Usaid McHIP Asia Regional Meeting on Intervention for Impact in Essential Obstetric and Newborn Care Making Every Mother and Baby Count Dhaka, Bangladesh May 3-6, 2012

Drs Diane Sawchuck, Tabassum Firoz, Rahat Qureshi, and Justus Hofmeyr attended and presented at this meeting attended by 389 participants. Government officials, donors/ funders, researchers, clinicians and UN agencies actively participated in 3 days of discussions around evidence, facilitators and barriers, and program/policy implementation related to pre-eclampsia and postpartum haemorrhage.

One full day was designated for a symposium on iron and calcium supplementation, where topics were debated related to continued global challenges in preventing and treating maternal anaemia in South Asia, and the logistical, policy, dosing and cost implications of the recent WHO Prevention & Treatment of Pre-eclampsia & Eclampsia guidelines related to calcium during pregnancy. It was recognized that the current dosing recommendations are higher than standard calcium RDA for pregnancy, and limited by the high dosing regimens historically used in calcium supplementation trials. Dr Hofmeyr presented the current CAP Trial but emphasized that it is not a calcium dosing trial. He pointed to the need for further research to determine the appropriate calcium dosage in pregnancy. We were grateful for opportunity to participate in select evening discussion sessions including the UN Commission on Life-Saving Commodities for Women and Children (organized by PATH). The UN Commission on Life-Saving Commodities for Women and Children in particular allowed us to mobilize the PRE-EMPT advocacy and policy role as we articulated concerns that antihypertensive agents had not been included in the list of Life-Saving Commodities. The participation of Dr Rahat Qureshi was made possible through the CME Funds of OBGYN department at AKU and the PRE EMPT project. She states, “As Chair OB-GYN at the Aga Khan University it was a privilege to attend the meeting. The interaction with local, national, regional and international leadership working towards the goal of maternal and neonatal health was exhilarating, motivating and inspirational. A number of delegates from Pakistan were present and represented governmental, nongovernmental and teaching and service organizations and institutions. The national group met thrice during the program to brainstorm strategies for furthering the information and networking during the meeting. Information gained through this program is going to assist the OBGYN Department at AKU in further defining our road map for research activities. At AKU we are committed to advocacy as well as developing our projects and programs which will impact on policy for improvement in maternal and neonatal health for our women.”

The PRE-EMPT newsletter is designed for those involved in this project. We hope this publication will keep you up to date on current and upcoming activities, important project changes and accomplishments by the team. The newsletter will be distributed bimonthly, with the next issue scheduled for the end of July.

We welcome submissions of project updates by any team member for inclusion in the newsletter. Please submit by July 15th for the next newsletter.

Recent Activity

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<th>Event</th>
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<td>Maternal Morbidity Working Group, Geneva</td>
<td>18-19 Apr</td>
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<tr>
<td>Joint ITU-WHO Workshop on e-Health Standards, Geneva</td>
<td>26-27 Apr</td>
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<td>The 9th Annual Western Regional International Health Conference, Seattle</td>
<td>27-29 Apr</td>
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<td>Asia Regional Meeting on Interventions for Impact in Essential Obstetric and Newborn Care, MCHIP, Dhaka</td>
<td>3-6 May</td>
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<td>CLIP Site Visit, Karachi</td>
<td>7-10 May</td>
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<td>CLIP Advisory Meeting with PATH and IHME, Seattle</td>
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CAP (Calcium And Pre-eclampsia) Trial (PI: Justus Hofmeyr)

The Calcium and Pre-eclampsia Trial is currently recruiting in East London, Cape Town, Johannesburg and Harare. All the sites are experiencing difficulty in achieving recruitment targets, and we are investigating strategies for contacting more potentially eligible women. The current recruitment is 110 women (May 16th). Ana Pilar Betran and Tina Purnat from WHO have done an enormous amount of work formalising all the trial procedures, and training staff at all the sites. Another round of site visits and training is taking place this month. The sites in Argentina are due to kick off in June, following training of clinicians in the three hospitals and the centralised data management office. Stellenbosch is awaiting completion of their contractual agreement.

Justus Hofmeyr was asked to present a paper on calcium and Vit D supplementation at the Asia Regional MNH Conference in Dhaka, Bangladesh in May, and included discussion of the CAP study on behalf of the CAP study group. There was considerable interest in calcium supplementation in a region in which dietary calcium intake is exceptionally low (in some communities milk and milk products are traditionally forbidden) and pre-eclampsia/eclampsia are rife.

Data collection for the miniPIERS study has been completed. The final dataset consists of 2200 women with an adverse outcome rate of 23.5% at anytime after admission and 15.4% within 48hrs of admission. Final model development and validation is underway. Knowledge gained from miniPIERS on the symptoms and signs associated with adverse maternal events is being used to develop a decision algorithm for the CLIP trial. These symptoms and signs are being converted into a pictorial aide that will be used for both patient and provider education around warning signs for pregnancies complicated by pre-eclampsia.

In addition, PIERS on the Move, a Grand Challenge’s funded project that incorporates the miniPIERS model and pulse oximetry into a mobile platform for assessing risk is now well underway. A prototype version of the application is complete. In-house usability studies of the application have commenced and full scale usability studies are planned in South Africa and Zimbabwe over the summer.

