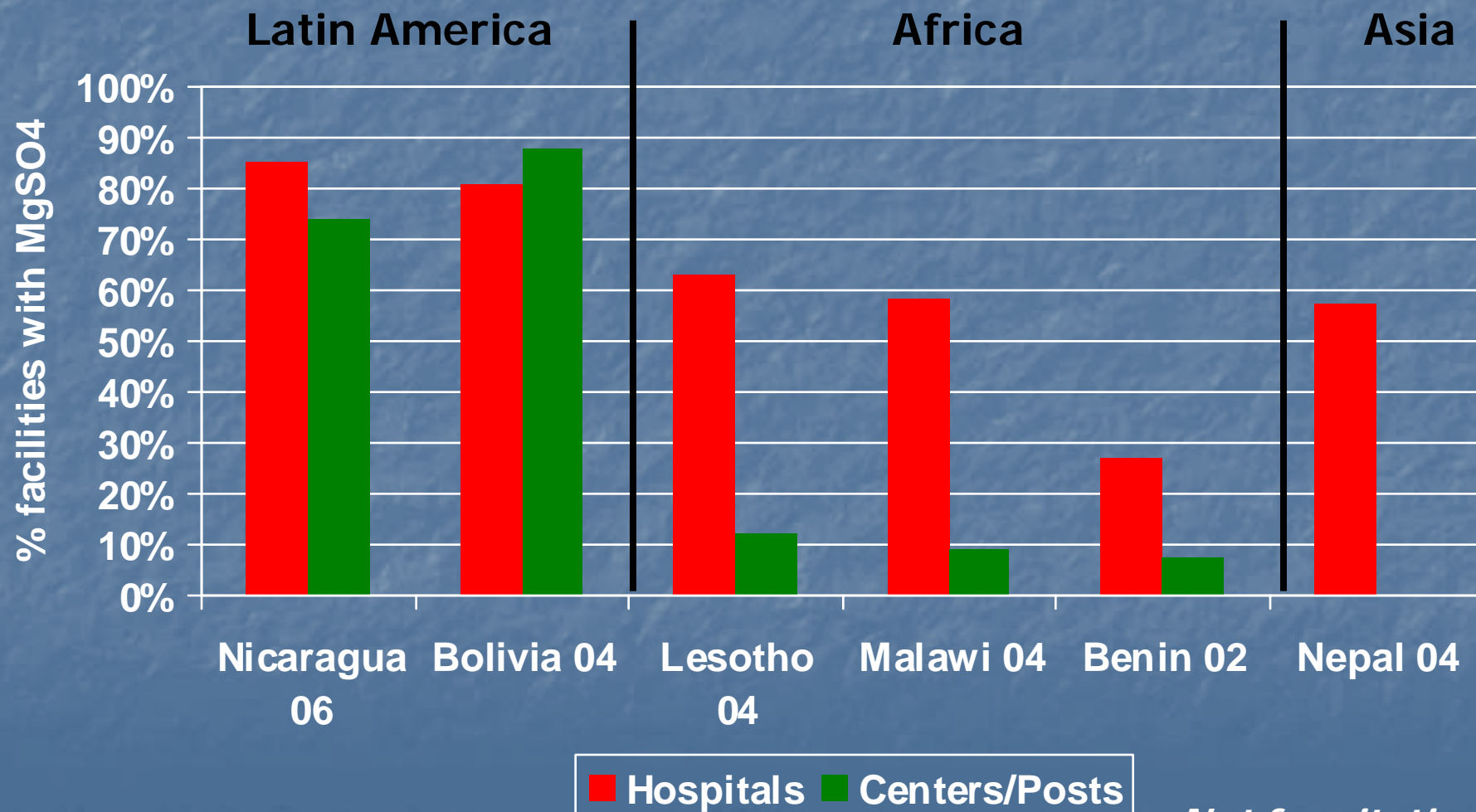
- Treatment of severe pre-eclampsia
- Treatment and prevention of eclampsia
  
- Magnesium sulfate
- Diazepam

# Availability of magnesium sulfate vs. diazepam



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# Availability of magnesium sulfate by facility level



