

Helping Mothers Survive Bleeding After Birth

Loreto, Peru



Jiro's Story



The mission of this project is to improve the quality of care the day of childbirth for the women and newborns in Loreto, Peru by equipping birth attendants with the skills needed to save mothers' lives.

Loreto, Peru

- 140,000 Square miles
- Remote location in the Amazon rainforest
- Majority of residents live in rural locations
- 63% of population live below poverty line
- One of the lowest density of health workers
10.8/10,1000
- 36% of births at home



Maternal Mortality Globally

- **830** Women die every day from preventable causes associated with pregnancy and childbirth.
- **99%** of maternal deaths occur in developing countries
- Women who live in rural and poorer communities are at higher risk for dying in pregnancy and childbirth.
- Young adolescents are at higher risk for complications and death as a result of pregnancy.
- 2015 Over **300,000** women died with from pregnancy and childbirth complications. Most occurred in low resourced settings and could have been prevented.

Maternal Mortality Peru

Estimated MMR in Peru: **68/100,000**

Peru ranks 83rd among nations in comparison to U.S. with **14/100,000**

The lowest MMR, **4/100,000**, is shared by 4 nations

> **50%** of Peru's maternal deaths are concentrated in **8** regions including Loreto

2007-2011 **Loreto** MMR **149.4/100,000**

Leading cause of maternal death in Peru hemorrhage (**33%**) 2015

26 Maternal deaths **15,384** births in 2018

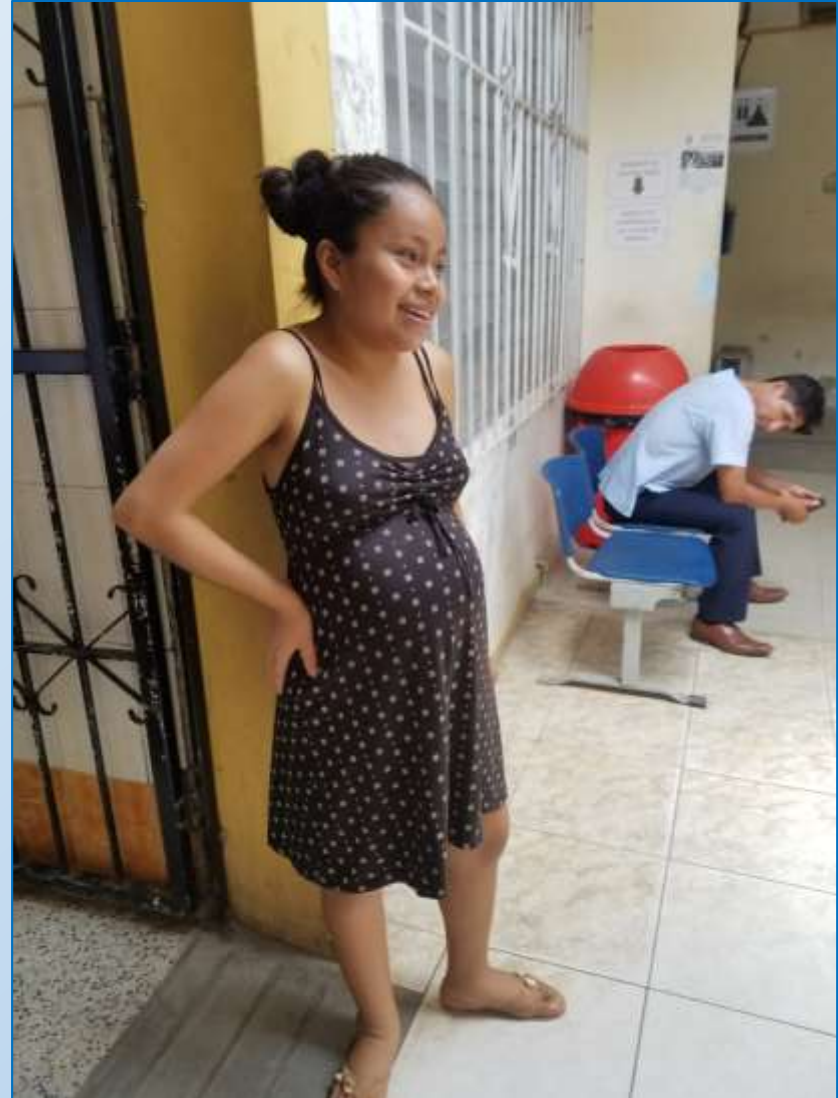
8 Maternal deaths in the first 6 weeks of 2019



