



economic evaluation for health



# DCP3 Volume 2 The Continuum of Reproductive, Maternal, Newborn and Child Health

Editors and Authors meeting November 7-8, 2013 Ferney-Voltaire, France

# Attendees (in alphabetical order):

Blake Alkire, Harvard Medical School

Melanie Bertram, WHO

Zulfiqar Bhutta, Aga Khan University & University of Toronto

Bob Black, JHSPH, Editor

Colin Boyle, UCSF

Logan Brenzel, Consultant BMGF

Donald Bundy, World Bank

Doris Chou, WHO

Veronique Filippi, *LSHTM* 

Ahmet Metin Gülmezogu, WHO

Peter Hansen, GAVI Alliance

Karen Hardee, Futures Group & Population Council

Julie Herlihy, Boston University

Hope Johnson, GAVI Alliance

Gerald Keusch, Boston University

Jeremy Lauer, WHO

Ramanan Laxminarayan, CDDEP & PHFI, Editor

Carol Levin, University of Washington

Li Liu, JHSPH

Arindam Nandi, CDDEP

Clint Pecenka, BMGF

Helen Pitchik, CDDEP

Karin Stenberg, WHO

Gretchen Stevens, WHO

Marleen Temmerman, WHO, Editor

Stephane Verguet, University of Washington

Damian Walker, BMGF

Abdhalah Ziraba, APHRC

# **Meeting Notes**

Below are some points of discussion from the meeting:

Chapter Draft Deadline: December 15th, 2013

### Data Consistency

- Authors should use 2012 estimates wherever possible. In some instances, these may have to be inserted just in time for the March end submission deadline (post editing and formatting).
- For this volume we should use CHERG numbers for mortality and use non-GBD estimates where they are well estimated. Authors should work with their V2 colleagues where numbers may overlap, to maintain consistency. When the first drafts of chapters are received on December 15<sup>th</sup>, editors are to review and get back to authors on any inconsistencies with data numbers.

## **Costing Support**

- Carol Levin and colleagues at UW-DGH and CDDEP will support volumes for costing searches.
  The review of costs will focus on the interventions and treatments following the volume
  outlines. Unit costs of interventions, converted to 2010 US dollars, will be summarized by
  condition and intervention type. Authors may use these tables and findings in their chapter
  reviews. The team will try and qualitatively describe the variability in costs due to methods and
  differences in intervention activities and ingredients across studies.
- This team may be able to give guidance to chapter authors on how to present the variability of costing information from the search. Feedback from Editors and Authors on the intervention costing searches is encouraged.

# Chapter Overlap with Volume 3

- Overlap with volume 3 chapters may be unavoidable. Our greater concern is with key topics that are
  not discussed in either volume and with maintaining consistency. Within each chapter authors can
  mention where other similar aspects are covered; they should include a small panel to summarize
  what is in other sections/chapters.
- Lead editor of Volume 3, Donald Bundy, discussed the differences in scope between Volume 2 and Volume 3: Volume 2 will mainly cover interventions under 5 and implications before the age of 5, and Volume 3 will mainly look at interventions and consequences after the age of 5 (including some of the consequences from interventions covered in Volume 2).
- Infant and young child feeding, WASH (disease prevention), and stimulation are all relevant to both volumes.
- It may be helpful to work with other volumes to develop a conceptual framework outlining where different pieces are covered in different volumes and how they come together (ex. age X, topic Y, chapter Z). Continuous processes like pregnancy and nutrition will benefit from this framework.
- A note to guide a more systematic separation between Volumes is being prepared and will be shared with Chapter authors when it is available.

## Inclusion of Methods section in Chapters

• There was discussion on the inclusion of the methods section for each chapter in an appendix, instead of within each chapter itself.

#### Web Publication

Authors expressed concern about materials appearing on the web before journal publication. Web
publication is optional, though encouraged. We will explore web publication with access only to
DCPN authors.

