PROGRESS ON THE COHORT STUDY OF VITAMIN A

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Assess how uptake of the OFSP interventions including knowledge, farming and consumption of OFSP impacts the vitamin A, nutrition and health status of mothers and their infants from mid-pregnancy through 9 months postpartum.
STUDY IMPLEMENTATION

Sept/Oct 2012

- Community and health facility sensitization
- Obtaining approvals (provincial & district level, ethical - KEMRI & Emory)
- Staff hiring (16 Research assistants, Coordinator, M&E specialist)
- Trainings (RAs, nurses, CHWs)
- Procuring of equipment and supplies
- Building and testing electronic data system
STUDY PROGRESS

- Data collection began mid-November 2012
- Four data collection points
  - Enrollment (Nov 2012 – April 2013)
  - 4-6 weeks before delivery (Jan 2013 – Aug 2013)
  - 4 months postpartum (April 2013 – Jan 2014)
  - 9 months postpartum (Sept 2013 – June 2014)
- Double data entry performed – Paper entry and electronic entry in CSPRO using tablets
Data collection process involves:
- Administering of questionnaire
- Weight measurement
- MUAC measurement
- Blood collection (Finger/Heel-Prick)
- Breast milk collection
- Infant weight measurement taken after delivery and not more than a week.
Blood sample testing for RBP, AGP, CRP, Ferritin and sTfR is done in Germany using ELISA technique.

Breast milk testing to be performed at Egerton University in Kenya and Emory University in US (10% for validation).

Hold monthly meetings with research assistants.

Hold quarterly meeting with CHWs at control sites.
ENROLLMENT - PRESCREENING

Prescreening by the nurses at the ANC Clinic

- Assessed eligibility; Age, Gestation age by palpation, and First ANC visit
ENROLLMENT- SCREENING

- Screening by research assistants
- Control/intervention village
- Received OFSP
- Intend to breastfeed
- Live in village till child is 10months

- Obtain Consent
- Administer enrollment questionnaire
DATA COLLECTION PROGRESS

• Total mothers pre-screened - 2356 mothers
• Total Eligible - 632 mothers
• Total Consenting – 510
• Completing questionnaires – 505
• Total mothers Enrolled – 505
• Blood sample collected on 503 mothers at enrollment
• Anthropometry done on all mothers at enrollment
DATA COLLECTION PROGRESS

- Total Enrolled mothers: Control (255) and Intervention (250), Total = 505
- Attended Visit 2: Control (205) and Intervention (178), Total = 383
- Attended Visit 3: Control (135) and Intervention (140), still ongoing
- Missing second visits = 122 mothers
DATA COLLECTION PROGRESS

- Attended Visit 4: Control (2) and Intervention (1), still ongoing
- Overall probable loss to follow-up = 22 mothers (4%)
- Total exclusions = 58 mothers (11%)
- Hemoglobin levels are determined at site by Hemocue machine
- Prevalence of vitamin A deficiency in early pregnancy was at 21.3% from enrollment sampling
CHALLENGES SO FAR

- Poor screening by nurses due to the workload at the facilities
- Unknown LMPs by mothers – wrong EDD estimation, ~ 70% delivered before/after EDD
- Inactive CHWs especially control areas
- No phone numbers and wrong directions
CHALLENGES SO FAR

- Different names used
- Mother relocating outside catchment area
- Refusals to participate
- Heavy rainfall
- High rate of deliveries in communities than in hospital
ASANTE (Kenya)

MEDAASE (Ghana)

THANK YOU