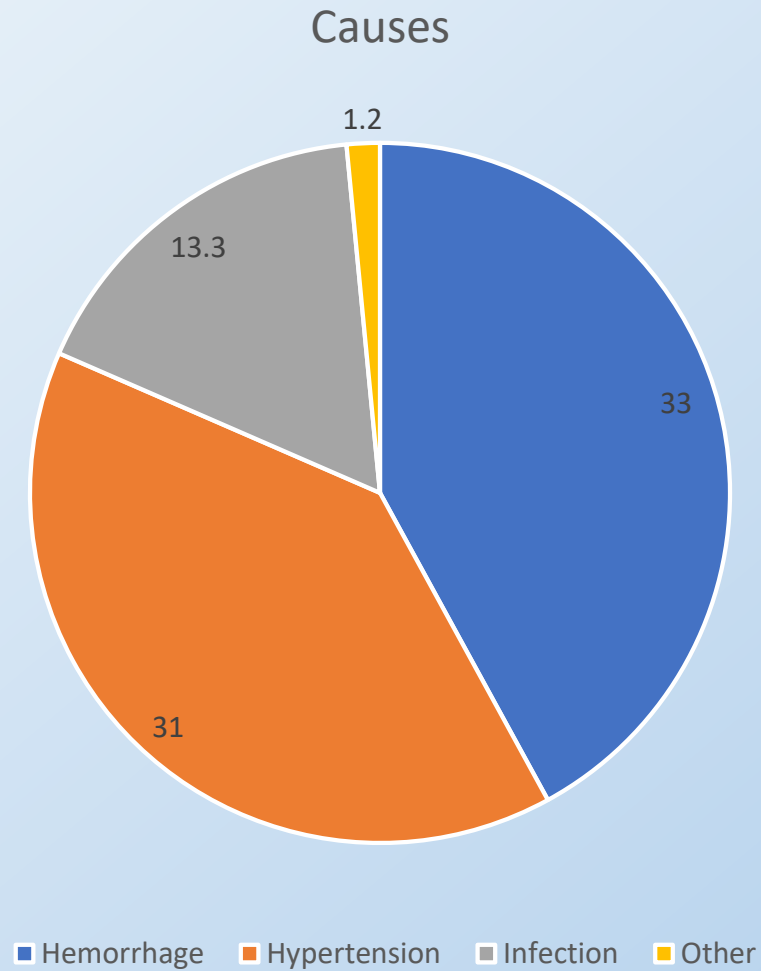
Goal of HMS-BABC Initiative

Reduce maternal mortality in Loreto, Peru by eliminating preventable maternal deaths from post-partum hemorrhage.

Consistent with one of *Rotary International's 6 areas of focus: **Maternal and child health.***