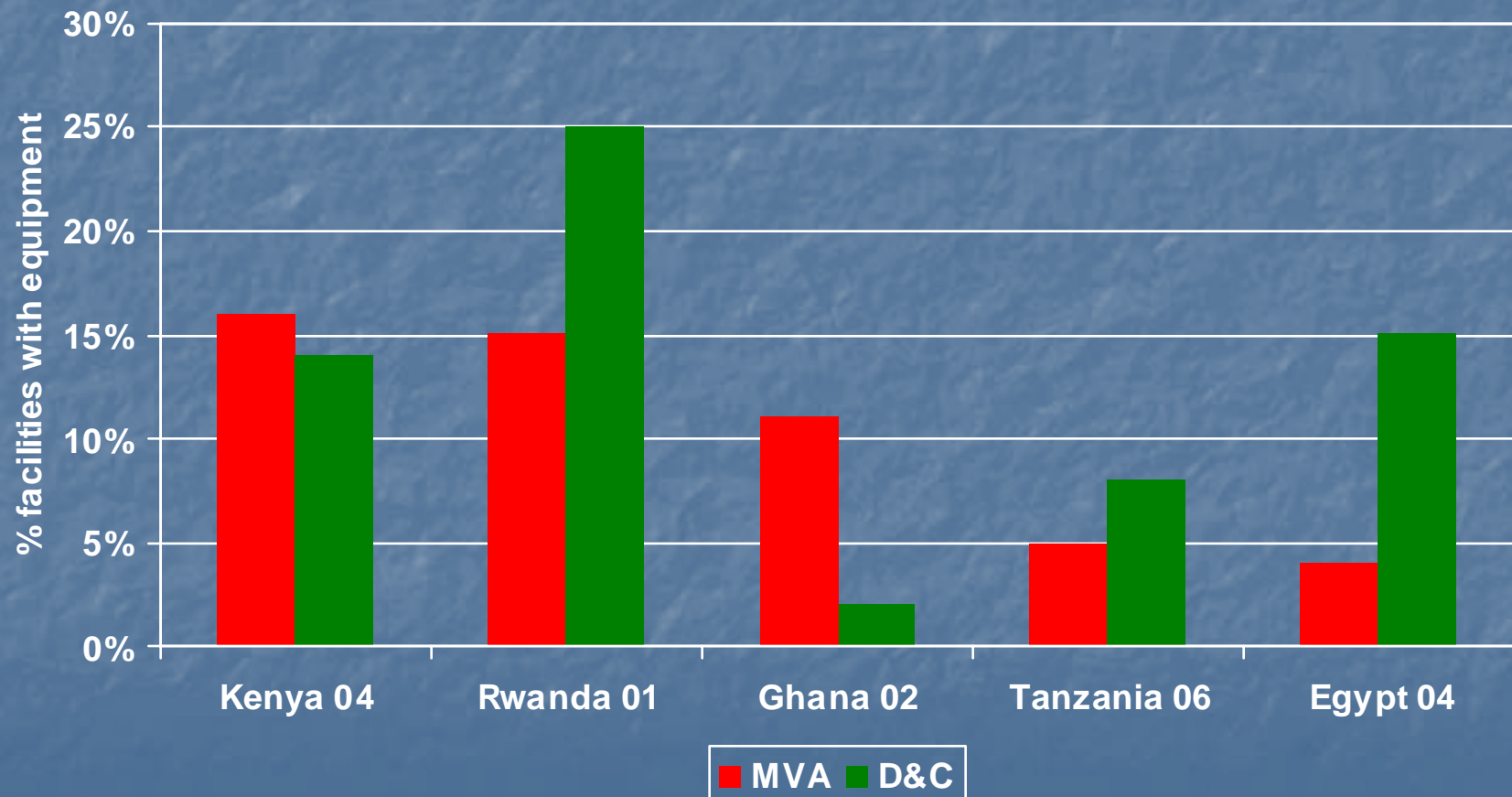
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