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Background: A diversity of Personal and Home Care Products have been developed along the years, with the purpose of making our lives convenient and pleasant. Nonetheless, a concern has emerged in the scientific community for the study of chemicals substances used in personal and home care products regarding their potential for developmental health risks; specially in vulnerable populations such as pregnant woman. The purpose of this study was to describe the pattern of personal and home care products used by Puerto Rican woman along pregnancy and the role played by socio-demographic characteristics in their usage.

Methods: Usage patterns of personal and home care products were collected through the Product Use Questionnaire at three different times during pregnancy for a cohort of 651 pregnant women who participated in the 'Puerto Rico Testsite for Exploring Contaminants Threats'. Product Use Questionnaire acquires information of the use of products during the last 48 hours. We described the use and thorough STATA V13 we split groups of personal and home care products commonly used.

Findings: Meaningful results were shown in terms of determinants of health. Selected products were constantly used over time while other products declined with advancing pregnancy.

Interpretation: This is the first study that tracks personal care products across pregnancy in Puerto Rico, and evaluates socio-demographics characteristics as determinants of health. This information it's the first step into an exposure assessment and in the future could be useful for regulatory agencies when setting safety guidelines for product use.

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Uptake of Post-abortion Care (PAC) Services and Acceptance of Post-Abortion Contraception in Remote Areas of Puntland, Somalia

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Program/Project Purpose: Abortion-related morbidities account for 7.9% of the burden of maternal death globally. In humanitarian settings, access to post-abortion care (PAC) services are extremely limited. Improving access to PAC and post-abortion contraception for crisis-affected women is crucial for preventing maternal mortality and morbidity.

Puntland, Somalia has high maternal mortality, extremely low modern contraceptive prevalence, and limited access to PAC services, despite high rates of unsafe abortion.

In 2013, Save the Children (SCI) introduced a comprehensive program in Puntland using task-shifting and capacity-building of mid-level service providers to administer PAC services via manual vacuum aspiration (MVA) and Misoprostol in low-resourced crisis settings. PAC implementation was complemented by improvements in infrastructure, supply chain management, and community mobilization.

Our programmatic research documents results and learning from the implementation of PAC services in a protracted crisis in Puntland, where conservative Muslim culture can create barriers to the accessibility of PAC.

Structure/Method/Design: Working within four government health facilities serving a population of 87,704, a high proportion IDPS, SCI sought to test if their comprehensive PAC model could generate demand for and effectively deliver high quality PAC services in a conservative humanitarian setting.

All clients who accessed PAC services at SCI supported facilities from January 2013 to December 2015 were included in this analysis.

Outcome & Evaluation: The average number of monthly PAC clients increased by 90% between 2013 and 2015 (from 20 to 38). Among all PAC clients, 98% were counseled for post abortion contraception and 88% accepted a method before discharge; this is beyond the global standard of 80%.

Our data shows that comprehensive PAC services can be implemented in an unstable and conservative setting where abortion and modern contraception are often stigmatized by communities, health workers and policymakers. The steady increase in PAC service utilization at the supported health facilities shows that through a well-implemented program model, acceptance and uptake of PAC can increase even in protracted humanitarian settings.

Going Forward: Further regression analyses will be conducted to determine if there are differences in PAC use and post-abortion contraception uptake by age.

Due to the success of this program, advocacy will continue at a national level to ensure that quality PAC services are more widely available.

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An Ultra-Low Cost Uterine Balloon Tamponade Package Saves Lives among Women with Advanced Shock from Uncontrolled Postpartum Hemorrhage in Low Resource Settings

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Background: Advanced shock from uncontrolled postpartum hemorrhage (PPH) is the leading cause of maternal mortality in low- and middle-income countries, with 54,000 deaths in sub-Saharan Africa alone in 2015. First-line treatment for PPH includes administration of uterotonic agents, however, when hemorrhage persists, alternative methods are often employed, including aortic compression, uterine balloon tamponade (UBT), and surgical interventions such as B-Lynch compression sutures and ultimately hysterectomy. In low-resource settings, access to emergency surgical services is often limited or non-existent and many women lose their lives due to uncontrolled hemorrhage.