

CSI Uganda Maternal Health Advocate: Surviving pre-eclampsia and how preterm birth changed her life



Motherhood has been a sweet and bittersweet journey! The sweetness started in 2014 with the birth of my first child. The pregnancy was not complicated and the birth was not like what I thought. I was in labor for about 10-15 minutes and there he was! All the experiences that people had told me; my friends had shared with me about how scary and hard labor was, I didn't really experience that, and I thank God. Yes, the pain was there, but my baby came as an easy child. Raising him was a little bit challenging because I didn't have my mother by my side; and usually in our culture after a woman gives birth, she will go back home so that her mother nurses her during the postpartum period. I never got all those privileges because I lost my mother in 2012, so it was "do it yourself all the way". I had to learn through experimenting a lot with my first baby. I remember not even knowing how to shower him the first time, it's a neighbor that came and told me, "Eh, you have to shower the baby! You came back yesterday, you didn't shower the baby, maybe that's why he's crying." So it was mostly joint effort from myself and well-wishers around me that helped me to raise my first baby. It was a bit



challenging but because I was not working during that time, I had the opportunity to attend to my baby until he was about one year and a half; that's when I started working. I went through the whole process with him and I learnt a lot from him. There are a lot of ups and downs being a first-time newborn mother! The second pregnancy was a little bit more challenging than the first—the bittersweet! I was pregnant in the middle of a global pandemic, working full-time and managing other responsibilities at home and in my community. During my pregnancy, I developed severe pre-eclampsia and I was not fully aware about the risks and how it affected my unborn baby. My feet were very swollen, I was not feeling well, and it resulted in an emergency C-section (Caesarian section) birth of my daughter before 40 weeks gestations. Compared to my first child, the birth of my daughter was different. Reflecting on the pain and entire ordeal of a C-section birth, I do not know how healthy low-risk pregnant woman can opt for a C-section without first trying a natural birth. I believe natural birth is the easiest: I think it's the best way to give birth if there's no risk for mom and baby. The incision from the surgery was so painful and because of the severe pre-eclampsia, I gave birth preterm; my baby had to come early in order to save her life and mine. After the birth of my daughter, I had to be in the Neonatal Intensive Care Unit (NICU) for over a month for continuous monitoring and medical care. I thank God that I have sailed through till now and that I am able to hold and mother my two children. Today, Hollie, is almost seven months, still breastfeeding, growing well, and we are grateful that she has no preterm complications. Unlike with my son where I had the opportunity to stay home for a long time and take care of him, with the birth of Hollie, I had to go back to work after the end of my three months maternity leave. Leaving a preterm baby that early was not easy but I was getting a lot of support from my husband; from my sisters and my brother who came in and supported me and looked after the baby. Also, COVID-19 came as a blessing in disguise! My sister get to work from home and gets take care of my baby when I



am at work. It's not been easy balancing going to work while caring for a preterm baby, but I am sailing through taking one day at a time. As a long-standing and active team member of Childbirth Survival International in Uganda, I have always been involved in grassroots level work to improve maternal and child health literacy, health service access, and support pregnant women make timely and informed decisions. I didn't know, I would suffer from pre-eclampsia! After experiencing it and surviving, I am compelled to share my story and help many more pregnant women in Uganda learn about pre-eclampsia, encourage them to seek and receive quality maternal health care, and have a supportive network to increase chances of a positive pregnancy and birth outcome.

## My pre-eclampsia (high-blood pressure in pregnancy) experience

One fateful night, I had a sharp pain cut through my upper chest to my back and I was throwing up badly, so I called my doctor in the middle of the night and he recommended I take Panadol (painkiller) to manage the pain and in the morning to go to his clinic for a check-up. The Panadol helped reduce the pain, but I still felt it throughout the night till morning. My husband was worried, but I assured him that what I was experiencing was part of pregnancy. I remember telling him, "yes I am not well, the Panadol has given me some relief. That's how pregnancy is, not all days are merry, it's a few people that don't have these issues, but all pregnancies are different, one day is good and another one is not so good." It felt like normal pregnancy symptoms even though I couldn't remember feeling this pain with my first. I was pregnant during COVID-19 and seeing my doctor or being mobile was because of the pandemic. One needed a government-issued sticker or a letter from your Local Council chairperson to be allowed to move. When the president said that pregnant women could start moving, I was lucky that my husband had a sticker and could take me to my medical appointments. However, in the morning, I felt slightly better and thought it no longer necessary



