

Supplemental file S3: Follow-up and quality control procedures in RECIPAL study

1. Follow-up procedures

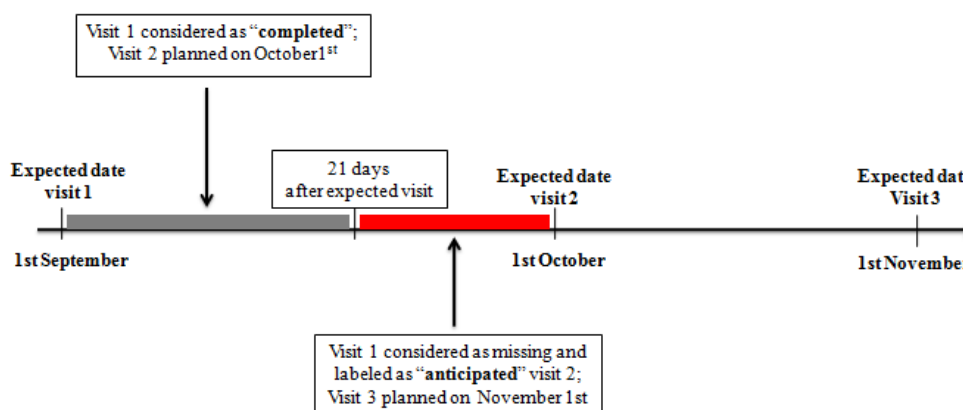
Women of reproductive age (WRA) were recruited at community-level and followed monthly for a maximum period of 24 months; they constituted the **RECIPAL initial cohort**. The sub-sample of women who became pregnant was then followed-up monthly at the maternity clinic from early pregnancy to delivery; they constituted the **RECIPAL final cohort**. Data were collected by five specifically-trained field investigators, helped by three community health workers (CHW) recruited for the project.

Pre-conceptional follow-up

Each field investigator was responsible for the follow-up of a sub-sample of the cohort (~ 243 WRAs by investigator). Home visits were scheduled by the field-investigators (~159 visits/month/investigator) under site coordinator and deputy coordinator supervision. At each visit, the next visit was planned with the woman agreement and according to RECIPAL protocol. Few days before the visit, the investigator contacted the woman by telephone to confirm the date and time of the visit. A list of unreachable women was then established and sent to the CHWs, who visited the women at home.

The following procedures was applied when a woman remained unreachable:

- In case of absence because of daily activities, the field investigator planned another visit within the next few days and asked a family member or neighbor to warn the woman about the visit. In cases of over deadlines, the CHWs revisited the woman on the same day;
- When a travel was planned for less than 7 days, the investigator called the woman and planned a visit when she came back;
- When a travel was planned for more than 7 days, a urinary pregnancy test was performed before departure: if positive, the first antenatal care visit was performed before departure; if negative, a new visit was planned when the woman came back (whether in the two coming months);
- A **monthly visit** was considered as “**missing**” when not completed within 21 days after the planned date despite several requests from the field investigator.



Women were excluded from the study in the following cases:

- Three successive missing visits;
- Two successive missing visits with a positive urinary pregnancy test when the woman came back.

Gestational follow-up

ANC visits were scheduled by midwives after discussion with the RECIPAL team. They were scheduled every month or every six weeks depending on whether an ultrasound scan was planned at this visit (see Suppl. file S5). In case of missing visit, the procedures were the same than during the pre-conceptional follow-up.

2. Follow-up completion

A WRA **completed** the pre-conceptional follow-up when she was followed until the end of the study (from 4 to 24 months of follow-up depending on when she was recruited). A pregnant woman **completed** the pregnancy follow-up when she was followed until delivery. Both follow-ups were considered **incomplete** in case of (i) lost to follow-up (two or three missing visits during the pre-conceptional period, or no information for more than 3 months during pregnancy); (ii) informed consent withdrawal; (iii) migration outside the study area; (iv) no data available at delivery because of adverse pregnancy outcomes such as spontaneous abortion or ectopic gestation.

3. Quality control

The quality control of the clinical data was carried out in two stages. At the first stage, the two supervisors verified on a weekly basis that data collection was exhaustive (i.e., concordant number of expected and collected forms). A control of missing and abnormal data was carried out on all participant forms. The second stage was carried out after data have been entered. The validation of double-entering was realized by the data manager and an audit report of the database, including lists of discrepancies, duplications and missing or abnormal data was sent regularly to the supervisors who were responsible for correcting any errors. Regarding the ultrasound data, a quality control of 10% of the pictures was performed monthly by a senior sonographer from Oxford University, United Kingdom.