



CAC

CONNECT

newsletter

Happy Doctors' Day



Newsletter Contest N-27

Identify this famous Indian personality



Born on 1st July, 1882, he was an eminent Indian physician, educationist, philanthropist, freedom fighter and politician who also served as the Chief Minister of West Bengal. He was awarded the Bharat Ratna on 4th February, 1961. In India, National Doctors' Day is celebrated in his memory every year.

Send in your answers by 4th September, 2019. Three lucky winners will win exciting prizes.

Send in your answer by: WhatsApp/SMS: +91.9013380510

(Please mention your full name and state)

WINNERS OF CONTEST N-26



Dr. Amrita Anupriya
Jharkhand



Dr. Sushil Kumar
Bihar



Dr. Karmendra Singh
Rajasthan

Solution to Contest N-26:
Sardar Vallabhbhai Patel

A big thank you to all our members who participated in the contest!

CONTACT US

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For more information about IDF visit our website <https://www.ipasdevelopmentfoundation.org>

DID YOU KNOW!

National CAC Consultation 2019: Launch of Comprehensive Abortion Care (CAC) Training and Service Delivery Guidelines 2018

The CAC Guidelines were released on 26th March, 2019, in New Delhi, at the two-day National Consultation for Advancing CAC in India by Mr Manoj Jhalani, Additional Secretary and Mission Director (NHM), MoHFW, GoI; Ms Vandana Gurnani, Joint Secretary (RCH), MoHFW, GoI; Dr Sumita Ghosh, Deputy Commissioner (MH), MoHFW, GoI; Dr Kasonde Mwinga, Team Leader (RMNCAH) WHO; and Mr Vinoj Manning, Chief Executive Officer, IDF.

The first edition of the Comprehensive Abortion Care Training and Service Delivery Guidelines was released in 2010. There have been many updates and changes in the protocol and guidelines of several CAC-related aspects since then. The CAC guidelines hence, have been revised to incorporate the changes and updates.



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Key Updates and New Inclusions in the CAC Training and Service Delivery Guidelines 2018

A. Maternal Mortality Ratio (MMR): MMR of all the states has been added from SRS 14-16, to indicate the progress made by each state on MMR.

B. Timing of initiation of contraceptive methods: The timing of initiation of existing as well as the newly-introduced contraceptive methods in the public health system has been updated and is as below:

Contraceptive Methods	1st Trimester Surgical Abortion	Medical Methods of Abortion (MMA)
Injectable (Antara Programme)	Immediately after the abortion & up to Day 7	On Day 3 of MMA process
Centchroman (Chhaya)	Immediately after the abortion & up to Day 7	On Day 3 of MMA process
Copper IUCD (380 A and 375)	Immediately & up to Day 12, if no contraindications	Around Day 15, if no contraindications

C. Waste Management: The waste segregation is done in five types of bins/bags, as per the latest guidelines:

- Yellow bin/bag for anatomical waste; material soaked with blood/body fluids; blood bag.

- Red bin/bag for plastics including urine bag.
- Puncture proof container for metal sharps.
- Blue bin for cut glass.
- Black bin/bag for general waste.

D. Facility level gestation limit for termination of pregnancy:

Level of Facility	Gestation Limit
PHC/non FRU-CHC	12 weeks
FRU-CHC/SDH/DH/MC	20 weeks

E. Protocol for Medical Methods of Abortion:

CAC Guidelines 2018 have recommended protocol for pregnancy termination up to 7 weeks and 7-9 weeks using medical methods, as given below:

Gestation Period	Day 1	Day 3	Day 15
Up to 7 weeks	Mifepristone 200 mg orally	Misoprostol 400 mcg sublingual/ buccal/vaginal/oral	Confirm completion of expulsion process
7 – 9 weeks	Mifepristone 200 mg orally	Misoprostol 800 mcg sublingual/ buccal/vaginal	Confirm completion of expulsion process

F. CAC Trainings: Hands on post abortion IUCD insertion to the IUCD trained providers during CAC training along with hands on CAC cases.

WHAT'S NEW?

Skill Stations at Model CAC Centre, Lady Elgin Hospital, Jabalpur, Madhya Pradesh



State budget has been leveraged for installation of six skills stations at the Model CAC Centre to maintain quality during CAC trainings. The skill stations developed are: 1. MVA ten steps; 2. Medical Methods of Abortion; 3. Post abortion contraception; 4. Documentation of CAC cases; 5. Infection prevention practices; 6. Bio-medical waste management

PROVIDERS / SPEAK

Contraceptive Choices of Adolescents Before and After the Voluntary Termination of Pregnancy

Demet Kokanali, Mahmut Kuntay Kokanali, Sevgi Ayhan, Nagihan Cengaver, Gülnur Özaksit and Yaprak Engin-Üstün

