

Uptake of Sulfadoxine-Pyremethamine-Based Intermittent Preventive Treatment in Pregnancy (IPTp-SP). A Retrospective Observational Study in Two Rural Districts of Mozambique

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INTRODUCTION

- The WHO recommended IPTp-SP for pregnant women in moderate-to-high malaria transmission areas starting early in the second trimester.
- The Mozambique NMCP has been routinely reporting aggregate IPTp2 & 4 uptake.
- This poster presents results of retrospective observational analysis of IPTp1 - 3.

MATERIALS AND METHODS

- This study was conducted in 14 facilities in two districts of Mozambique (Table 1).

TABLE 1: DISTRIBUTION OF STUDY FACILITIES BY DISTRICT AND PROVINCE

Province	District	Targeted number of facilities	Number of facilities reached
Nampula	Nacala Velha	5	5
Zambezia	Milange	16	9

- We abstracted individual level data from paper-based ANC in the 14 reached facilities.
- Variables abstracted include: gestational age at first ANC visit and dates of each individual's IPTp doses.
- We assessed crude and adjusted uptake rates for IPTp 1- 3. Adjustment excluded HIV infected pregnant women on cotrimoxazole and women who registered for ANC at 32 weeks of gestation and later.

RESULTS

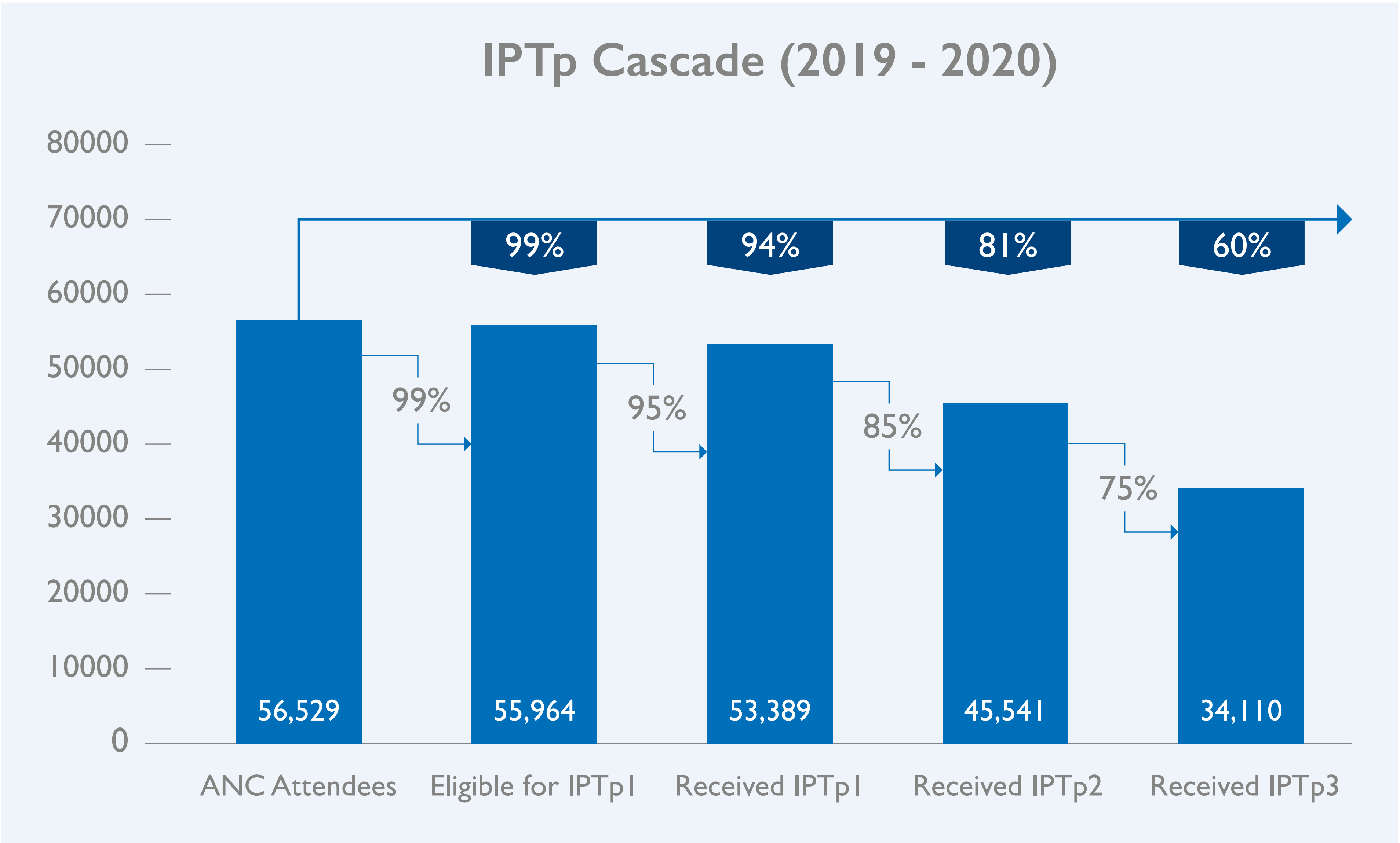
- A total of 56,529 pregnant women registered for ANC at the 14 facilities.
- The mean gestational age at registration was 22 weeks, which is 9 weeks later than the 13 weeks recommended for the start of IPTp (Table 2).

TABLE 2: IPTP UPTAKE BY DISTRICT

	Nacala Vehla District	Milange District	Total (95% CI)
Number attended ANC Mean gestational age at registration (IQR)			56,529 22 weeks (16-26)
IPTp 1 Coverage (95% CI)			
Reported by NMCP	N/A	N/A	N/A
Crude verified	93.2% (92 – 94.1)	90.9 (90.0 – 91.7)	92.1% (91.9-92.3)
Adjusted verified	97.1% (96.6 – 97.8)	93.9 (93.2 – 94.8)	95.4% (95.2 - 95.5)
IPTp 2 Uptake (95% CI)			
Reported by NMCP			87%
Crude verified	79.8% (79.6 – 80.3)	83.1% (82.7 – 84.1)	82.0% (81.7 - 82.3)
Adjusted verified	84.1% (83.7 – 84.9%)	86.8% (86.2 – 87.9)	85.3% (85.0 - 85.6)
IPTp 3 Uptake (95% CI)			
Reported by NMCP	N/A	N/A	N/A
Crude verified	70.4% (69.8 – 71.3)	72.5% (72 – 73.1)	71.6%(71.2 - 72.0)
Adjusted verified	73.9% (73.0 – 74.8)	75.5% (75.0 – 76.6)	74.9% (74.5 - 75.2)

- From Table 2 above and Figure 1 below, there were losses of up to 10% between subsequent IPTp doses, both crude and adjusted.
- While 75% of IPTp3 eligible women accessed IPTp, this translates to only 60% of the total number of women registered for ANC.

FIGURE 1: IPTP CASCADE IN THE 14 STUDY FACILITIES



DISCUSSION

- Despite high IPTp 1 coverage rates, losses between doses will impact Mozambique's ability to achieve the Roll Back Malaria targets (85%+ of pregnant women receiving at least three doses of IPTp).
- Patient-centered interventions that improve subsequent IPTp coverage rates both at the community and facility level need to be strengthened.

ACKNOWLEDGEMENTS

We acknowledge Mozambique USAID/PMI which funded the data collection; the NMCP and Nampula and Zambezia DPS who supported data collection.

REFERENCES

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