

11.4. RECOMMENDATION:

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

Problem: Poor access to treatment
Option: Auxiliary nurse midwives administering antihypertensives for severe high blood pressure during 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 with targeted monitoring and evaluation</i>	<i>We recommend the option</i>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
We suggest considering the option with targeted monitoring and evaluation. We suggest evaluating this intervention where auxiliary nurse midwives are already an established cadre; in an acute context prior to referral; and where following a standard protocol.			
Justification	There is insufficient evidence on the effectiveness of auxiliary nurse midwives administering these drugs. However, this is probably acceptable, and they have the necessary clinical skills. The intervention may also reduce inequalities in settings where access to more highly trained providers is limited.		
Implementation considerations	<p>The following should be considered when using auxiliary nurse midwives to (a) administer intravenous fluid for resuscitation, (b) perform internal bimanual uterine compression, and (c) suture genital lacerations:</p> <ul style="list-style-type: none"> - The relevant professional bodies should be involved in the planning and implementation of the intervention to ensure acceptability among affected health workers - The distribution of roles and responsibilities between auxiliary nurse midwives and other health workers needs to be made clear, including through regulations and job descriptions - Changes in regulations may be necessary to support any changes in auxiliary nurse midwives' scope of practice - Implementation needs to be in the context of a comprehensive remuneration scheme, in which salaries or incentives reflect any changes in scope of practice. Giving incentives for certain tasks but not for others may negatively affect the work that is carried out - Referral systems need to function well, i.e. financial, logistical (e.g. transport) and relational barriers need to be addressed. Specifically, local health systems need to be strengthened to improve quality of care at the first referral facility - Supplies of drugs and other commodities need to be secure - Responsibility for supervision needs to be clear and supervision needs to be regular and supportive - Auxiliary nurse midwives and their supervisors need to receive appropriate initial and ongoing training 		
Monitoring and evaluation	Monitoring and evaluation should focus on adherence to clinical protocols and potential harms of antihypertensives on the mother and the baby.		
Research priorities	<ul style="list-style-type: none"> - Studies assessing the effects and the acceptability of using auxiliary nurse midwives to administer (a) antihypertensives for high blood pressure and (b) corticosteroids to pregnant women are needed 		