

Patient Profiles, United States and Uganda



Rachel, now 41, was 26 when her baby was stillborn. Midwife failed to recognize signs of preeclampsia. Lives in Carrboro, advanced degree, white, one child. She planned on having a home birth. She was insured with private coverage through her job.

Rachel started to gain significant amounts of weight in her 32 weeks. “I started to feel stiff, and was gaining a ton of weight. I was worried about it but my family doctor dismissed it as normal. I

also had edema everywhere.” She didn’t get a second opinion; she didn’t see her midwife because she was out of town.

The symptoms worsened over the next few weeks. At 37 weeks, her midwife, back in town, failed to find a heartbeat. She was rushed to UNC Hospital where doctors confirmed her baby had no heartbeat. “My brain refused to go there. I went home that night and refused to acknowledge what had happened.” The next day, she went back, and the baby was removed.

“I wish someone had talked to be about this early in my pregnancy. Listening to a mother is validating – they didn’t listen to me – and doctors should respect the fact that we know our bodies. We can generally sense when something is not right.”

“What I needed was someone to help put the puzzle pieces together. What could be causing these symptoms? What can we rule out? If there were a way to find out early that I was at risk of this I would definitely use it.”

UGANDA URBAN



Deborah, 28, works in a retail store in an upscale mall in Kampala, attended university. She was diagnosed with preeclampsia at 29 weeks. Pays cash at a local clinic.

“I was lucky. I make good money and I have a good doctor. I had swelling and I went in pretty soon after I noticed. They were able to manage it with rest and medication; I’m not sure what I took but a nurse gave it to me. My baby was born

two weeks early but was otherwise healthy.”

“I was also lucky because I live in the city where there is access to care and that I have good doctors. Doctors in the city are better than outside of it. They knew what it was right away and I got sent to the hospital (Mulago Hospital) for another opinion.”

UGANDA RURAL



Dorothy, 32, lives outside of Gulu (I didn't speak to her directly, but one of my team did and relayed her story. I won't use quotes because he didn't use them). She only attended primary school.

Dorothy does odd jobs for money, but has no steady employment. She also lacks access to regular healthcare. She didn't realize she was pregnant until well into the process. When she started to

swell and get headaches, she consulted her mother, who heard it was a curse and prayed for her. A younger friend recommended she go to a local free clinic, where they discovered her blood pressure was high. She was ordered to rest. The baby was born healthy but she isn't sure when it was born – she didn't keep track of her pregnancy in a traditional way.

This is very similar to many other stories I heard from patients outside of Kampala.