QUALITY OF CARE DURING CHILBIRTH IN FOUR AFRICAN COUNTRIES

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Objective
To determine the rate of application of practices recommended during normal delivery in four countries in Africa using international criteria.

Patients and methods
It was a cross sectional multicentre survey in maternity hospitals in four African countries (Burkina Faso, Gabon, Guinea and Senegal). Demographic data were obtained from labouring women with their consent and childbirth practices were assessed by direct observation in labour wards using World Health Organization’s criteria.

Results
A total of 948 deliveries were observed and midwives conducted them in 91.1 %. The most respected practices were encouragement to change position during labour (72.9 %), no systematic intravenous infusion of oxytocin (95.5 %), selected episiotomy for the primipara (84.4 %), active management of third stage of labour (88.7 %), skin-to-skin contact between newborn and mother within hour after delivery (65.9 %) and systematic decontamination of instruments (90 %).

Some practices were averagely performed: use of partograph (46.3 %), adoption of positions other than the spinal one (55.2 %), no massage and no stretching of the perineum (56.8 %), Valsalva method for bearing and fundal pressure (30.4 %) and examination of the placenta (32.3 %).

Practices poorly used include the support of husband or family during labour and delivery (24.2 %), oral fluid during labour (18 %), no systematic intravenous line during labour (29.2 %) and early breastfeeding (17.3 %).

Conclusion
Much effort should be done for implementation of best practices during normal delivery including the use of partograph and the involvement of families and partners.