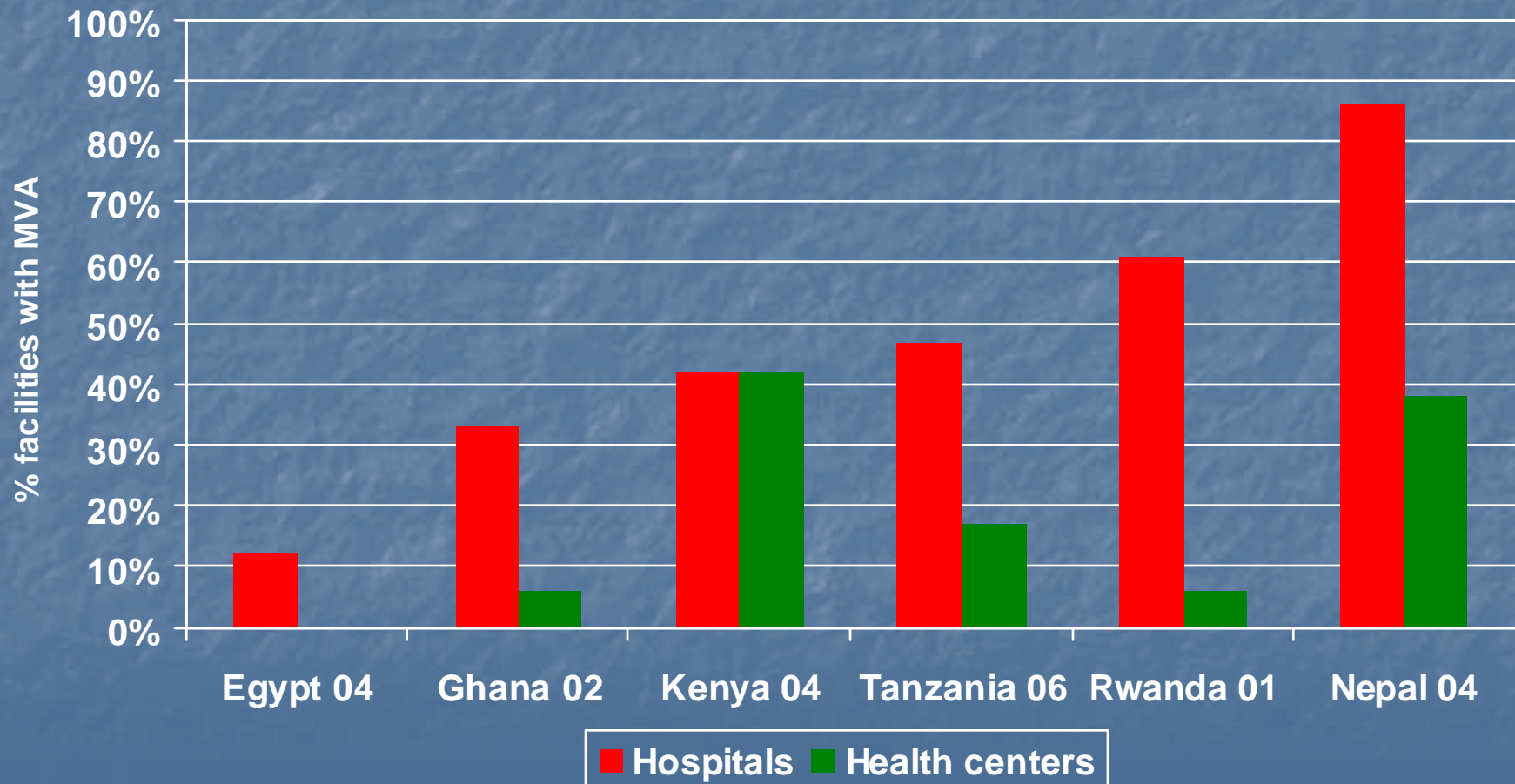
# Removal of retained products of conception

