

POSTPARTUM HEMORRHAGE PREVENTION IN NEPAL A PROGRAM ASSESSMENT

As part of broader efforts to improve the safety of childbirth, the Nepal Ministry of Health launched in 2009 a national postpartum hemorrhage (PPH) prevention program featuring the advance provision of misoprostol to pregnant women for use during home births. In this South Asian country, approximately two-thirds of women deliver at home with no skilled birth attendant and an estimated quarter of all maternal deaths are due to PPH, a rare life-threatening condition of childbirth.

In 2013, a Gynuity-sponsored assessment of the program was conducted in nine districts and all three ecological regions -- mountain, hill and terai (flatland terrain) -- of Nepal. Interviews were conducted with 2,070 women who had recently given birth to assess knowledge, receipt and use of misoprostol. Interviews were also conducted with 270 Female Community Health Volunteers (FCHVs) and staff at 99 health facilities to assess the supply and provision of misoprostol.

Program Assessment Findings

- Few recently delivered women (15%) had received information about misoprostol and even fewer (13%) had received misoprostol tablets in advance of delivery.
- The overwhelming majority (87%) of women who received advance misoprostol and delivered at home used the medication for PPH prevention.
- There were widespread shortages in the supply of misoprostol at health facilities and among FCHVs.
- There were gaps in program-related knowledge and practices.
- The advance provision of misoprostol did not deter pregnant women from going to health facilities.
- There was no evidence to indicate that misoprostol was used for anything other than prevention of PPH.

Recommendations for Strengthening the Program

- Identify and address logistical and other supply chain constraints.
- Ensure more consistent monitoring of misoprostol stock throughout the health system.
- Give priority to ensuring sufficient misoprostol supply at rural birthing centers and other sub-district level facilities.
- Include content that emphasizes proper counseling and misoprostol provision in refresher trainings for FCHVs.

Conclusion

The supply and personnel challenges identified raised questions about the scalability and impact of the program over the long-term. A re-assessment at a later time is recommended.

Read more

[Postpartum hemorrhage prevention in Nepal: a program assessment, Rajbhandari et al. BMC Pregnancy and Childbirth 2017; Volume 17:169](#) (available in open access).

The program assessment was carried out by the Ministry of Health and Population, Nepal; Gynuity Health Projects; and New ERA. The national PPH prevention program also features the provision of oxytocin during facility-based births.

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