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Maternal birth preparedness and complication readiness remains low in low- and middle-income countries: a systematic review and meta-analysis of observational studies

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Background: The global maternal mortality rate due to preventable pregnancy related complications is 810 per 100, 000 live births. Poor maternal involvement in birth preparedness and complications readiness (BPCR) practice contributes to poor maternal and child health outcomes in low- and middle-income countries (LMICs). This systematic review and meta-analysis determined the pooled prevalence
of maternal BPCR in LMICs.

Methods: Literature published in English language from 2004 through 2022 was retrieved from CINAHL, EMBASE, Google Scholar, Scopus, PubMed, and Web of Science databases. Egger's test and I 2 statistics were used to assess the publication bias and heterogeneity. The publication bias and heterogeneity was validated using the Duval and Tweedie's nonparametric trim and fill analysis using the random-effect analysis. The summary prevalence and the corresponding 95% confidence interval (CI) of BPCR was estimated using random effect model. The review protocol has been registered in PROSPERO with registration code CRD42020213129. The steps to recruit eligible studies and reports of each section of the manuscript were described in PRISMA flow chart and PRISMA 2020 checklist. The Joanna Briggs Institute's quality assessment tool for prevalence studies was used. STATA Version 16.0 was used to conduct the pooled meta-analysis.

Results: Sixty one studies with a total of 44, 554 pregnant women and postpartum nursing mothers' were included. The pooled prevalence of maternal BPCR was 41%. Maternal arrangement of blood donor and knowledge of danger signs of pregnancy and postpartum complications were 15% and 42% respectively. Only 42% of pregnant women and mothers within 42 days of delivery of the baby arranged transport service to the health facility.

Conclusions: Maternal BPCR remains low in LMICs. Maternal knowledge of dangers signs of pregnancy and postpartum complications, arrangement of transport service, and potential blood donor was low in LMICs. Health systems in LMICs must revise their health promotion policies and design evidence-based BPCR implementation strategy to enable active maternal involvement and improved community engagement in BPCR. Point of care access to blood and transport service during pregnancy and postpartum period must be improved to achieve better maternal and child health outcomes in LMICs.

Biography

The prevalance of high risk pregnancies at ante natal care unit of black lion university hospital from january to august 2o21

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Background: The recent increase in number of pregnant mothers suffering from high risk pregnancy is giving a concern to women leaders, health care services and others. And high risk pregnancy is more common in any women in the developing and developed country due to hereditary and common cause for chronic disease combined with life style.

Objective: To determine the prevalence and associated high risk pregnancy women attending ANC in black lion health facility, Addis ababa, Ethiopia, from January – August /2021 G.C Method. Analytic institutional based cross-sectional study was conducted from January, 2021- august, 2021 GC at black lion specialized hospital. The study populations were pregnant women who visited health institution found in black lion specialized hospital for ANC from January, 2021–August, 2021G.C. the total sample size was 314 pregnant women. The calculated sample size was proportionally allocated to all health facilities found in black lion specialized hospital. We used systematic random sampling method to identify pregnant women for interview. The data was collected from the hospitals record room. Before commencement of the actual study, the study tools and instruments were pre-tested in pregnant women's who attending ANC in black lion specialized hospital one day before the actual study period. Data entry and analysis was done Multivariate logistic regression analysis was used with SPSS version 20 statistical package. The strength of association was measured through odds ratio (OR) and their 95% confidence interval (CI).comparisons for which p-value below 0.05 was considered statically.

Result: Out of 314 pregnant mothers with response rate of 100% 47 (15.0%) were < 19 years,261 (83.12%) were 20-34 years and 6 (1.9%) were ≥ 35 years. While, 60 (19.1%) of the study participants were primigravida mothers and the rest were multigravida. In addition, 210 (66.9%) at third trimester. Among all, the prevalence of high risk pregnancy was 83 (26.43%). The leading risk factor identified in the index pregnancies were HTN 40 (12.5%), anemia 15 (4.8%), 12 (3.8%) had DM, 9 (2.87%) had APH, 7 (2.2%) had malpresentation.Conclusion and significance: From the total of study participant's hypertension,anemia, DM, APH and mal presentation founded as the major health problems. Expanding the utilization of antenatal care, early detection, problem identification and management for all pregnant women should be under taken.

Biography

Filimon z amdemariam, MD is a junior medical general practitioner after recieving his doctor of medicine from university of gondar. Born and raised in addis ababa with a two year work experience in hisfield and aspires tospecialize in obgyn.