- Treatment of complications of abortion
  - Manual vacuum aspiration (MVA)
  - Dilatation & curettage (D & C)
  - Misoprostol

# Availability of MVA and D&C equipment



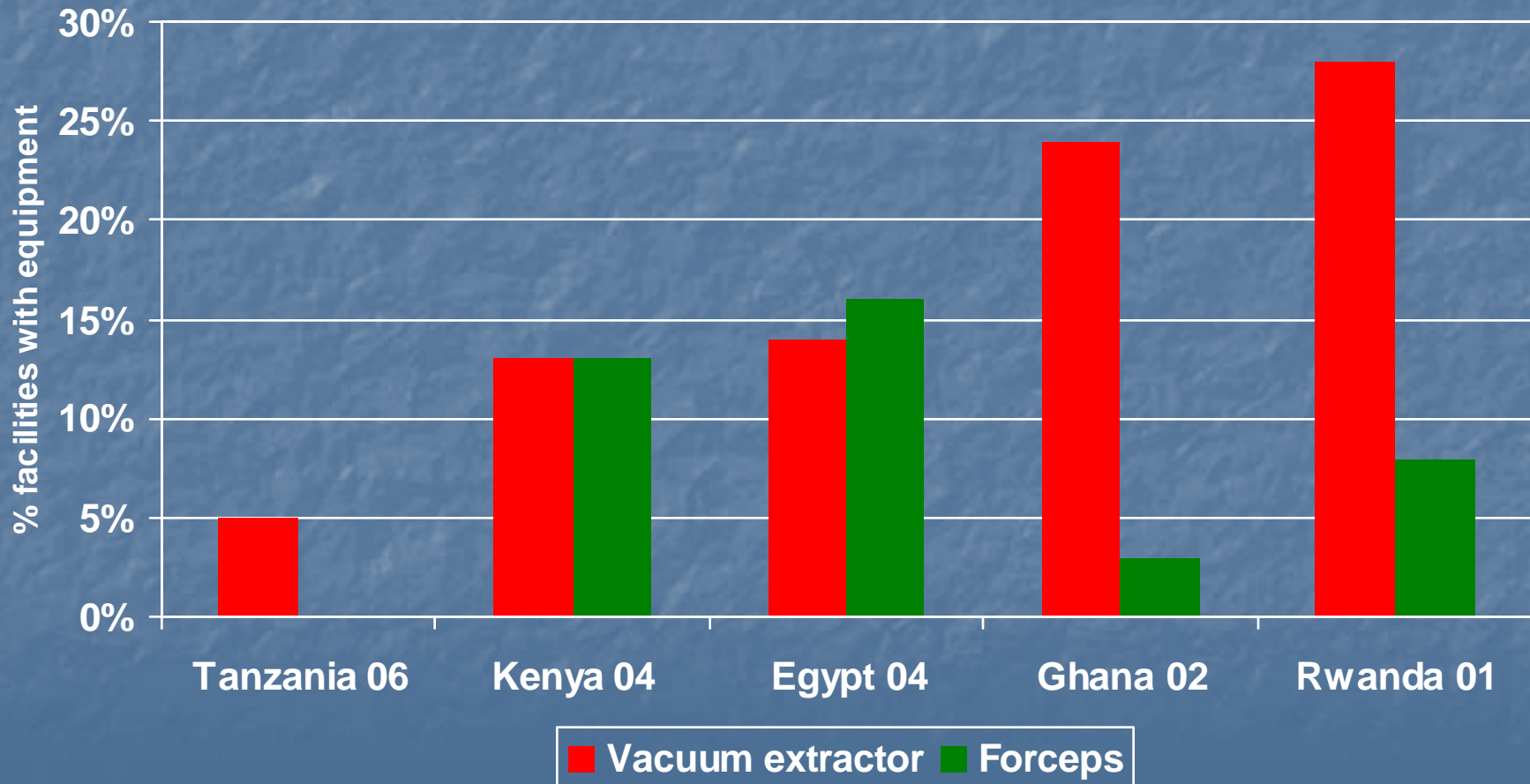
# Availability of MVA by facility level



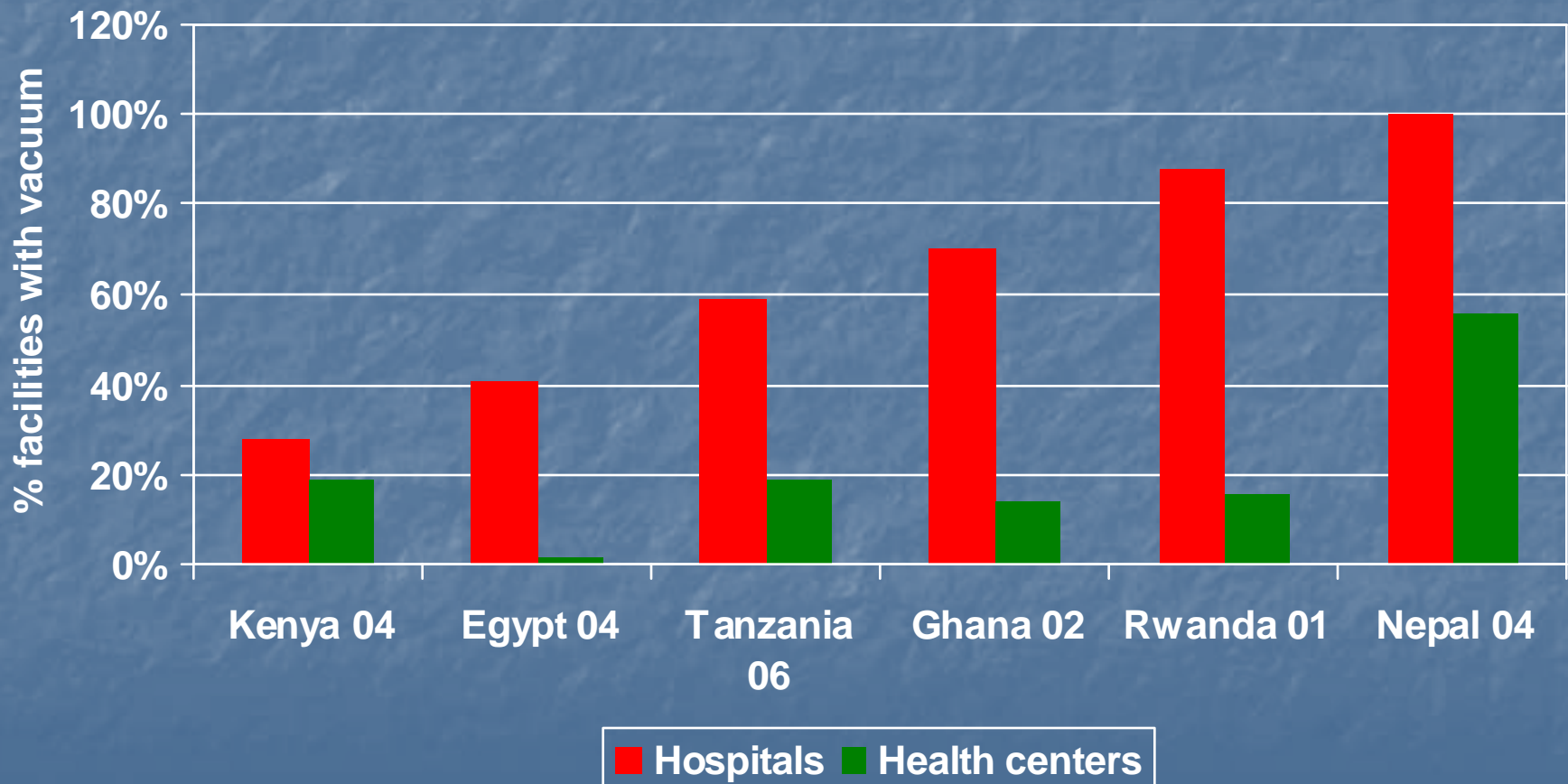