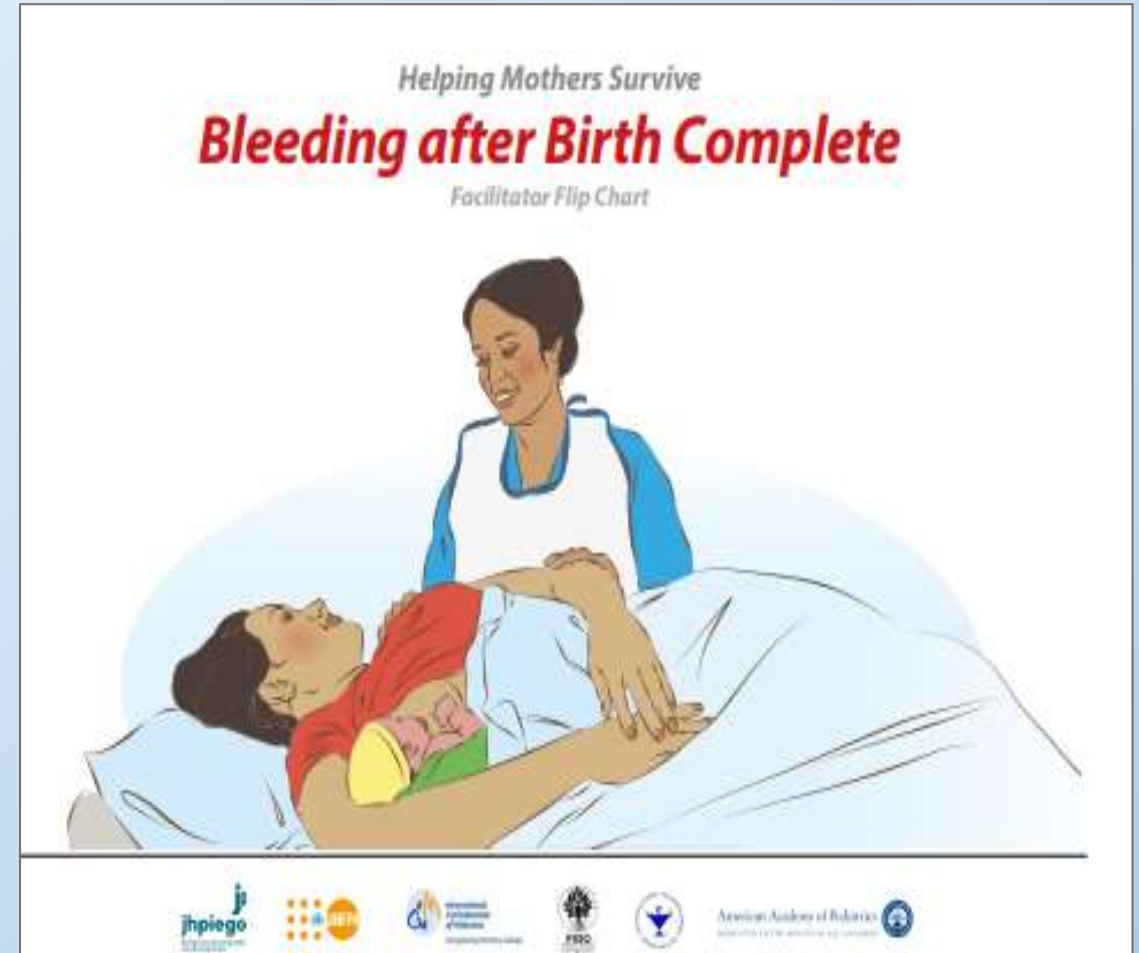
Maternal Mortality Peru



HMS-BABC

Helping Mothers Survive: Bleeding after Birth (HMS: BAB) is first package from Helping Mother's Survive (HMS) suite of simulation-based learning modules. HMS was developed Jhpiego (Johns Hopkins University affiliate), in collaboration with partners to end preventable deaths.

<https://hms.jhpiego.org/bleeding-after-birth-complete>



HMS-BABC

Training improves and sustains critical skills for birth attendants, nurses, doctors, obstertiz, midwives and others.



HMS-BABC

Techniques

- Case based learning
- Clinical simulation
- Practice and feedback

Example from facilitator flip chart

Performance Expectation

Identify retained placenta or fragments and perform manual removal of the placenta or fragments.

Key points

- Retained placenta or fragments can cause bleeding and infection.
- The uterus cannot contract if it contains the placenta, fragments, or clots.
- If the placenta does not deliver in 30 minutes, initiate treatment.
- If the placenta fails to deliver within one hour, OR the woman is bleeding heavily, remove placenta manually.
Do not delay!
- If you cannot remove the placenta or parts, surgery may be needed.

Knowledge and Skills

If the placenta is not delivered in 30 minutes **and the woman is not bleeding**, ensure that she has an empty bladder, repeat 10 IU oxytocin IM, continue controlled cord traction during contractions, and encourage her to bear down, squat, or breastfeed.

Do NOT repeat misoprostol!