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A population level analysis of mental health and non-communicable disease (NCD) in the Philippines using predictive modelling analysis

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The epidemic brought about by non-communicable diseases (NCD) and the lack of adequate data on the state of mental health (MH) in the Philippines have converged that threatens to overwhelm the health care infrastructure. Population level analysis is severely lacking that could otherwise provide a fundamental basis for critical analysis needed to address health policy interventions. The use of mathematical algorithm as a form of mixedmethod analysis in population level studies in developing countries has the potential to elucidate associations between diseases. Our study looks into the Philippine national data on mental health and NCD from 2002-2016 to determine the association and predictive correlation between mental health and NCD using predictive modeling study; designed to expand current understanding on the developmental origins and trajectories of these diseases from a developing country perspective.

Biography

Dr. Samonte is an academic global health neurologist (M.D.), trained in basic and clinical neurosciences. He was a member of the Harvard Catalyst, the Harvard Clinical and Translational Science Center. Received his training at Harvard institutions: Children's Hospital Boston, Beth Israel Hospital and Massachusetts General Hospital. He is currently completing his Ph.D. in health policy studies. He has received the Pediatric Chairman's award at University of Louisville (2006), America's Best Physician (Neurology), National Council Advisory Board, USA (2016); American Medical Association, Excellence in Medicine award (2018).

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Prevalence of Tramadol Abuse in Egypt: a Systematic Review and Narrative Analysis.

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Background: Substance abuse is a rising public health concern in Egypt. Some reports estimate that over 10% of Egyptian adults use at least one substance of abuse which is double the percentage in the developed countries. Tramadol is one of the most common abused substances in Egypt. The highly addictive weak opioid is becoming increasingly popular among Egyptians as it is readily available, relatively cheap, causes euphoric sensation, and allegedly improves sexual performance. The working class seems to be particularly severed by the uprising tramadol epidemic which could end up in an economic and public health crisis.

Objectives: We have conducted a systematic review and narrative analysis to answer an important question: what is the prevalence of tramadol abuse in Egypt?

Methods: We have conducted a systematic search using four data sources: PubMed (including MEDLINE), Cumulative Index of Nursing and Allied Health Literature CINAHL, Scopus and Web of Science. Boolean expressions between keywords, created a complex search string that was used to capture the studies discussing the research question of interest.

Results: Our analysis revealed that tramadol is probably the most abused substance in Egypt among the working class and a popular substance of abuse among adolescents and university students. Over 90% of construction workers use tramadol as their preferred substance of abuse, while 52%, 40%, and 25% of bus drivers, hospital cleaners, and textile workers respectively reported tramadol abuse. Among university students, pure tramadol use was reported by 1.8%, and tramadol use with other substances was reported by 10.8%. Tramadol is also becoming increasingly popular among adolescents and school students. Over 8% of adolescents reported using at least one substance of abuse. Of those, 83% are using tramadol alone while 17% are using tramadol with other substances. Another study reported that almost 2% of school students are abusing tramadol. In general, tramadol abuse is prevalent among 92% of mono and polysubstance abusers in Egypt.

Conclusion: Egypt is witnessing a tramadol epidemic that is mainly threatening the working class. Unless appropriate responses from the authorities and the society are taken, the socioeconomic consequences will be grave.

Biography

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Informed consent for patient data processing in electronic health records

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Objective: To report the results of a systematic review of national eHealth policies of different countries in relation to patient consent in patient data processing in electronic health records

Method: eHealth policies of 19 (14.07%) countries are reviewed with regard to patient consent, from a total of 135 countries that are indexed in the World Health Organization Directory of eHealth Policies. 68 (50.37%) policies were excluded based on language and 67 policies in English were selected for further consideration. These 67 (49.62%) policies were further evaluated resulting in exclusion of 43 (31.85%) policies due to policies being outdated and 5(3.70%) due to broken links. Finally, a total of 19 (14.07%) countries were selected for the review.

Results: 57.89% out of 19 countries require patients' informed consent to store patient data, 26.32% allow selective storageof patient data as defined by the patient, 89.47% require patients' informed consent when sharing or transferring or accessing patient data, 68.42% of the countries allow patients access their own EHR, 73.68% facilitate correction/modification in EHR, and 26.32% facilitate deletion of patient records. 89.47% of countries highlight mechanisms to assure privacy and security of EHR.

Conclusion: Policymakers' emphasis on various ethical concerns raised by EHRs has been increased highlighting patient rights related to eHealth as well as the requirement for compliance to different standards and regulations. eHealth policies must address requiring patients' informed consent in processing of patient data whereas patients have the ability to grant or withhold consent to different processing operations related to their EHR. Furthermore, facilitating patients with access to their own records, facilitating patients with modification, correction and deletion of EHR are widely discussed topics.

Biography

M M H Jayasekara is a doctor working in Colombo South Teaching Hospital,Sri Lanka. She is an MBBS graduate from University of Sri Jayewardenepura.Currently researching in health informatics and related disciplines.

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