# Assisted vaginal delivery

- Treatment of prolonged labor, maternal exhaustion, fetal distress
- Vacuum extraction
- Forceps

# Availability of vacuum extractor and forceps



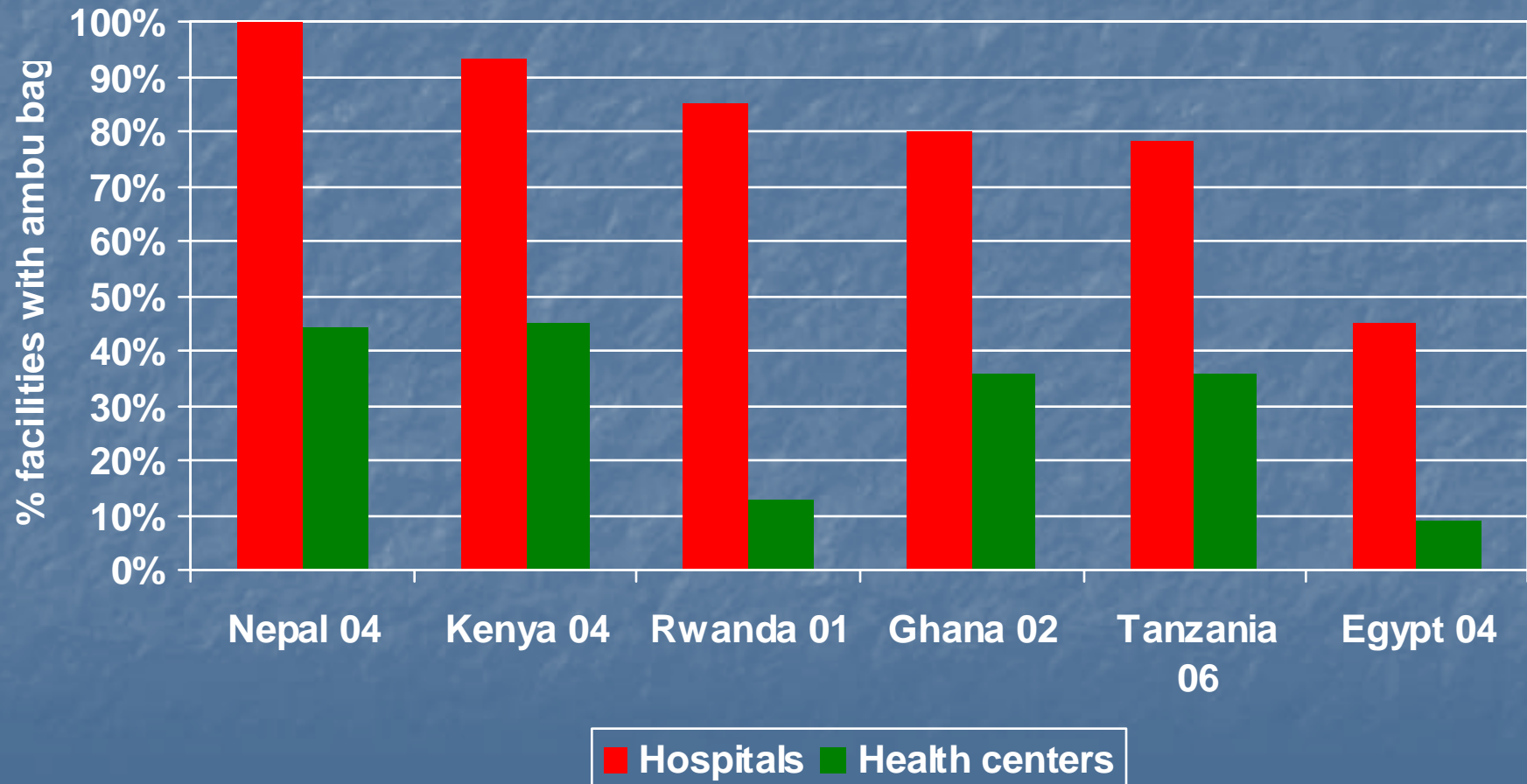
# Availability of vacuum extractor by facility level



