

- DRUGS & MATERIALS – REMEMBER:**
- ❖ to let us know of any broken packs, packs used in error, lost boxes etc as soon as they occur – we must know happens to the treatment packs wherever they are in the world;
 - ❖ that it is important that we receive the Drug Accountability Logs and consent forms as soon as they are requested;
 - ❖ to keep your study file up to date at all times with all the necessary logs and forms. The Materials Guidance sheet in front of the study file will tell you what you have to do. Inspections and audits will be much less stressful for you if everything is kept up to date.
 - ❖ If you misplace items such as the training CD or the laminated instruction sheets we will be happy to replace them – just ask us to send you replacement items.
 - ❖ You can always ask for more trial materials just by emailing thewomantrial@Lshtm.ac.uk

Ashanti Mampong Hospital, Ghana	1
Mid Western Hospital, Nepal	2
Plateau State Hospital, Nigeria	3
Sunderland Royal Hospital, UK	4
Royal Victoria Newcastle, UK	5
Mataria TH, Egypt	6
Chipata General Hospital, Zambia	7
Khartoum TH, Sudan	8
Soba UH, Sudan	9
Kenyatta National Hospital, Kenya	10
Hospitali Teule Muheza, Tanzania	11
Coast Provincial Hospital, Kenya	12
Muhimbili National Hospital, Tanzania	13
Fundacion Valle del Lili, Colombia	14
Liaquat National Hospital, Pakistan	15
Omdurman Maternity Hospital, Sudan	16
Mian Mohammad Trust Hospital, Pakistan	17
Regional Hospital Fier, Albania	18
Sa'a District Hospital, Cameroon	19
Bugando Medical Centre, Tanzania	20
FMC Ido-Ekiti, Nigeria	21
Jos UTH, Nigeria	22
Shalamar Hospital, Pakistan	23
UH West Indies, Jamaica	24
National Hospital Abuja, Nigeria	25
Komfo Anokye TH, Ghana	26
Moi TH, Kenya	27
St Mary's Hospital Manchester, UK	28
Centre Hosp et Univ Yaounde, Cameroon	29
FMC Owerri, Nigeria	30
Uyo UTH, Nigeria	31
Holy Family Hospital Unit 2, Pakistan	32
FMC Birnin-Kebbi, Nigeria	33
Kogi State Hospital, Nigeria	34
Obafemi Awolowo UTH, Nigeria	35
Rajshahi MCH, Bangladesh	36
Dschang District Hospital, Cameroon	37
Ahmadu Bello UTH, Nigeria	38
Ladoke Akintola UTH, Nigeria	39
Maiduguri UTH, Nigeria	40
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Seventh Day Adventist Hospital, Nigeria	42
Queen's Medical Centre Nottingham, UK	43
FMC Makurdi, Nigeria	44
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Holy Family Hospital Unit 1, Pakistan	47
Liverpool Women's Hospital, UK	48
Limbe Regional Hospital, Cameroon	49
Adeoyo Maternity Hospital, Nigeria	50
FMC Azare, Nigeria	51
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Delta State UTH, Nigeria	62
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Lagos UTH, Nigeria	66
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St Theresa's Catholic Hospital, Cameroon	68
FMC Katsina, Nigeria	69
UCH Ibadan, Nigeria	70
Irrua TH, Nigeria	71
Ilorin UTH, Nigeria	72
Mother & Child Akure, Nigeria	73
Calabar UTH, Nigeria	74
BP Koirala HIS, Nepal	75

NEW SITES ARE STILL NEEDED
Don't forget to spread the word about the joys of participating in the WOMAN trial to your obstetric colleagues in other hospitals. It is not too late to join this global effort.

Remember to randomise all eligible women!

NEWSLETTER

Spring 2012



3,400 WOMEN RANDOMISED

Already the largest ever PPH treatment study

LEARNING FROM EACH OTHER HOW TO BE SUCCESSFUL



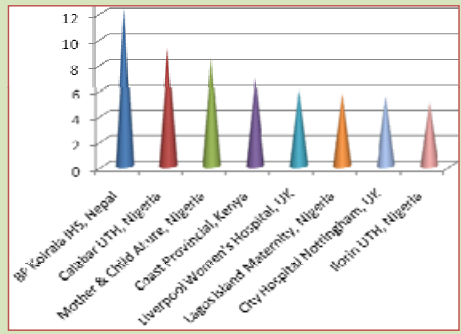
Perspective from Bukola Fawole, National Coordinator, Nigeria – the highest recruiting country in the trial
What inspired you to join the WOMAN trial collaboration?
I joined WOMAN at an early stage. That we do not have enough intervention studies to address the leading causes of maternal mortality has always been a painful realisation for me. Such therefore was my joy when the WOMAN trial was introduced – and that the trial was planning to address the most common cause of maternal mortality, postpartum haemorrhage!

What has been the trial's most important accomplishment in your country/ hospital so far?
The WOMAN trial is probably the largest clinical trial in maternal health thus far in Nigeria, as far as I can tell, in terms of trial size, number of collaborating institutions and scientists. It is also providing opportunities for ethical and regulatory agencies to oversee a trial of this magnitude. In this respect, it opens huge vistas of opportunities for all to grow in the art and science of clinical trials. One can say that all those involved seem to be enjoying the process. The capacity building inherent in implementing the trial, in my opinion, is the major accomplishment in Nigeria.