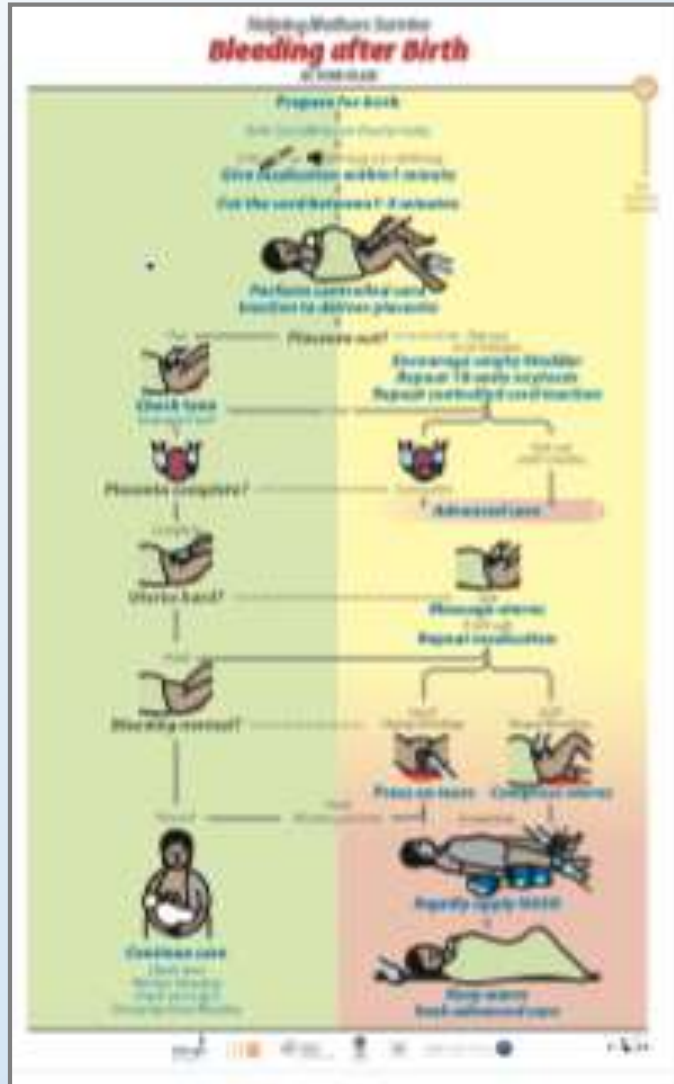
If the woman is bleeding heavily, OR if the placenta is not complete OR treatment at 30 minutes fails to work within one hour of birth, remove placenta and fragments manually.

To perform manual removal of placenta:

- Ensure privacy. Tell her what you will do and why.
- Ask the woman to urinate or catheterize bladder.
- Start IV infusion.
- Give diazepam 10 mg IM/IV (if woman is not in shock). Depending on local preference and clinical situation, you may use pethidine or ketamine.
- Give a single dose of antibiotics: either 2 g ampicillin IV or 1 g cefazolin IV.
- Put on personal protective equipment, wash hands, and put on long, sterile gloves.
- Hold umbilical cord with a clamp. Gently pull, using the cord to guide your other hand into uterus.
- Place fingers into uterus following cord to locate placenta. Identify the rough surface behind the placenta and carefully separate it from the uterine wall by smoothly sweeping fingers back and forth.
- Withdraw hand, bringing placenta with it and provide counter-traction abdominally.
- Check uterine tone. Massage if soft.
- Give oxytocin 20 IU IV in 1 L normal saline at 60 drops/minute.
- Examine placenta for completeness.
- Remove gloves and discard. Wash hands.
- Monitor bleeding, take vital signs, and ensure the uterus is well-contracted (every 15 minutes for two hours, and then every 30 minutes for the next 4 hours).



HMS-BABC Content



- Communication and team work
- Active management of third stage of labor
- Early detection
- Basic management of bleeding after birth