# Ambu bag and mask

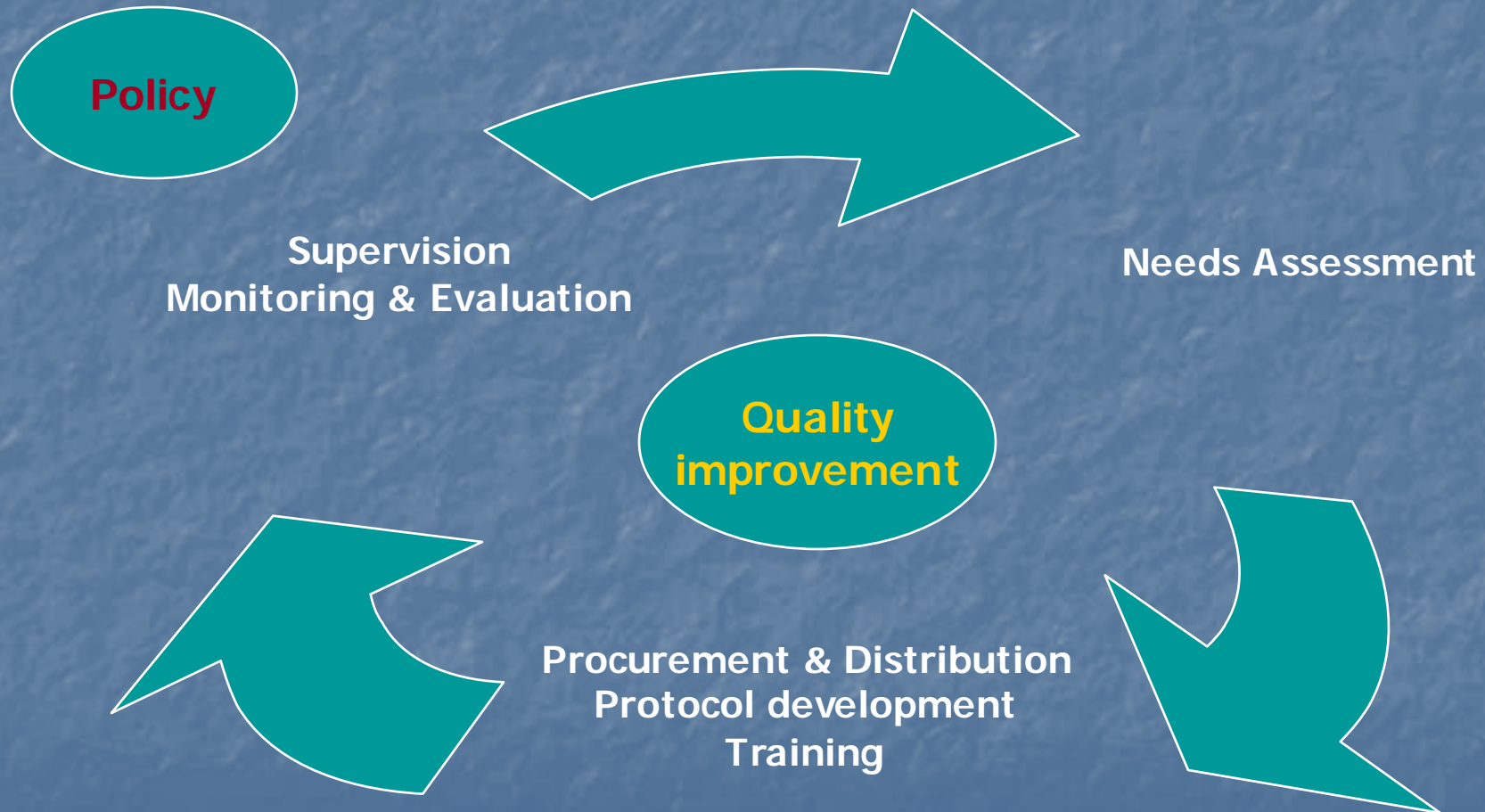
- Treatment of neonatal asphyxia (i.e. neonatal resuscitation)

