

11.4. RECOMMENDATION:

Should AUXILIARY NURSES administer antihypertensives for severe high blood pressure in pregnancy?

Problem: Poor access to treatment for severe high blood pressure in pregnancy
Option: Auxiliary nurses administering antihypertensives for severe high blood pressure in pregnancy
Comparison: Care delivered by other cadres or no care
Setting: Community/primary health care settings in LMICs with poor access to health professionals

Recommendation	<i>We recommend against the option</i>	<i>We suggest considering the option only in the context of rigorous research</i>	<i>We recommend the option</i>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
We suggest considering this option only in the context of rigorous research. We suggest evaluating this intervention where auxiliary nurses are already an established cadre; where a well-functioning referral system is in place or can be put in place; and where care is delivered in the context of a standard protocol.			
Justification	There is insufficient evidence on the effectiveness of auxiliary nurses administering these drugs. However, this may be acceptable and feasible, and may reduce inequalities in settings where access to more highly trained providers is limited.		
Implementation considerations	Not applicable		
Monitoring and evaluation	-		
Research priorities	- Studies assessing the effects and the acceptability of using auxiliary nurses to administer (a) antihypertensives for high blood pressure and (b) corticosteroids to pregnant women are needed		