NEWSLETTER December 2021

woman2

6620 WOMEN RANDOMISED ***Thank-you for an amazing 2021***



Nigeria Coordinating Team (Prof. Oladapo Olayemi, Dr Nike Bello, Mr Jide Okunade)

It is the end of another year and it has been wonderful working on this Trial. We thank our wonderful TCC team - Eni, Collette, Julio and all others, and the Nigerian team for the amazing work that is being done on this trial.

The teams at Akure, Ibadan, Ilorin and Oyo have been awesome. Despite all the challenges they have kept the trial going; even with some stops and restarts, you did not give up. As we approach the new year we look forward to a better and smoother journey as we take this trial to a great finish.

We wish you all a Merry Christmas and a Happy New Year!

ZAMBIA 359 WOMEN

WOMAN-2 team, Women And Newborn Hospital



PAKISTAN

5797 WOMEN

Pakistan Coordinating Team (Dr Kiran Javaid, Dr Aasia Kayani, Prof. Rizwana Chaudhri)

Dear Colleagues, we are immensely grateful and appreciative of your untiring efforts and support for the WOMAN-2 trial. This journey of success has not been a smooth one, with the Covid-19 pandemic disrupting our lives and the healthcare sector and leading to suspension of WOMAN-2 in Pakistan for most of 2020. However, your devotion and dedication has brought recruitment back on track and we are now on course to finish patient recruitment by August 2022.

With only eight months remaining, we are expecting you to continue with the same high level of engagement that will ensure that we make history with the WOMAN-2 Trial and impact the lives of millions of women around the globe. Do continue to enrol all eligible women at your hospitals, especially those with severe anaemia for the remaining duration of the trial.

Thank you very much for your extraordinary work !!!!

What a year 2021 has been! Not much different from 2020 when the world came together to fight one enemy - COVID-19. We have seen COVID-19 vaccines developed in record time, made possible by key players holding hands to achieve this. For a long time, pregnant women have died during childbirth from causes that are preventable, with PPH being the leading cause. And unless we investigate novel strategies to prevent PPH such as Tranexamic acid (which has been in use for other indications for a while), pregnant women will continue to die from bleeding. What if the world held hands and said no to premature deaths of women at the prime of their lives as it did with the COVID-19 pandemic? I can imagine what a beautiful world that would be. Therefore, Let each one of us stand up for women and support evidence-based interventions to prevent maternal deaths. Change starts with me!

- Dr Mwansa Ketty Lubeya, Principal Investigator, WNH-Lusaka

Introducing Team Tanzania

Message from Professor Projestine Muganyizi, Tanzania National Coordintaor

Tanzania is challenged by high maternal mortality with Postpartum Haemorrhage (PPH) as the leading cause in more than a third (39%) of all maternal deaths. According to the Tanzania Demographic and Health Survey (2015/16), 45% of women in the reproductive age group (15-49Years) are anaemic and over 50% of pregnant women are anaemic. Since anaemia is a recognized risk factor for PPH, the high proportion of anaemic pregnant women could be one of the major reasons for the high mortality caused by PPH in Tanzania. These deaths could be minimized by preventive measures targeting the high-risk population of anaemic pregnant women. Thus, the WOMAN2 Trial is seen as the potential answer to this need which gives the reason why Tanzania decided to welcome the trial.

In February 2021 we identified five hospitals that will participate in the WOMAN2 Trial. They are Muhimbili National Hospital; Mbeya Zonal Referral Hospital; Dodoma Regional Referral Hospital; Mwananyamala Regional Hospital and Mount Meru Regional Hospital.

In 9 months we managed to obtain local site approvals, ethical clearance from the National Institute of Medical Research and the Muhimbili University of Health and Allied Sciences, as well as approval and import license from the Tanzania Medicines and Medical Devices Authority (TMDA) to do the trial at these sites. Materials are being sent to sites. We expect the first client to randomised in January 2022 once all contracts have been signed off and site training has been completed.



Tanzania Coordinating Team (Ms Alice Kawala, Prof. Projestine Muganyizi, Mrs Rose Temba)



Dr Francis Joseph (PI) and team, Mount Meru Regional Hospital



Dr Luzango Maembe, PI, Mwananyamala Hospital



Dr Enid Chiwanga (PI) and team, Dodoma Hospital



Dr France Rwegoshora (PI) and team, Mbeya Hospital



Dr Vincent Tarimo (PI) and team, Muhimbili Hospital

MESSAGE FROM THE UK COORDINATING TEAM (LSHTU CTU)

As we come to the end of 2021, I am delighted to inform you that the trial is back on track. Well done to you all for randomising over 4000 women this year alone despite local challenges such as dealing with COVID-19, strike actions and reduced numbers of women attending hospital at some sites. This is a fantastic recovery from last year when only 1166 women were randomised due to the pandemic.

6620 women have now been randomised and we are well on track to achieving our target of 10, 000 women

by August 2022. On behalf of all at LSHTM-CTU, I would like to thank you all for an amazing 2021 and I look forward to us all delivering the trial and finding out whether tranexamic acid can help prevent PPH in women with moderate to severe anaemia less than a year from now!

- Prof. Haleema Shakur-Still, Chief Investigator



Bolan Hospital Unit 1, Quetta, Pakistan

Bolan Hospital Unit 3, Quetta, Pakistan



Ilorin General Hospital, Nigeria

Jinnah Hospital Lahore, Pakistan





State Hospital, Oyo, Nigeria



Nishtar Hospital Multan Unit 3, Pakistan



Women And Newborn Hospital, Lusaka, Zambia



Women And Newborn Hospital, Lusaka, Zambia