Respectful Maternal Care

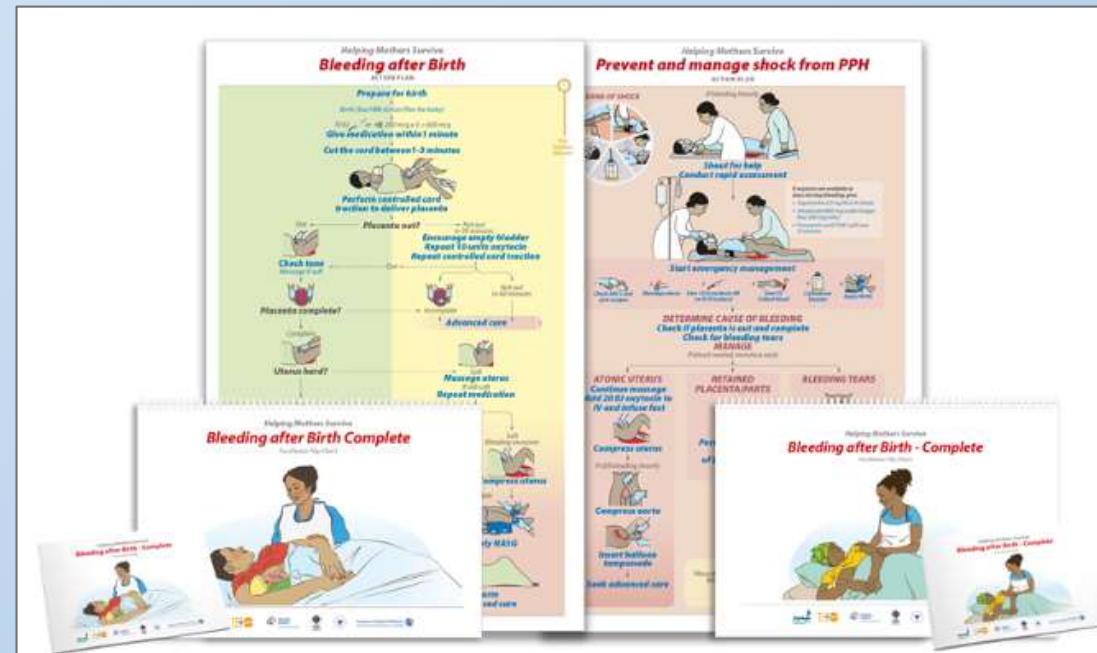


HMS-BABC Project Scope

6:1 Learner/Facilitator Ratio

Course Materials

- Simulator
- Facilitator Flip Chart
- Provider Guide
- Action Plans
- Supplemental Materials



