



drishti

New Tool to Reduce Maternal Mortality

 drishtias.com/printpdf/new-tool-to-reduce-maternal-mortality

The use of **Non-pneumatic Anti- Shock garment (NASG)** controls blood loss due to postpartum haemorrhage (PPH), thus saving the lives of new mothers.

- Postpartum haemorrhage (PPH) leads to **continuous and excessive bleeding**. The rapid loss of blood because of PPH reduces the body's blood pressure and can even cause death.
- The NASG applies pressure to the lower body and abdomen, thereby forcing the blood that was getting accumulated in the pelvic area to other essential organs of the body. Thus, NASG quickly **stabilizes patient** and gives enough time to doctors for treatment.
- NASG is part of a local initiative named **Sahara**, by the district's development officer (Arun Mahesh Babu) of **Ahmedabad district in Gujarat**. The officer has started the initiative in November 2018.
- While there were 8 maternal deaths in the district because of PPH between January and November 2018, since the introduction of this initiative there have been **no PPH deaths**.
 - A lot of mothers were **anaemic** in the Ahmedabad district because of **poor nutrition**. This weakness compounds the damage caused by **excessive and sudden bleeding**.
 - Moreover, women **delivering children in rural areas** are far away from district hospitals when such complications occur. Data showed that almost 30% of maternal deaths in the state were because of PPH and these primarily took place within the first 4 to 24 hours after childbirth.
- Today, 40 PHCs (Primary Health Care Centres) in Ahmedabad have an NASG suit each - each suit can be used 140 times - and the government has spent Rs 14,500 per suit under the **Janani Shishu Suraksha Karyakaram (JSSK)**.

Janani Shishu Suraksha Karyakaram (JSSK)

- The Government of India has launched Janani Shishu Suraksha Karyakaram (JSSK) on 1st June, 2011.
- It is an initiative to provide completely free and cashless services to pregnant women including normal deliveries and caesarean operations and sick newborn (up to 30 days after birth) in Government health institutions in both rural & urban areas.
- It will motivate those who still choose to deliver at their homes to opt for institutional deliveries.

According to **Sample Registration System** results of 2016-17, Gujarat's **IMR** (per 1,000 live births) was 30 and **MMR** (per 100,000 live births) was 91 — better than the national averages but quite high for a relatively more prosperous state.

Source: IE