

Current Research in PPH and Uterotonics



Current Research in PPH Prevention and Uterotonics Quality

- PPH Prevention Studies:
 - Champion Trial Heat Stable Carbetocin
 - IMOX Trial Intramuscular oxytocics
 - Uterotonics Network Meta-analysis
- Uterotonics Quality:
 - Maternal health products quality audits Nigeria
 - Clinical experience with the quality of oxytocin

Heat-Stable Carbetocin°

- Heat stable carbetocin (HSC) is a uterotonic medicine used to prevent PPH
- Carbetocin is registered and used in more than 80 countries. Since 1997
- HSC has proven efficacy and safety evidence, primarily in C-section
- Ferring's proprietary formula for HSC does not require cold-chain transportation or refrigerated storage (Data submitted for publication)
- The heat stable version has been introduced into 27+ countries to date including Australia, Europe and Mexico since 2015
- Carbetocin (manufactured by Ferring Pharmaceuticals) has been used in prevention of PPH for 20 years (since 1997) in over 10 million women, primarily following caesarean section
- Currently 11 national guidelines are recommending Carbetocin for active management of third stage of labour (AMSTL) (data on file)

^{*} Brand names: PABAL, Duratocin, Lonactene

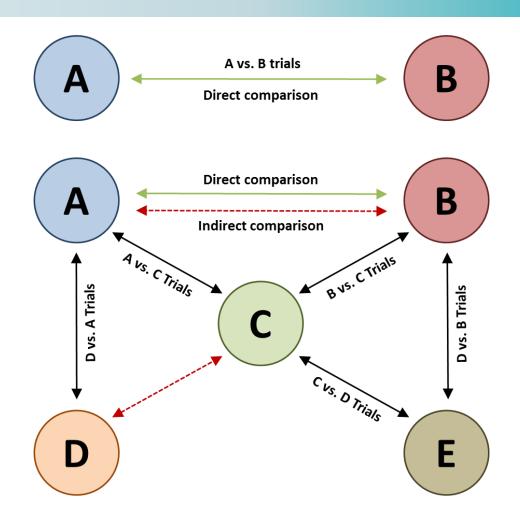
Heat stable carbetocin for preventing PPH

- Also known as the Champion Trial
- WHO-led, multi-centre randomised controlled trial
- To evaluate non-inferiority of Carbetocin RTS 100 μg IM versus oxytocin 10 IU
 IM for prevention of PPH and severe PPH after vaginal delivery
- 29, 658 women recruited across 23 sites in 10 countries
- Data collection completed end January 2018
- Results will be announced in October 2018
- Objectives regulatory and PPH guidelines

Intramuscular Oxytocics (IMOX)

- A Comparison Study of Intramuscular Carbetocin, Syntocinon and Syntometrine for the Third Stage of Labour Following Vaginal Birth
- North Bristol NHS Trust
- According to a survey, 71.4% of maternity units in the UK routinely administer Syntometrine (oxytocin/ergometrine) for preventing PPH while guidelines recommend Syntocinon (oxytocin)
- According to other studies:
 - Carbetocin slightly better at preventing PPH than Syntometrine and with less side-effects
 - Carbetocin may be as good as Syntocinon at preventing PPH
- No existing studies directly comparing effectiveness, side-effects and cost-effectiveness of the 3 drugs
- Over 6,000 patients
- Results to be published in 2018

- Uterotonic Agents for Preventing PPH Cochrane Review
- Assess clinical effectiveness and side-effect profile of uterotonic drugs to prevent PPH
- Generate clinically useful ranking of available uterotonics according to their effectiveness and side-effects.
- Purpose: reducing uncertainty about which is the most effective drug for preventing PPH