# Availability of ambu bag and mask by facility level





# Programming EmOC



# Magnesium sulfate: Policy, training, management

## In many countries:

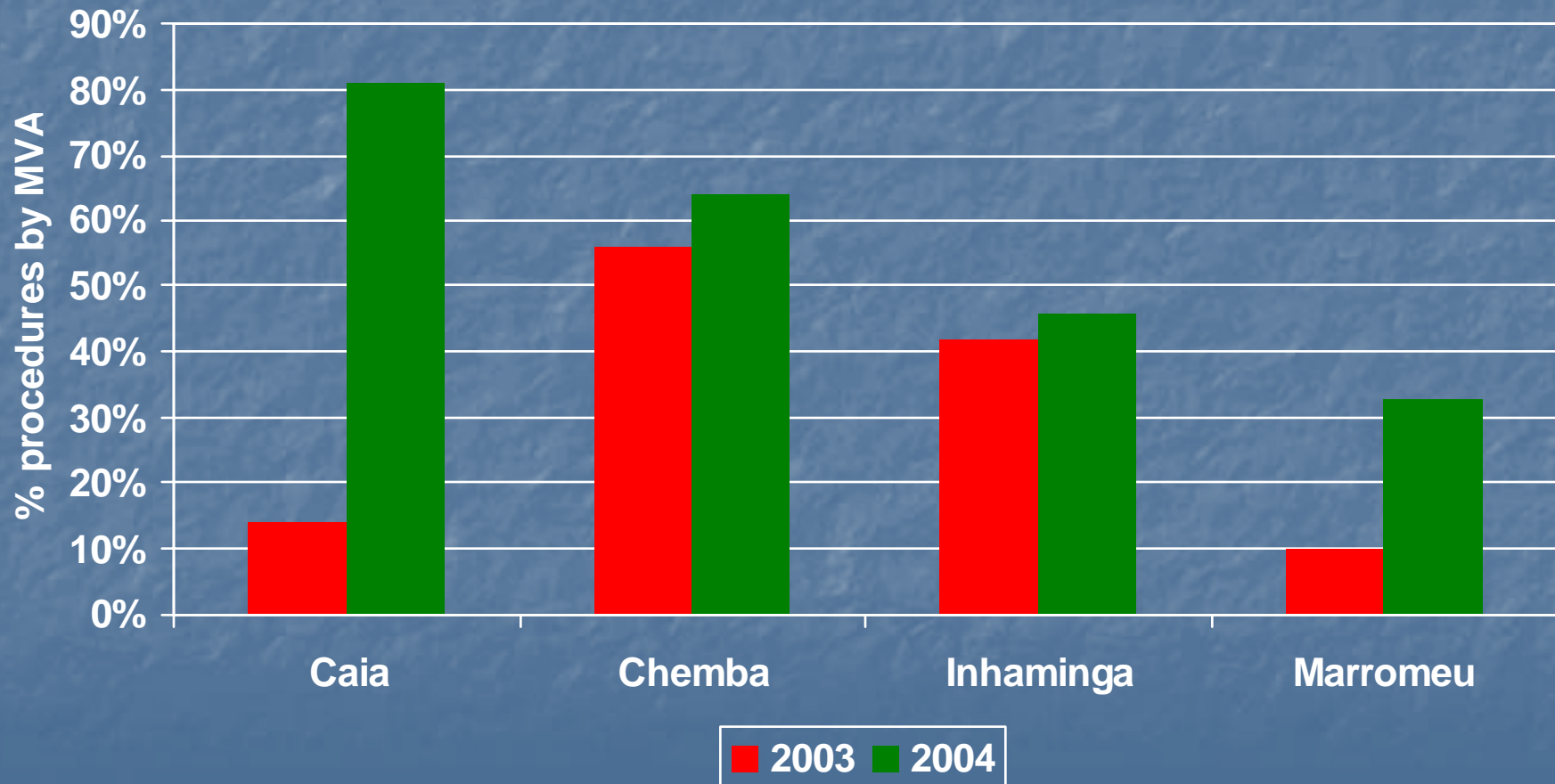
- Magnesium sulfate not on essential drug list
- Drug companies see no financial advantage to register and sell
- Lower level facilities not authorized to administer; some cadres of workers not allowed to administer
- Health workers perceive magnesium sulfate as dangerous to women; don't trust their own ability to administer; long use of other drugs