## Lancet Authorship

• There was discussion on who would appear in the author list for the Lancet publication of Chapter 1 in March. A decision will be made in consultation with Series editors.

### **Presentation Discussion Notes**

#### Part 1

### Reproductive Ill Health

- Discussion around changing "unmet need" to "unwanted pregnancies".
- Cervical cancer and HPV will be covered in the cancer volume, a blurb indicating this should be included in this chapter.
- This chapter should start with a descriptive overview of general patters and trends (including fertility).
- Overlap with *Reproductive Health* chapter and *Volume 3* should be discussed to ensure data is not conflicting.
- Recently published data on worldwide infertility (WHO) is available and could be added.

#### Levels and trends in maternal mortality and morbidity

- Rates of stillbirths to be included? (stillbirth mortality is included in chp 4).
- Abortion should be imbedded in the section on causes of maternal mortality.
- Work on sex selective abortions to be included in this chapter.
- Obstetric Fistula, Uterine Prolapse and Incontinence will be covered in surgical volume. They are to be mentioned in the burden section of this chapter, but not fully covered.
- Potential overlap with Volume 3 on death during delivery.

#### Levels and causes of neonatal and child mortality

• Discussion about changing the title to include stillbirths.

#### Low height for age

- Discussion on to include estimates on wasting in this chapter.
- Volume 3 also includes a chapter around nutrition, *nutrition in 5-19 year olds*. Chapter authors should contact authors from Volume 3 to ensure consistency between volumes.

#### Part 2

- HIV prevention and STIs will be taken out of the reproductive health chapter.
- Family planning and contraceptives are not interchangeable terms, discussion about re-naming this terminology to *family planning/contraceptive services*.
- HPV should not be included in depth in the *Reproductive Health* chapter. There is a full chapter on cervical cancer prevention with focus on HPV vaccination and an ECEA on introduction of HPV vaccine in China in the cancer volume. The *Reproductive Health* chapter should just raise HPV as a part of a package of interventions for adolescents.
- Adolescent fertility issues should be mentioned in both Volume 2 and Volume 3, but the emphasis
  will be different for each Volume. There should be an ongoing dialogue on how this should be
  managed between volumes.
- Diagnosis and Treatment of the Sick Child title is to be changed to Diagnosis and Treatment of a Febrile Child. This chapter will include discussion on IMCI, and antibiotic resistance. Overlap with discussion of neonatal health in the chapter on Pregnancy and Delivery should be negotiated.
- Discussion about potentially changing the title of the chapter *Diarrheal Disease* to *Enteric Pathogens*. There was also talk about adding a link/discussion on the need for diagnostics for sub and clinical infections (HIV, TB) to this chapter.
- *Preventive Care* chapter's three main messages should be: 1) keep up preventive care in absence of apparent transmission 2) discussion around polio, including what will happen to workers 3) intelligent investment choices and what new vaccines have to offer. The chapter could include text boxes on decision-making points.
- The *Pregnancy and Delivery* chapter should include management of neonatal illness and stillbirths.

#### Part 3

- More information to be provided from Dr. Levin about programs that have been successfully scaled. The unit cost per CHW will be examined.
- Add a portion on CHW and mid-level health workers working in tandem.
- Veronique Filippi to look at the *Integration and Quality of Care* outline to provide feedback in a
  direct way (also for the part 2 *Pregnancy and Delivery* chapter) and flag important concepts to
  include as well as topics to exclude.

#### Part 4

- Restrict the *Investing in the Continuum of Care for RMNCH* chapter to countdown countries and break them up by bank regions.
- Include an introductory section to the *Continuum* chapter that includes cost-effectiveness information from the LiST exercise. Neff Walker could co-author this work in place of his standalone chapter.
- The febrile illness CEA will be discussed in the context of the chapter by David Hamer. The standalone chapter will be dropped.
- Editors need to make a decision on the proposed chapter by Blake Alkire and John Meara. There were concerns that this was too narrowly focused and a decision will be made on how best to combine with an existing chapter or drop entirely.