

## Abstract

**Introduction.** Half a million women die annually during pregnancy and childbirth. Of the estimated 536000 maternal deaths worldwide, 99 % occur in developing countries. Pre-eclampsia (PE) accounts for 50,000 deaths annually, mostly preventable. Concerted efforts are required for effective decline in maternal and perinatal death. Effective screening for PE services is an excellent way of reducing maternal and neonatal morbidity and mortality.

**Specific Objectives:** To establish the PE screening services among women attending Antenatal Clinic (ANC) in Bungoma County Referral Hospital (BCRH), to determine the distribution for PE screening services offered to expectant mothers across the Focused Antenatal Clinic (FANC) visits and to identify the factors influencing provision of PE screening services in BCRH.

**Materials and Methods:** This was a descriptive cross-sectional study, involving 282 stratified randomly selected antenatal mothers and all midwives (11) in Maternal Child Health/Family Planning (MCH/FP). Data collection was by semi structured interviewer administered questionnaire and checklist. Statistical techniques like mean, standard deviation and ANOVA and Statistical package for Social sciences (SPSS V.20) were used. Results were considered significant at  $\alpha=0.05$

**Key findings.** The PE screening services offered included: history of twins (88%), blood pressure (BP) monitoring (99%) and smoking (0.8%). The distribution of the PE screening services decreased with subsequent FANC visit respectively (39.5%, 29%, 19.5% and 12%). Screening for PE was mainly influenced by midwife's working experience, atleast five years of working (54%), ( $F=17.165$ ,  $p=0.004$ ), increased workload (54.5%) and inadequate equipment – BP machines (45%).

**Conclusion:** PE screening services are offered to pregnant women attending ANC in BCRH and the very services reduce across the FANC visits respectively. PE screening was affected by: inadequate equipment (BP machines), increased work load and experience of midwives.

**Recommendations.** BCRH should post adequate experienced midwives in MCH /FP, who should ensure effective screening for PE across all the FANC visits. The hospital management should further equip the facility with functional BP machines and dipsticks, for effective PE screening.