

Malawi newborn and child health national Clinical Practice Guidelines: A landscape analysis

Roselyn Chipojola, BSc NM, MSN, PhD¹; Gertrude Kunje, MPH¹; Suzgika Lakudzala, MPH¹; Mashudu Mthethwa PhD²; Nyanyiwe Masingi Mbeye, BSc N, MPH, MSc Epi, PhD¹

1.Evidence Informed Decision making Centre (EvIDenCe), School of Global and Public Health, Kamuzu University of Health Sciences

2.Cochrane South Africa, South African Medical Research Council, Cape Town, South Africa



Introduction

In countries like Malawi, there are newborn and child health challenges, particularly, in provision of care. Clinical Practice Guidelines (CPGs) have the potential to improve quality of care. However, CPG shaven't been consistently adopted or adapted or updated in Malawi.

Study objective

To identify the available national clinical CPGs for newborn and child-health topics developed between 2017 and 2022, describe their scope and appraise the quality using the AGREE II tool.

Methods

Study design

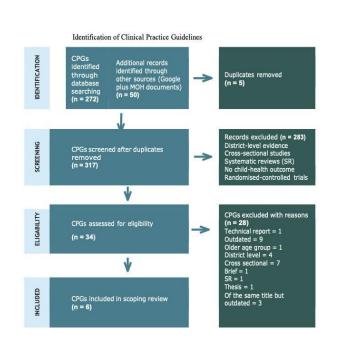
A scoping review of Clinical Practice Guidelines in Newborn and Child-health in Malawi.

Methods

- We searched Google and Google scholar for CPGs addressing newborn and child health published in Malawi between 2017-2022. Two authors independently extracted data using a predeveloped and piloted excelsheet.
- AGREE II tool was used to appraise the quality of reporting of the CPGs.

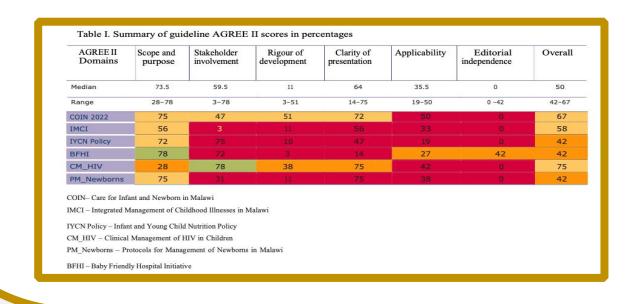
Results

Figure 1. PRISMA FLOW DIAGRAM



322 records were identified. After removing duplicates, 317 titles and abstracts were screened, then 34 full text of potential eligible CPGs . 28 records were excluded, thus 6 CPGs were included for review.

Table 1 & Figure 2. Agree II scores and interpretations



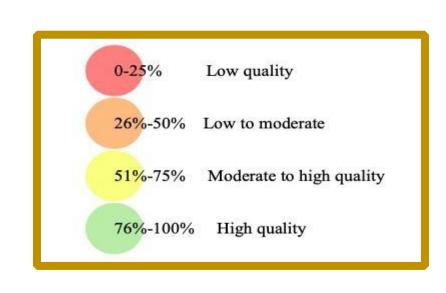
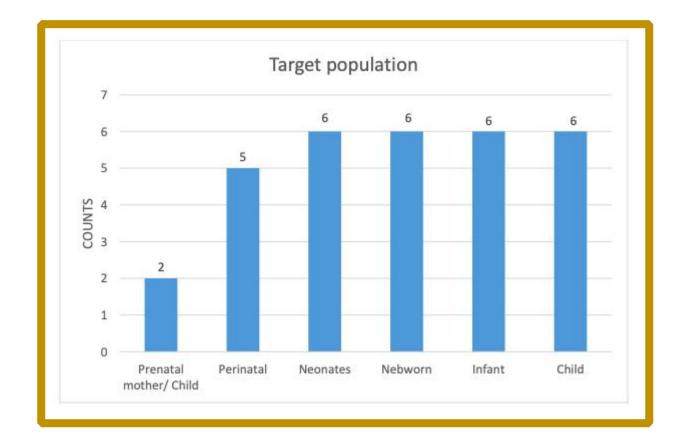
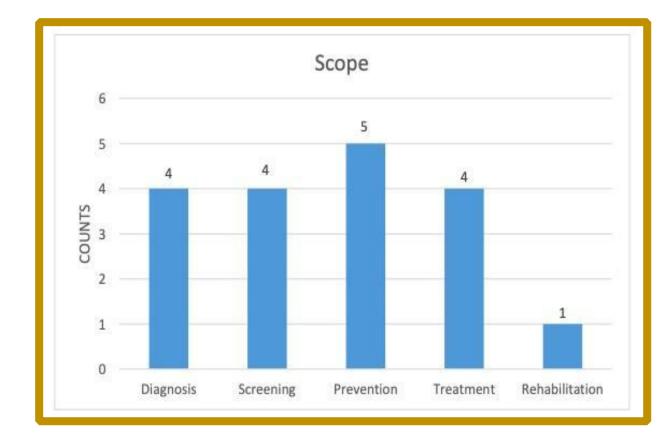


Figure 3 & 4. Target population and scope of CPG





- Target populations included: perinatal (3), prenata (2), neonates, newborn, infants and young children (6) (Figure 3).
- The scope covered by the CPGs included screening (4), diagnosis (4), prevention (5), treatment (4), and rehabilitation (1) (Figure 4).

Conclusion

- This review described and evaluated national CPGs for child and newborn health in Malawi over the past 5 years.
- The Malawi Ministry of Health (MoH) was the main CPG developer.
- A collaborative effort including the MoH, NGOs, professional associations, and researchers in developing and adapting newborn and child-health CPGs could yield large benefits in improving the quality of care of children in Malawi.

Future research direction

Further research to inform relevant newborn and child health priotisation of health topics is necessary, while addressing reporting standards such as systematic approaches to assess evidence and manage transparent disclosure of funding.

References

- 1. Vogel, J.P., Comrie- Thomson, L., Pingray, V., Gadama, L., Galadanci, H., Goudar, S., Laisser, R., Lavender, T., Lissauer, D., Misra, S. & Pujar, Y. (2021). Usability, aCceptability, and feasibility of the World Health Organization Labour Care Guide: A mixed- methods, multicountry evaluation. Birth, 48(1), pp.66-75.
- 2. Yousef, Y., Lee, A., Ayele, F. & Poenaru, D. (2019). Delayed access to care and unmet burden of pediatric surgical disease in resource-constrained African countries. Journal of pediatric surgery, 54(4), pp.845-853.
- Carns, J., Liaghati-Mobarhan, S., Asibon, A., Ngwala, S., Molyneux, E., Oden, M., Richards-Kortum, R., Kawaza, K., Chalira, A. & Lufesi, N. (2022). A neonatal ward-strengthening program improves survival for neonates treated with CPAP at district hospitals in Malawi. PLOS Global Public Health, 2(2), p.e0000195.

Acknowledgement

This is a sub-study of a larger project, Global Evidence, Local Adaptation (GELA) with funding from EDCTP2, which is supported by the European Union (grant number RIA2020S-3303-GELA).























