

Fetal heart rate monitoring during labour in low-resource countries

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Worldwide, there are over 3 million stillbirths and approximately 3

million newborn deaths each year, most in low-resource countries. About 2 million of these deaths are due to intrapartum hypoxia. There is a strong association between abnormal fetal heart rate and intrapartum-related deaths, therefore optimal fetal heart rate monitoring can help health workers identify at risk fetuses and take appropriate action to save lives.

Traditionally, health workers in low-resource countries have used a "fetoscope" to auscultate fetal heart rate. This is the most used tool but can be difficult in crowded maternity wards with a high patient/health worker ratio.

This Ph.D. is part of the Safer Births innovation and [research project](#), and the studies were conducted at Haydom Lutheran Hospital in rural Tanzania using mixed methods. Two randomized trials were conducted; first testing fetoscope against hand-held Doppler, then fetoscope against Moyo (a new continuous fetal heart rate monitor developed by Laerdal Global Health). There were no significant differences between fetoscope and hand-held Doppler, however, focus group discussions revealed that [health workers](#) preferred the fetoscope, thus fetoscope was tested against Moyo in the subsequent trial. Moyo facilitated detection of abnormal fetal heart rate earlier and more often, leading to more obstetrical actions and a trend towards improved survival in the Moyo group. Studies powered to assess impact on perinatal outcomes are recommended.

More information: Paschal Francis Mdoe et al. Intermittent fetal heart rate monitoring using a fetoscope or hand held Doppler in rural Tanzania: a randomized controlled trial, *BMC Pregnancy and Childbirth* (2018). [DOI: 10.1186/s12884-018-1746-9](https://doi.org/10.1186/s12884-018-1746-9)

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