

Technical Reference Team

Commodity: Misoprostol

Background

The UN Commission on Life-Saving Commodities for Women and Children (the Commission) was formed in 2012 by the UN Secretary-General as part of the global Every Woman, Every Child (EWEC) movement. EWEC challenges the global community to increase access to and appropriate use of essential medicines, medical devices, and health supplies that effectively address the leading preventable causes of death during pregnancy, childbirth, and childhood.

Led by a wide range of high-level leaders from around the world, the Commission developed a framework for action on Reproductive, Maternal, Newborn, and Child Health (RMNCH) products that can be applied nationally and utilized in global RMNCH initiatives. The framework outlines a priority list of 13 commodities, key barriers to access and use, and 10 cross-cutting recommendations to rapidly increase both access and use. By increasing access to and use of these 13 commodities, it is estimated that 6 million women and children can be saved by 2017.

Moving forward

To help carry forward the Commission's recommendations at the global and national levels, **Global Technical Reference Teams (TRT)** were established. One group was formed for each of the 13 commodities and 10 recommendations, and an advocacy working group is dedicated to advancing cross-cutting goals. The groups carry out their work through a variety of mechanisms, including guidance documents and tools to support countries in their efforts to implement recommendations and address global and regional bottlenecks. The TRTs are coordinated by a Strategy and Coordination Team hosted by the United Nations Children's Fund (UNICEF).

Spotlight on Misoprostol

Postpartum hemorrhage (PPH) or excessive bleeding after childbirth is the leading cause of maternal death.



PATH/Evelyn Hockstein

Misoprostol is used to prevent and treat post-partum hemorrhage, the leading cause of maternal deaths worldwide. Appropriate packaging is important to ensure the integrity of the product.

PPH is preventable and treatable, yet one out of four maternal deaths is caused by this complication occurring after birth. Misoprostol is one uterotonic medicine that can prevent and treat PPH by stimulating strong contractions of the uterus. The World Health Organization (WHO) recommends using misoprostol for preventing and treating PPH when oxytocin, another uterotonic, is unavailable or cannot be administered safely. Misoprostol pills are administered orally and are particularly useful for home deliveries, especially in remote areas where access to health services is not readily available.

The Maternal Health Technical Reference Team (MH TRT) works to increase the appropriate use of quality oxytocin, misoprostol and magnesium sulfate, as well as to improve access and use by reducing key barriers in EWEC countries. The MH TRT's objectives are to:

- Improve forecasting and quantification;
- Achieve an adequate supply of quality commodities available where needed;
- Improve and adopt practices and policies for safe use; and
- Advance innovations such as simplified packaging and presentation, as well as heat-stable formulations and easier to use modalities.

The MH TRT's seven subgroups offer expertise to advance specific work streams related to one of the three maternal health commodities or cross-cutting issues.

Group membership

The lead conveners of the MH TRT are the US Agency for International Development (USAID) and the United Nations Population Fund (UNFPA). The subgroup conveners include: Tools-Systems for Improved Access to Pharmaceuticals and Services program led by Management Sciences for Health; Mapping of manufacturers-Concept Foundation; Increasing use of magnesium sulfate-Accelovate and MCHIP/Jhpiego; Oxytocin in the cold chain-USAID; Improved uptake and use of WHO guidelines and recommendations-PATH; Misoprostol on Essential Medicines Lists (EML)-Venture Strategies Innovation; and Commodity Security- John Snow, Inc.

Progress to date

The MH TRT has developed several key tools and resources that can be used to address issues relating to the three commodities. These include fact sheets on quantification, forecasting, product use, demand, and quality tools. The fact sheets describe key characteristics of each tool and include the purpose, expected outcome, type, and format of the tool. The fact sheets also outline the resources required to use the tools and the tools' available languages.

The group has also conducted work specific to misoprostol, including:

- An extensive list of generic misoprostol manufacturers worldwide, including the status of and potential for WHO prequalification submissions;
- Landscape analysis and record review of national EMLs in Africa and Asia; and
- List of priority countries to undergo revisions of EMLs based upon the need, timing of internal revision cycle in country, and the presence of

organizations and misoprostol programming to support policy revision.

Upcoming activities

During the next two years, the MH TRT will:

- Develop a knowledge translation methodology that will be used in three pathfinder countries to increase the safe and appropriate use of magnesium sulfate, misoprostol, and oxytocin;
- Develop a searchable web-based compendium of tools used for quantification and forecasting, as well as evaluating use, demand, and quality; and
- Develop a blueprint for the adaption of the Strategic Pathway to Reproductive Health Commodity Security framework for maternal health supplies and a supplies-specific commodity security framework for countries to implement.

Available resources

The MH TRT will offer technical assistance to pathfinder countries to:

- Include misoprostol on Democratic Republic of Congo and Sierra Leone's EMLs ;
- Adapt tools to assist with quantification and forecasting, as well as evaluating use, demand, and quality of maternal health commodities;
- Assess the market for misoprostol;
- Identify barriers and facilitators to implement WHO guidelines and assist countries to develop implementation plans that address issues highlighted by evaluation efforts; and
- Establish commodity security committees related to reproductive, maternal, newborn and child health.

Contact us

For more information or to request tools and technical assistance, please contact Deborah Armbruster, USAID (darmbruster@usaid.gov), or Jagdish Upadhyay, UNFPA (upadhyay@unfpa.org).