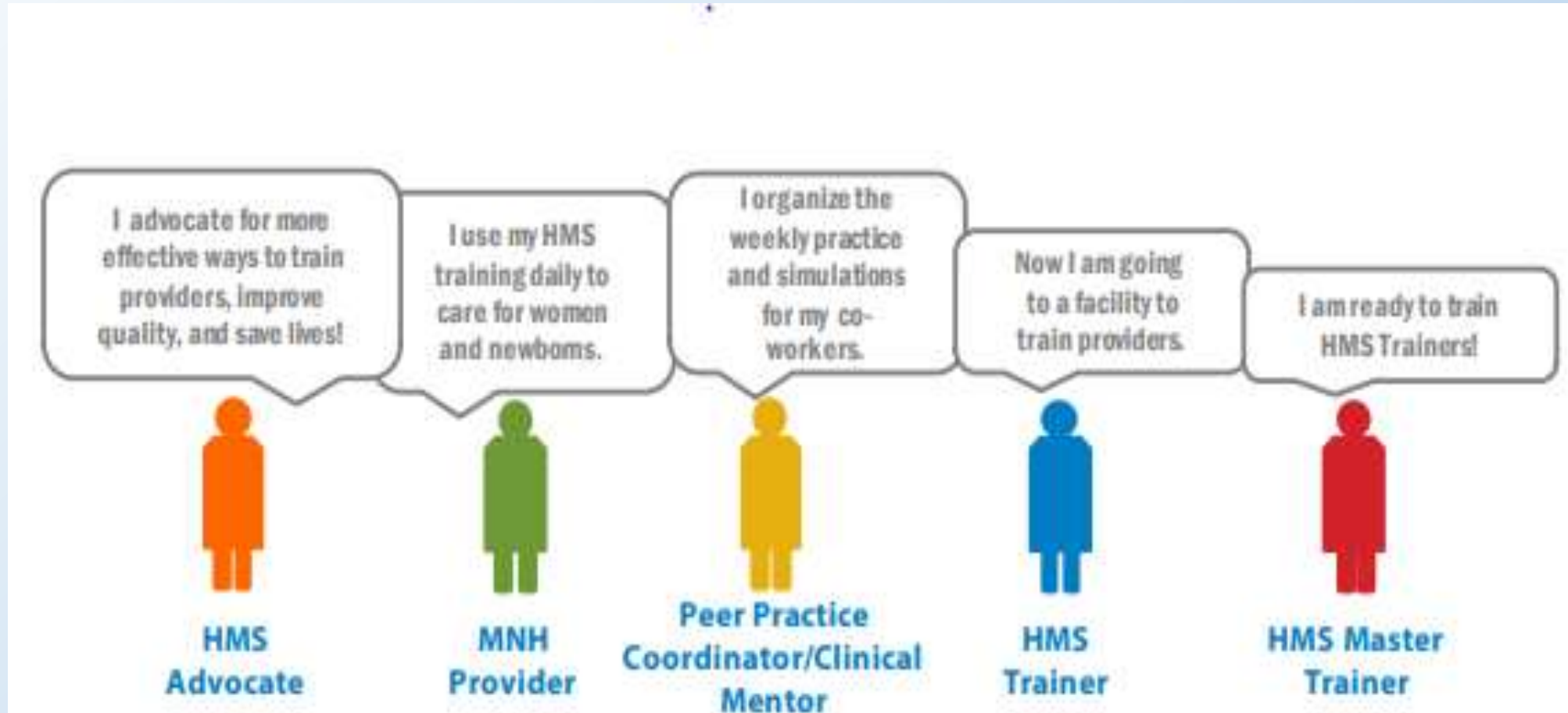
HMS-BABC Project Scope

Pilot

- Champion Training-Key stakeholders
- Plan implementation



HMS-BABC Project Scope



HBB-BABC Project Scope

Monitoring and Evaluation (M&E)



High Level Requirements

U.S. Partners

- HMS Champions and Mentors
- Simulators
- Print Training Materials
- M&E Tools
- Funding
- Travel/lodging
- Digital Capacity

Loreto, Peru

- DIRESA Champions
- CAAS Champions
- Community Leadership (Rotary)
- Facility trainings area
- Simulators
- Print Training Materials
- M&E Tools
- Funding
- Travel/lodging
- Digital Capacity

HMS-BABC Affected Parties



- Mothers, newborns, families
- Loreto communities
- DIRESA administration and staff
- CAAS administration and staff
- Doctors, nurses, obstetriz, technicians, other healthcare providers
- Hospitals, medical centers, health posts
- Rotary Club Iquitos, Rotary Club Littleton, Rotary International
- GHI administration and volunteers
- Donors

Loreto Experience

- Attend HMS course
- Assist with set-up and management of simulation stations
- Evaluate processes
- Present process improvement ideas to HMS team
- Interface with Rotary Iquitos
- Facilitate conversations with HMS participants on successes and challenges in maternal/newborn care



Loreto Experience



- Interview health promoters in community
- Visit hospitals and healthcare posts
- Prepare and distribute clean birth kits
- Participate in river community clinics
- Provide feedback to GHI Peru team on experience and present suggestions
- Distribute MamaNatalie simulators and print learning materials

<https://www.centura.org/community-programs/global-health-initiatives>

Peru Insights Team for Rotarians

| <u>Date</u> | <u>Schedule</u> | <u>Wednesday</u> | Continuation of the HMS Training |
|-----------------|--|------------------|---|
| Friday | Travel Day Friday AM – Depart Denver Friday PM – Arrive Lima Transfer to Hotel Antigua Miraflores (http://www.antiguamiraflores.com/) | Thursday | Clean Birthing Kits workshop and delivery Helping Babies Survive Training Engage with our local champion and hear about their successful outcomes Afternoon event with local providers and government leaders CAAS thank you dinner and celebration (nice attire) |
| Saturday | Travel Day Breakfast at hotel Saturday afternoon – Depart Lima and travel to Iquitos Transfer to Hotel Victoria Regina (http://victoriaregiahotel.com/) | Friday | Field Trip to Sinchicuay Visit our Total Health Village Observe GHI Jungle Clinic in action Lunch at Ceiba Tops Resort Mazan Health Post/deliver Clean Birthing Kits Amazon Excursion group transfers to Cieba Tops Lodge (http://www.explorama.us/ceibatopslodge.shtml) <i>*people leaving to return to the US leave in the evening after dinner. Evening departures to Lima, red eye back to US</i> |
| Sunday | Organization Day for Surgical and Community Health Team Insights and Community Service Group Fieldtrip City walking tour and orientation of Iquitos Lunch in the city Meet up with Surgical and Community Health Team for tour of Belen (the Venice of Peru) | Saturday | Free Day Night at Ceiba Tops Lodge 4 |
| Monday | <i>Understanding the healthcare landscape of Iquitos</i> Tour of Clinica Adventista Ana Stahl (CAAS) Meet and greet with Dr. Mika Branez', CEO of CAAS and Cesar Valera, CFO of CASS Lunch in the city Tour of government hospital Tour of Center of Medicinal Plants | Sunday | Travel day Transfer back to Iquitos Afternoon flight to Lima Evening departure to Lima <i>*the group going to Cusco will transfer to hotel Antigua Miraflores</i> |
| Tuesday | Helping Mother's Survive kick-off (Volunteer alongside fellow Rotarians in collaboration with Clinica Adventista Ana Stahl, DIRESA, and GHI) | Monday | Travel day/Morning arrival to Denver |



Thank you, Rotary!



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