Primary Outcomes

500 mL

1000 mL

Secondary Outcomes

Death

Death or severe morbidity composite

outcome

Additional use of uterotonics

Transfusion

Blood loss

Change in Hb

Side-effects

Nausea

Vomiting

Hypertension

Headache

Tachycardia

Hypotension

Abdominal pain

Fever

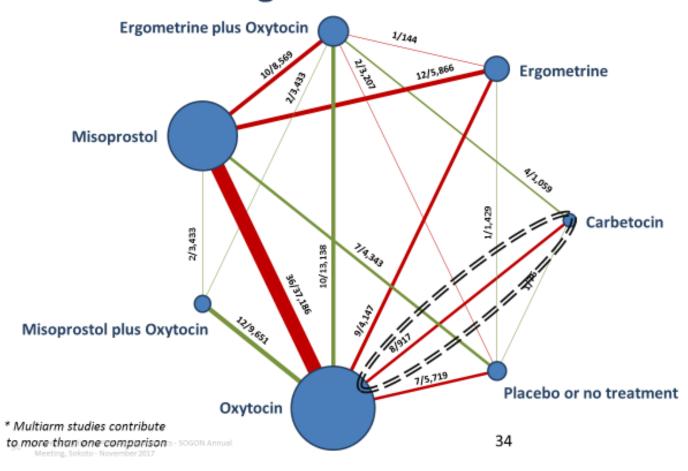
Shivering

Primary Outcomes (restricted to high

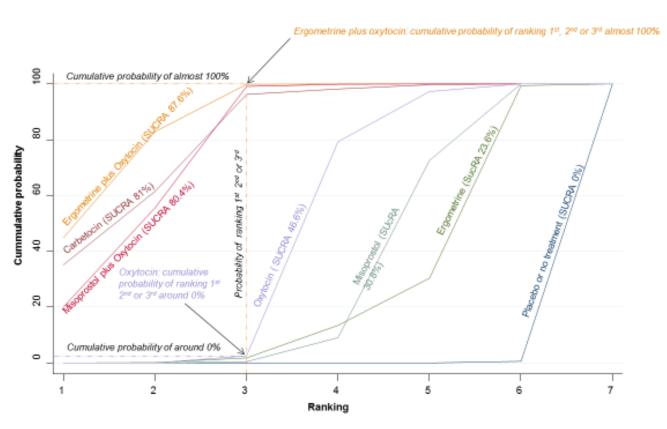
quality studies only)

500 mL

Network Diagram for PPH ≥ 500 mL

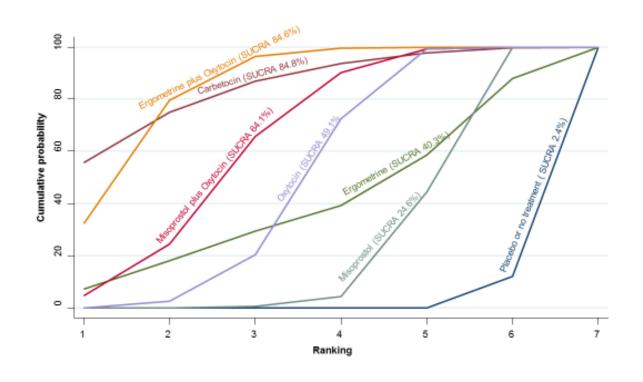


Cumulative Rank Plot PPH ≥ 500 mL



 Current Studies in PPH and Uterotonics - SOGON Annual Meeting, Sokoto - November 2017

Cumulative Rank Plot PPH ≥ 1000 mL



- In 137 trials (>86,000 women)
- Most effective drugs for all blood loss outcomes
 - Syntometrine
 - Carbetocin
 - Oxytocin + Misoprostol combination (OxyMiso)
- Oxytocin is not in the top 3
- Worst drugs for side effects
 - Syntometrine
 - OxyMiso
- Most cost-effective drug is carbetocin (despite the unit cost for carbetocin being relatively more expensive)
- However, carbetocin loses its ranking in high quality studies
- WHO Champion trial will fulfil the gap

Safe Childbirth and Quality Medicines

- Results of Oxytocin, Misoprostol, Magnesium Sulfate and Calcium Gluconate Quality
 Audits, Nigeria
- Promoting the Quality of Medicines Program, USP
- The quality of oxytocin injection, misoprostol tablets, magnesium sulfate, and calcium gluconate injections was assessed across the six geopolitical zones of Nigeria.
- 159 samples of oxytocin
- HPLC Assay test for composition of active ingredient, and confirmation of registration with regulatory authority (NAFDAC)
- 74.2% of oxytocin injection samples failed the assay test, with the northeast and southeast zones registering the highest failure rates. The percentage composition of the active ingredient varied between 0.0% and 163.7%

Clinical experience with the quality of oxytocin

- Cross-sectional study to assess HCP clinical experience with the quality of oxytocin (Lagos State, Nigeria)
- Lagos University Teaching Hospital
- RHSC Webinar available at rhsupplies.org for results



Contact: Fiona Theunissen, Concept Foundation Uterotonics NMA slides presented with permission of I. Gallos (author) Photo credit: Joni Kabana, Kabana Photography