CLIP Feasibility and Trial (PI: Peter von Dadelszen)

CLIP will test the impact of a community-level package of care to reduce adverse maternal and perinatal outcomes related to pre-eclampsia. CLIP is currently in the feasibility phase. The CLIP Executive Committee convened for their second teleconference on April 24th. The primary outcome of this teleconference was a decision regarding eligibility for treatment with methyl-dopa. The protocol now states that only women with a recorded blood pressure of ≥ 160 will be given 750mg of methyl-dopa. India has received JNMC Ethics approval for CLIP Feasibility and Trial, the ICMR ethics application is currently under review with an expected return date of August. Nigeria is finalizing the adoption of feasibility tools with the help of their local social science expert. It is anticipated that half the FGDs and IDIs will be complete by the end of June in Nigeria.

A CHEW seen using an electronic BP device to measure BP during a site reassessment visit by project managers in Sagamu, Nigeria.
Global Pregnancy CoLaboratory (PI: Jim Roberts)

There are several new projects underway in the Co-Lab and some about to begin. We have supplied samples to Dr. Sandra Founds to test whether information gained in a gene expression study of trophoblast and decidua obtained at 10 weeks gestation (residual chorionic villus sample) from women who did or did not proceed to develop pre-eclampsia in later expression can be used to guide a predictive study of pre-eclampsia. She will measure serum concentrations of expressed proteins from the genes differentially expressed in the two groups. We also are assessing data related to nursing to see if nursing has a protective effect to prevent later life cardiovascular disease in women who have had pre-eclampsia. The entire Co-Lab is working towards a project to assess subtypes of pre-eclampsia in developed and developing countries. Other studies progressing include the study led by Annette Staff to examine previously published data form numerous centers on PGF concentrations in pregnancy and relation to outcome. We are planning on a report at the Oxford meeting (September 3 to 6) on the resources available in the Co-Lab, which will require data entry from all centers into the LINK database. This is being worked on intensely! We are establishing a web page on the PRE-EMPT website to publicize the availability of data and samples to investigators at large. Announcements will also be made at the ISSHP and IFPA meetings. Any group wanting to become part of the Co-Lab, contact Lee Rager (srager@mwri.magee.edu). We have added a new group from the University of Southern California with an extensive set of DNA samples.

Pre-Eclampsia Knowledge Translation (PI: Matthews Mathai)

Pre-eclampsia played a large role in the US ACOG Annual Clinical Meeting, 5-9 May, San Diego. Dr Jim Roberts and Eleni Tsigas – both PRE-EMPT members – were heavily featured. Jim Martin’s President’s Program on Pre-eclampsia was particularly reassuring. Quotes and videos can be found at this link http://www.acog.org/About_ACOG/News_Room/News_Releases/2012/A_Push_to_End_Preeclampsia. And more specifically, the Preeclampsia Foundation played a central role as 1) keynote speakers; 2) having a prominent exhibit booth presence in the exhibit hall; 3) participating in several social media campaigns in conjunction with ACOG.

Other Updates:

Joint ITU-WHO Workshop on “e-Health Standards and Interoperability”
Ms Beth Payne and Dr Guy Dumont represented the University of British Columbia and the PIERS on the Move team at this two day workshop in Geneva. Ms Payne presented an overview of the PIERS on the Move project in the session titled “Innovation trends: Academic institutions, companies and research and development labs”. The goal of this session was to share advances in innovation that can transform delivery of healthcare. We believe the PIERS on the Move mHealth tool has the potential to transform care of women with pre-eclampsia in both the community and facility by accurately identifying the woman at risk so that she might get to appropriate care faster. Dr. Dumont presented further innovations in mobile sensor technology under development at UBC in the Electrical and Computer Engineering in Medicine research group.
Drs Peter von Dadelszen and Tabassum Firoz are representing PRE-EMPT as invited participants to the World Health Organization (WHO) Maternal Morbidity Working Group (MMWG). The MMWG is a 4-year initiative headed by Dr. Lale Say of the WHO. The objectives are to first construct common definition and identification criteria for maternal morbidities and then to validate those identification criteria. The initial meeting was attended by leading experts from Asia, Africa, Europe, and North America. By the end of this very productive meeting, the group had generated a common definition for maternal morbidity and a plan to build a core and comprehensive matrix for the identification criteria for maternal morbidities. The goal is to have consistent criteria for maternal morbidities measurement between study cohorts that are supported by the Bill & Melinda Gates Foundation.

CLIP Site Visit, Pakistan

In May 2012, Drs Diane Sawchuck and Tabassum Firoz completed a site visit with the AKU CLIP team in Karachi, Pakistan, including Drs Rahat Qureshi, Sana Sheikh, Asif Raza, and Azizunissa Irumnaz (Clinical Trials Unit [CTU]). Three days were spent discussing the collection and analysis of qualitative data related to the CLIP Feasibility Study, reviewing data collection tools for both the FDGs and IDIs, refining the CLIP surveillance forms and methods, and planning operations for the upcoming CLIP cRCT. Mr Asif Raza presented the methods used for qualitative data processing and initial thematic analysis, using NVivo 9. Dr Sana Sheikh provided a progress report regarding CLIP, an overview of study drug procurement, and an outline of the required consent forms and REB processes as per the AKU CTU. Dr Diane Sawchuck brought a prototype of the PIERs on the Move and demonstrated the data collection and algorithmic functions that the LHWs will use for CLIP. Planning continues at a rapid pace in Pakistan, with ongoing UBC-AKU teleconferences fortnightly, and continued collaboration and communication with our CLIP colleagues in Nigeria and India.

Correction. This photo is of mothers in Pakistan attending one of the first focus groups of the CLIP Feasibility Study.