# Removal of retained products: Policy, training, management

## In many countries:

- Lower level facilities not authorized to perform MVA
- Physician-only requirements to perform MVA
- Pain management often missing
- Providers reluctant to switch to MVA

# Rates of MVA adoption in Sofala, Mozambique



# Assisted vaginal delivery (AVD): Policy, training, management

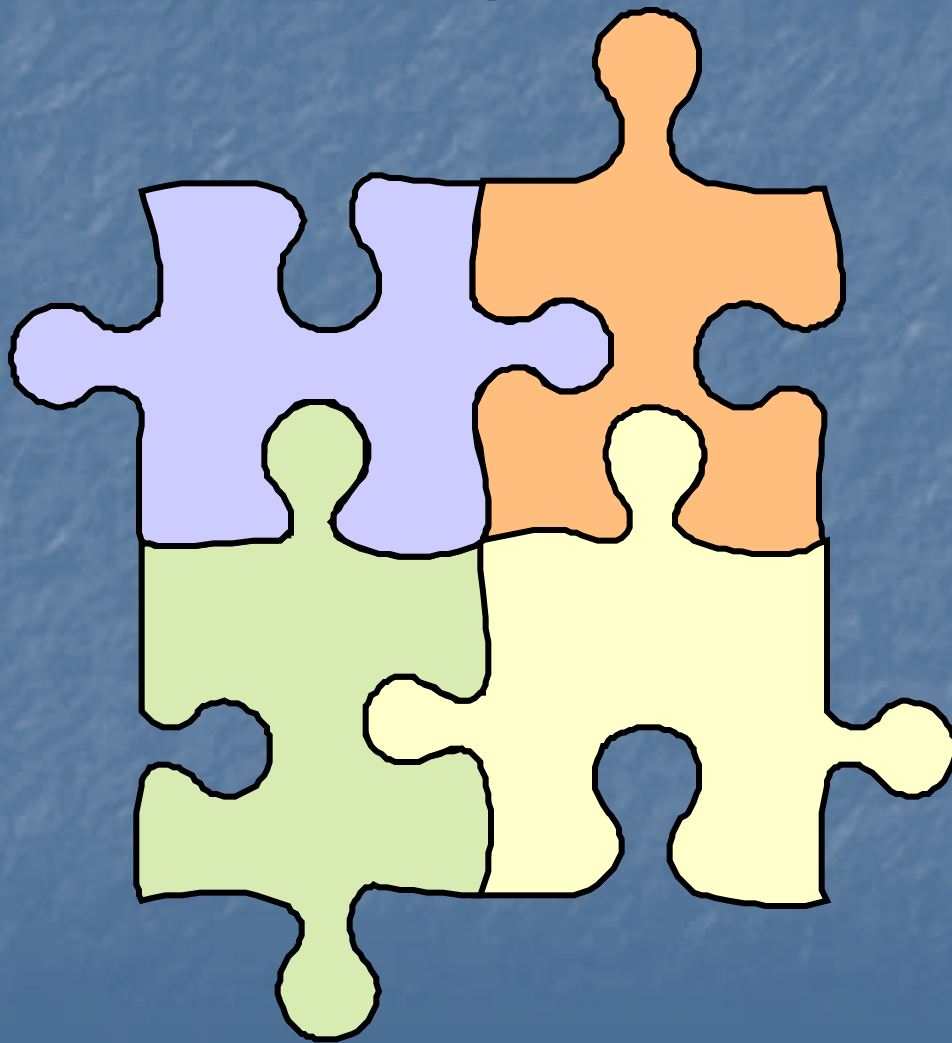
In many countries:

- Debate over performing AVD where there is no operating theatre
- Training increasingly difficult to obtain for any level of provider
- Poor adherence to protocol
- Concerns about HIV vertical transmission may limit use of AVD
- Fewer AVDs may contribute to over use of cesarean delivery

# Newborn resuscitation: Policy, training, management

- Less controversial than other signal functions
- Training (1 day sufficient)
- Supply and maintenance of equipment

# Putting all the pieces together



- Champions are needed to:
  - Provide support and encouragement
  - Mentor and coach
  - Try new strategies
  - Stay on top of things if not in front
- International leadership for raising standards and evidence