

London School of Hygiene & Tropical Medicine

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Clinical Trials Unit

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24 February 2020

Rt. Hon Anne-Marie Trevelyan MP
Secretary of State for International Development
Department for International Development (DFID)
22 Whitehall, Westminster,
London SW1A 2EG

Dear Secretary of State

RE: An effective treatment for post-partum haemorrhage and the Sustainable Development Goals

The Woman trial was a large international clinical trial to assess the effects of an inexpensive generic drug called tranexamic acid on death from post-partum haemorrhage (PPH). The **UK Department of Health** and the **Wellcome Trust** funded the research with additional funding from the Gates Foundation. We enrolled 20,060 women with PPH from hospitals in 21 countries but mostly from south Asia and sub-Saharan Africa.

The results showed that a single injection of tranexamic acid substantially reduces death from bleeding and the need for surgery to control bleeding without any side effects. If given soon after birth, tranexamic acid reduces deaths from bleeding by a third. These results have important implications for global health. PPH is the leading cause of maternal death causing over 50,000 deaths each year. If widely implemented, tranexamic acid could slash this figure.

The WHO has endorsed the results and included tranexamic acid in PPH treatment guidelines but this is not enough to ensure that women benefit. Tranexamic acid, the only treatment proven to reduce death from PPH, is one of the most cost-effective ways to save a mother's life. Nevertheless, many health ministries around the world are not aware of the results and tranexamic acid is not available in many countries.

DFID could help to ensure that this life saving treatment is available when needed but as yet there has been a weak policy response. The announcement last year that the Ministry of Defence plans to develop a tranexamic acid auto-injector for use on the battlefield (tranexamic acid also reduces death from traumatic bleeding), raises the possibility of a cross government collaboration for mutual benefit. What the military needs might too expensive for use in low resource settings where PPH is common but perhaps this development could go hand in hand with efforts to develop a low-cost technology for use in LMICs.

I would like to meet you to discuss this important and urgent issue. I tried to meet previous Secretaries of State but because they were changing so rapidly last year this was not possible. I recently got a text from a Nigerian doctor who saw two women exsanguinate on one day. She knew that tranexamic acid could help but it was not available in her hospital. I believe that DFID could help.

Yours sincerely

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World Health Organization
Collaborating Centre for Research and Training
in Injury and Violence Prevention