Journal of Obstetrics and Gynaecology, in press (22nd April 2019)

In this retrospective study, we aimed to investigate the contraceptive choices before and after the voluntary termination of pregnancy among adolescents. Seventy pregnant adolescents aged 17–19 who had undergone voluntary pregnancy termination, were included. Counselling about contraceptives was given before the procedure. Contraceptive choices before and after the termination of pregnancy were evaluated. Before pregnancy termination, all of the adolescents reported the use of a contraceptive method. The most commonly used method was coitus interruptus

(37.1%), followed by male condom (34.3%) and the rhythm method (18.6%). The use of oral contraceptive pills (7.1%) and intrauterine devices (IUDs; 2.9%) were very low. Implants and injections were not used. None of the methods used were dual methods (used with the male condom). After the termination procedure, IUD was the main choice (54.3%) followed by oral contraceptive pills (31.4%). Four adolescents (5.7%) selected to insert subdermal implants and three adolescents (4.3%) preferred injections. All of these preferred methods were dual methods. The preference of male condom as a single method decreased by about 3%. The rhythm method and coitus interruptus were not preferred. As a conclusion, contraceptive choices of adolescents significantly change to more effective methods by sufficient counselling during the termination of an unintended pregnancy.

An Easy Procedure that Requires Minimal Instruments

I am a medical officer at a community health center. I completed my MTP training under Ipas at DH Sagar. It was a wonderful experience out there. Our trainers trained us very well and were always ready to provide guidance round-the-clock, if needed. Since then I am consistently performing MVA procedures and gaining confidence day-by-day. It is a very easy procedure, which requires minimal number of instruments. I saved many lives and want to thank my master trainers (Dr. Saroj Bhuria, Dr. Jyoti Chauhan and Dr. Lalita Patil) for that.



Dr. Ankit Jain
Medical Officer

CHC Badagaon, District Tikamgarh, Madhya Pradesh

MVA is the Best Procedure for Incomplete as well as Induced Abortion

I am working as a medical officer in a rural hospital of Odisha where maximum people are illiterate and are not much aware about abortion services. It's a prerogative to be trained in comprehensive abortion care (CAC) in November 2017. I have done more than 30 safe abortions in my CHC. It was a wonderful feeling to see smiles/happiness in the women while leaving. They had come for abortion services and all the credit goes to CAC training. In my experience Manual Vacuum Aspiration (MVA) is the best procedure for incomplete as well as induced abortion (within 12 weeks) and the MVA kit is easier to use and has less perforation chances. It can be used with very minimal set-up.



Dr. Khushru Ali Khan (MBBS)
CHC Kosagumuda

Nabarangapur, Odisha

SOLVE THE / SUDOKU

		1		6	5		3	7
3				2	9	1	6	
	6	4						
	2	8			4			3
			1		7			
5			2			6	9	
4						5	2	
	5	6	9	4				8
9	1		5	8				

WATCH OUT / FOR



Days

- 1st July, 2019 Doctors' Day
- 11th July, 2019 World Population Day
- 1st to 7th August, 2019 World Breastfeeding Week
- 1st to 7th September, 2019 National Nutrition Week
- 26th September, 2019 World Contraceptive Day

Events

Saving Mother's Conference

- Date:** 2nd – 4th August, 2019
- Venue:** Hotel Radisson Blue, Gorakhpur

National Youth Conference

- Date:** 17th – 18th August, 2019
- Venue:** Patna, Bihar

High Risk Pregnancy: Confusion to Conclusion

- Date:** 30th August – 1st September, 2019
- Venue:** Eka Club, Kankariya, Ahmedabad

Breaking Silos Across Adolescence to Menopause

- Date:** 21st – 22nd September, 2019
- Venue:** Pravasi Bhartiya Kendra, New Delhi

LAUGHTER / CLUB



Doctor: I have some bad news and some very bad news. The lab called with your test results. They said you have 24 hours to live.

Patient: 24 hours! That's terrible!! What's the very bad news?

Doctor: I've been trying to reach you since yesterday.



The doctor said he would have me on my feet in two weeks.

And did he?

Yes, I had to sell the car to pay the bill.



Doctor: You are very sick.

Patient: Can I get a second opinion?

Doctor: Yes, of course! You are very ugly too.



Woman: My husband swallowed an Aspirin by mistake, what shall I do?

Doctor: Give him a headache now, what else!

Q: What's the difference between a general practitioner and a specialist?

A: One treats what you have, the other thinks you have what he treats.

Patient: 'Doctor, doctor, will I be able to play the violin after the operation?'

Doctor: 'Yes, of course...'

Patient: 'Great! I never could before!'

WE WANT TO HEAR FROM YOU

Questions? Comments? Suggestions? Share with Us!

This is your newsletter and we want to feature your thoughts and experiences on CAC and related reproductive health issues.