DISEASE CONTROL PRIORITIES, 3RD EDITION PRESENTS KEY FINDINGS FROM REPRODUCTIVE, MATERNAL, NEWBORN, & CHILD HEALTH VOLUME

VANCOUVER, British Columbia - Investing in quality childbirth and family planning can quadruple returns on investment by reducing maternal and neonatal mortality, preventing stillbirth and reducing disabilities, according to new findings presented in the forthcoming volume of Disease Control Priorities, 3rd Edition (DCP3) on Reproductive, Maternal, Newborn, and Child Health (RMNCH). Dr. Marleen Temmerman, volume editor and Director of Reproductive Health and Research at the World Health Organization, says, “While we have seen large reductions in maternal and child death over the last few decades, progress could be accelerated by making a suite of essential, cost-effective interventions more widely accessible. We found that scaling up interventions from existing levels to 90% coverage would avert 139,000 maternal deaths, 781,000 stillbirths, and 1.8 million child deaths in the current year.”

Published by the World Bank Group, the DCP3 RMNCH volume considers the impact on maternal, newborn, and child deaths and illness, as well as the cost and cost-effectiveness, of scaling up interventions and delivery platforms. The volume highlights contraception, labor and delivery management, infectious disease treatment, and management of severe acute malnutrition as a few of the highest priority interventions for low-income countries.

These services are included in DCP3’s essential packages for maternal, newborn, and child health for low-resource settings. The packages emphasize the importance of cost-effective interventions to promote growth and development. DCP3 author and Senior Health Economist Dr. Carol Levin hopes this new analysis will change how resources are allocated to reproductive, maternal, and child health conditions. “The three essential packages presented in the volume address the highest priority conditions and services across the continuum of care” says Levin. “The evidence underscores that these interventions are affordable even in low-resource settings, as all three packages can be implemented for as little as $5-7 per capita.”

The volume’s key findings will be presented today at a panel session the FIGO World Congress of Gynecology and Obstetrics in Vancouver, British Columbia. Speakers include Drs. Temmerman and Levin who provided critical leadership throughout the writing process, as well as Dr. Jerker Liljestrand of the Bill & Melinda Gates Foundation, and former FIGO President and renowned gynecologist Professor Gamal Serour.

The full DCP3 series is comprised of nine individual volumes that will be published in 2015-2016. For more information, visit www.dcp-3.org/RMNCH and follow DCP3 on Twitter using @DCPthree.