to see my doctor. When I called my doctor, he insisted that I should go and have some check-ups and see what caused the sharp pain and the throwing up. I almost didn't go to be honest because I wanted to wait for the next check-up that was in about two weeks, but luckily my husband insisted that he takes me to the doctor and so went. As I was waiting to see my doctor, I went into the nurse's room where she measured my vitals i.e. weight, temperature, and blood pressure; my blood pressure was unusually high, it was shooting to 200 and I was feeling fine. When I saw the doctor, he looked at my chart and exclaimed at the blood pressure reading. He decided to re-do the test himself and it had shot to 200. He told me, "this is not good!" He ordered some more tests to check for protein in my urine. I remember my results coming out and I did have protein in my urine, he said, "this is severe pre-eclampsia" and he prescribed me medication. He told me to find a quiet room and turn the lights off. He told me this was a very serious issue, but with proper management we should wait one week so that I could at least get to 34 weeks gestation. Due to my medical condition, my doctor recommended the baby had to be surgically removed at 34 weeks because my kidneys and liver could fail as a result of pre-eclampsia. You can imagine the panic I was in; my husband had just dropped me at the hospital to go and do some work. Feeling so weak and terribly overwhelmed, I called my husband and shared with him the news the doctor gave me. He left work immediately and came to pick me up. I was discharged and I left hospital with my prescribed medication and the doctor's orders to bedrest. I got a shot of "dexa" (Dexamethaxone) to help boost the baby's lungs in the event there is an emergency before the 34 weeks mark and they had to deliver the baby. At home, I shared my ordeal with my medical friends and they were all surprised that I was discharged given my condition and the risks. My medical friends told me severe high blood pressure in pregnancy was very deadly and the doctor had made a mistake discharging me. Now I was confused on what to do and on top of



that I was not feeling bad, I was okay. I felt like a normal pregnant woman. I didn't know what to do; we had to make phone calls, numerous phone calls! In the night I was worried; I felt like I was going to sleep and just wake up dead; that's the feeling I had after sharing my ordeal with family and friends, who all told me that I should be in hospital under supervised care. I ended finding another amazing doctor, I survived and Hollie was born-too-soon fighting to survive.

## Fast forward to six months and advise to pregnant women and families of preterm babies



After consistent Kangaroo Mother Care, frequent doctor visits and consultations, breastfeeding, postpartum recovery, and more (for another day!); six months later away from the nurses, doctors, and NICU machines beeping "tututu", I have learned to be patient. There is nothing that tests and teaches you about patience like having a pre-term baby, you just breathe in, breathe out and be like okay, *my baby is alive and I thank God, I am going to take one step at a time*. I have learnt to be a nurse. I used to be so scared, I would not even want to see a baby being



pricked, but now I'm inquisitive and I want to know my baby's health and to know how she's progressing, so I pay a lot of attention to her. Literally, I am Hollie's home nurse. I remember feeding her using the ND tube (nasoduodenal feeding tube) and making sure it's in the right position, making sure it is placed well so that she doesn't choke. I learnt to monitor, to know that now my baby is okay, now my baby lacks this, now I have to look at my baby's color because if she turns blue she is running out of oxygen...; so I paid more attention to detail and I became my own baby's nurse. When I was going to have my daughter, I knew I needed to budget for a nurse who will come home every day and I didn't know how much it would cost to just check on the baby. I worried so much but I realized that I am my daughter's best nurse, all I have to do is to be clean, follow the doctors' orders and she will grow. I am so happy to see her progress. They say a lot of babies that come prematurely are bright and I already see she is going to be a very bright girl; I can already see. She is going to be a very clever girl. I have a lot of hope in Hollie, and I pray all my worries that I had of her growing up are just turned into a lot of beautiful things for her future.

My word of encouragement to mothers and to all the families that are going through this, is that you're not going through this alone and there are so many successful stories for example famous soccer star Lionel Messi and others right in your community. Please take one day at a time, listen to your doctors and just pass the positive energy to the babies. Be happy that you have achieved the gift of motherhood and that now you're a mother. It is possible to look after premature babies; just maintain good hygiene and your baby will grow. I thank God that pre-term babies can continue to grow outside the womb, their special place. God is so merciful that he actually puts technology in place for them to grow even outside the womb; all we have to do is to take care of them and just



give them a lot of love because they can actually make it. I know there are very many mothers out there that cannot afford the services and expenses that come with raising a premature baby. Many babies are lost as they are being transported to NICUs that are far away from them yet they would have been saved. Many mothers are dying because they do not have the best facilities to look after them when they are going through similar issues. I had preeclampsia and the symptoms were not obvious despite being very deadly. I imagine very many women have died because of such issues—undetected, unmonitored, and untreated. I am lucky that I was able to be monitored and the chances of losing my life were minimized by having my baby surgically birthed before my organs could fail. If we can all join efforts, contribute what we each can to ensure that mothers in Uganda are safe, during and after pregnancy, as well as their newborns, then a lot of people would survive.

## Meet Brenda Matama

Brenda is a maternal near-miss survivor. She is married to Nicholas Suna Bamulanzeki. She is a banker by profession with Centenary Bank. Through her involvement with <u>Childbirth Survival International</u> <u>(CSI) Uganda</u> where she serves as the Youth Advocate, she finds purpose in



extending help to the less privileged mainly focusing on CSI's <u>#SaveMothersofAfrica</u>, newborns, and adolescents programs.

Pre-eclampsia is one of the leading causes of maternal mortality and morbidity across sub-Saharan Africa. Learn more about CSI's work in Uganda, Tanzania, Somalia, and Rwanda to improve maternal, infant, child, and adolescent health. #CSITufaayo