

# Doctors get machine to save newborns

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**KAMPALA.** In a move to reduce the number of newborns dying from breathing failure at birth, researchers have come up with a more advanced resuscitation device to sort out the problem.

Asphyxia or breathing trouble after birth causes deaths of 106 newborns every year or 26 per cent of the neonatal deaths in the country, according latest statistics from Ministry of Health. Asphyxia is also responsible for more than 1.8 million infant deaths globally per year, especially in low and middle income countries.

At least one in every 10 children born needs resuscitation at birth, according to Ministry of Health

The new augmented infant resuscitator (AIR) device, unlike the ordinary one, provides instant feedback on the quality of newborn ventilation to midwives and records resuscitation performance.

It was invented by Dr Santorino Data, a paediatrician at Mbarara University of Science and Technology (MUST), and Kevin Ce-

drone, a post-doctoral researcher at the Massachusetts Institute of Technology (MIT), USA.

“How much air is too much, the facilitators can’t tell you that, it’s only the air device that can actually tell you that. If you are ventilating and the air way is blocked, your facilitator will not tell you but the device can tell you whether you’ve been resuscitating with a blocked airway or not,”

## THE NEW MACHINE

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Dr Data told participants at an AIR results dissemination event in Kampala on Tuesday.

“When you are ventilating too fast or too slow, the facilitators may not tell you but the air device will tell you. So the air device monitors the quality of your newborn ventilation very objectively,” he added.

The innovators are supported by Save the Children, an international non-governmental organisation that promotes children’s rights, provides relief and helps support children in developing countries, and Consortium for Affordable Medical Technologies CAMTech-Uganda and CAMTech-Boston, USA.

CAMtech director, Prof Kristian R. Olson, said although the innovation was initially an example of a solution to newborn problems in Sub-Saharan Africa, they have come to realise that it is equally beneficial to attendants in USA. The new device is expected to be on the market in two years’ time.

“The initial trial done both in Uganda and USA shows that with just two minutes of training, people who received feedback from the device were able to achieve good ventilation in less than half the [ordinary] time and also maintain that good ventilation in more than 50 per cent longer [than the ordinary] and that works the same results in USA and Uganda,” Prof Olson said.

Ms Catherine Betty Odeke, the national coordinator for Nursing Now Campaign, promised the Health ministry will take up the initiative by ensuring mentoring of health workers while still training in the institutes and ensure the devices are made available even to the lowest health centres.

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