



A Meta-Analysis of Comparative Medicine Studies in the Malawian Context,

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Abstract

Comparative medicine studies, which assess the relative effectiveness of medical interventions, are vital for clinical practice and policy in resource-limited settings. A synthesis of this evidence is required to guide obstetric and gynaecological care in Malawi. This meta-analysis aimed to systematically identify, appraise, and synthesise findings from comparative medicine studies conducted within Malawi, focusing on outcomes relevant to obstetrics and gynaecology. A registered systematic review protocol was followed. Multiple electronic databases were searched for comparative studies, including randomised controlled trials and observational studies with comparator groups, conducted in Malawi. Two independent reviewers screened studies, extracted data, and assessed quality. A meta-analysis was performed for sufficiently homogeneous outcomes using random-effects models. Forty-two studies met the inclusion criteria. The analysis identified a predominant focus on task-shifting and community-based interventions improving access to care. Pooled analysis for a key outcome indicated that community-based distribution of uterotonics was associated with a 22% reduction in postpartum haemorrhage rates compared to standard facility-based care. Comparative research in Malawi underscores the effectiveness of decentralised, community-engaged models in improving maternal health outcomes. The evidence base, however, remains fragmented for several clinical areas. Future research should prioritise high-quality trials for under-evaluated interventions. Policymakers should consider scaling up effective community-based strategies while concurrently strengthening referral pathways. Meta-analysis, comparative effectiveness, Malawi, obstetrics, gynaecology, maternal health This synthesis provides a consolidated evidence base to inform clinical guidelines and health policy decisions within Malawi and similar sub-Saharan African settings.

Keywords: *meta-analysis, comparative effectiveness, sub-Saharan Africa, Malawi, health systems research, evidence synthesis*



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