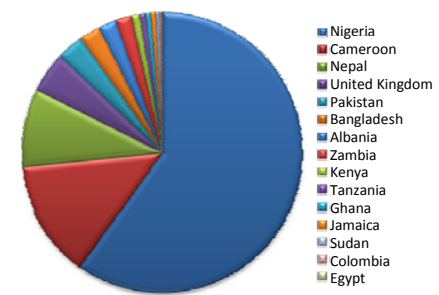
What would be your key advice to a new collaborator joining?
To the new collaborator, my word of advice is that running a clinical trial such as WOMAN is no tea party. Its success requires dedication, commitment, and ability to overcome challenges with innovative ideas. Challenges will indeed come from all corners. A painful observation one makes once in a while is that results of half-hearted commitment are obvious. Collaborators have come to understand that building team spirit is key to success in the long term. When all members of the team understand that they are equal stakeholders in its success, you will be overwhelmed by what can be achieved.

Overall, it has been a privilege for everyone involved in the WOMAN trial. We shall not rest on our oars until the very last patient has been recruited. The prospect of an effective Intervention for reducing morbidities and mortalities from PPH remains the driving force for our small family of collaborators in Nigeria.

HIGHEST MONTHLY AVERAGES



RECRUITMENT BY COUNTRY



SITE STATUS UPDATE

- 74** sites are **recruiting** patients
- 12** sites have materials on site and are **ready** to start
- 69** further sites have **ethics approval**
- 39** sites are **waiting** for ethics approval

100 patients randomised

MANY CONGRATULATIONS to all the teams listed here and over page who have made it into our star gallery with a significant number of randomised patients. Apologies to those teams who will reach these milestones while this newsletter is being produced and distributed – we promise to mention you in the next issue!



University College Hospital Ibadan, Nigeria, PI Oladapo Olayemi



Mother & Child Hospital Akure, Nigeria, PI Adesina Akintan



University of Ilorin Teaching Hospital, Nigeria, PI Abiodun Peter Aboyeji



University of Calabar Teaching Hospital, Nigeria, PI Saturday Job Etuk

Congratulations!

50 patients randomised



Federal Medical Centre Azare, Nigeria, PI Umar Ibrahim



Obstetric Gynaecology Hospital "K Gliozheni", Albania, PI Kastriot Dallaku



Federal Medical Centre Abeokuta, Nigeria, PI Moses Oluwafemi Alao



City Hospital Nottingham, UK, PI Jim Thornton

Nepal Medical College Hospital, Nepal, PI Pramila Pradhan



Regional Hospital Limbe, Cameroon; PI and National Coordinator Robert Tchounzou says: The trial has helped me and my team to understand the importance of truly obtaining the patient's informed consent for participating in the trial, and not just asking her to sign the form. Also keeping reliable records has been an education.

PAKISTAN NATIONAL MEETING



The WOMAN trial was presented in April at the 14th International Scientific Conference of the Society of Obstetricians and Gynaecologists of Pakistan (SOGP). The theme of this conference was "Women's Health – A Mission Possible". The energy and commitment from many of those present to make this happen was awe inspiring. It was indeed a chance to explore possibilities for collaboration. If the interest generated becomes active collaboration, the WOMAN trial will be a huge success in Pakistan. Islamabad and all present were indeed welcoming and we thank the Organising Committee, especially **Professor Lubna Hassan, President of SOGP**, and our **National Coordinator Professor Rizwana Chaudhri**.

Ad-din Women's Hospital, Bangladesh, PI Sayeba Akhter



Omdurman Maternity Hospital, Sudan, PI Taha Umbeli Ahmed



University Teaching Hospital Lusaka, Zambia, PI Bellington Vwalika



Federal Medical Centre Owo, Nigeria, PI Olufemi Akinsanya

Adeoyo Maternity Hospital, Nigeria, PI Akintunde Ayinde



WOMAN TRIAL TEAMS AROUND THE WORLD

Muhimbili National Hospital, Tanzania
Greeting from Hussein Kidanto, Tanzania National Coordinator:
 I was inspired to join the WOMAN trial because PPH is the leading cause of maternal death in my country. If the results of this study will contribute to the reduction of maternal mortality worldwide, I will be sure to put the results into clinical practice.



Rajshahi Medical College Hospital, Bangladesh, PI Shahela Jesmin



Khartoum North Teaching Hospital, Sudan, PI Wisal Omer Mohammed Nabag



Bugando Medical Centre, Tanzania, PI Anthony Massinde
 We do hope that TXA will turn out to be a life saving drug, as PPH continues to claim the lives of women in Tanzania. We encourage other hospitals to participate in this study for the sample size to be attainable by 2014.

*Mataria Teaching Hospital have recently randomised their first patient into the trial. Below is a message from our **Egypt National Coordinator** and a long time TCC collaborator **Hussein Khamis**:*



What inspired you to join the WOMAN trial collaboration?
 The WOMAN trial is a continuum of a long history of cooperation in performing valuable multicentre clinical studies dating back to 1998. To me it simply represents a challenge to break barriers. How can a bunch of sincere collaborators change the guidelines of management of some major health problems through working together as a team? A similar success was never achieved by politicians and governments.

What has been the trial's most important accomplishment in your country/hospital so far?
 The most important accomplishment of participating in these clinical trials is to form an enthusiastic group of doctors, nurses, social workers, administrators and clerks who can work together and work with similar teams in other countries to save lives.

What would be your key advice to a new collaborator joining?
 I advice new collaborators that they should not miss such a wonderful experience to share in a chain of clinical trials which may improve our current knowledge on several health problems.



St Theresa's Catholic Hospital, Cameroon, PI Mutsu Venantius



Delta State University Teaching Hospital, Nigeria, PI Lawrence Omo-Aghoja