

lifelong health – November 2023

Facts:

- India is the diabetes capital of the world, with a prevalence of 8.9% according to the International Diabetes Federation.
- 1 in 7 pregnant women will develop gestational diabetes and 1 in 10 will develop preeclampsia globally.
- Over half of Indian women are anaemic during their pregnancy.
- There is a need to integrate non-communicable disease screening and prevention into established health programs such as maternity care.

Project Cycle:

2021-2024

Partners:

The George Institute for Global Health, United Kingdom The University of Oxford, United Kingdom

Supporters:

The George Institute for Global Health, India UKRI Future Leaders Fellowship, UK

Principal Investigators:

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Background:

- Pregnancy complications such as hypertension, gestational diabetes and anaemia increase risks to the mother and baby during pregnancy.
- They can also have longer-term consequences after birth. After gestational diabetes, up to 50% of women will develop type 2 diabetes within 5-10 years. Following preeclampsia, women are at increased risk of cardiovascular complications. Chronic anaemia can affect a woman's wellbeing, energy and productivity in society.

for Global Health

India

• Non-communicable diseases such as cardiovascular diseases and diabetes are two of the leading causes of death for women in India. Prevention strategies are needed.

Aims:

- To generate evidence-based recommendations to improve the detection and management of high-risk conditions during pregnancy, and to screen and treat women for ongoing problems in the first year after birth.
- Quantify the impact of using community health workers to identify the prevalence of anaemia among pregnant and postnatal high-risk patients on the prevalence of anaemia, and follow up these patients for diabetes and hypertension after birth.

Methods:

- This is a randomised cluster trial comparing usual care during pregnancy and after birth to the SMART*health* Pregnancy intervention across 60 villages and 30 primary health centres in two states in India (Haryana and Telangana), involving approximately 3,500 women.
- SMART*health* Pregnancy trains and equips community health workers (known as ASHAs) to conduct point-of-care screening tests on all pregnant and postnatal women in their village to detect high-risk conditions. New technologies such as ChatGPT will also be explored.
- Work with communities to co-develop an intervention to support women's perinatal mental health in rural communities in India (the PRAMH study).

Impact:

- The program will produce the first evidence from rural India on the benefits of targeted high-risk pregnancy screening using ASHAs, and the value of extended postnatal follow-up.
- The program will lead to the development of a new approach to postnatal care that integrates a life course approach.

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