Many Newborns Could Easily Be Saved, Researchers Say; 4 Million Deaths Worldwide Linked to Poverty, Ignorance

David Brown

Each year 4 million babies around the world die in the first month of life. More than half the deaths could be avoided with simple measures such as cutting umbilical cords with sterile blades, prescribing antibiotics for pneumonia and keeping newborns warm.

Those are among the findings of a group of studies released yesterday that seek to direct the world's attention to the large number of infants in poor countries who die soon after birth, usually at home and often unnamed.

The high mortality arises from poverty, ignorance and disorganization in poor countries, and is exacerbated by fatalism on the part of many parents, a lack of political will in governments and the inattention of global health experts, the researchers concluded.

"This disaster has to end," said Vinod Paul, an Indian physician and expert in the care of newborns, at a launch of the initiative in Washington yesterday. "We believe the vast majority of these deaths can be prevented by the knowledge we have today. We do not need new knowledge."

"In West Africa, one of every three mothers will lose a newborn," said Anne Tinker of the charity Save the Children, calling that evidence of "an unacceptable disparity between the haves and the have-nots."

Four studies reviewing the magnitude of "neonatal" mortality around the world, strategies for reducing it, a roadmap for improving newborn care in poor countries and an estimate of costs were published online yesterday by the Lancet, a European medical journal.

Much of the data have appeared elsewhere in recent years. What is new is gathering in one place the "evidence base" for action by donor nations, charities and the developing countries themselves.

Among the new information was the calculation that at least 41 percent of the 4 million deaths, and possibly as much as 72 percent, could be prevented if current knowledge were put to use.

The Lancet Neonatal Survival Steering Team, composed of researchers at many universities and charitable organizations, also estimated that to cut neonatal deaths in half would cost $4.1 billion per year on top of the $2 billion now being spent on the problem by poor countries and outsiders.
The 4 million deaths occur among the 130 million babies born worldwide each year. Deaths in industrialized countries account for 1 percent of the total. Two-thirds occur in 10 countries: India, China, Pakistan, Nigeria, Bangladesh, Ethiopia, Congo, Indonesia, Afghanistan and Tanzania.

Programs to improve health in developing countries traditionally target pregnant women and young children. Newborns have been relatively overlooked, even though they are the most vulnerable -- especially in the first few days of life. Of children who die before age 5, 38 percent die in their first month. Of them, three-quarters die in the first week.

One cheap intervention that could eliminate the 7 percent of deaths caused by tetanus is giving pregnant women two tetanus shots, if they have not had any. The mothers pass their immunity to their babies, who can become infected if the umbilical cord is cut with a contaminated instrument.

Teaching mothers and health workers to recognize infection in very young babies -- and get them to a doctor or provide antibiotics themselves if that is not possible -- could reduce the 26 percent of deaths caused by pneumonia and sepsis (bloodstream infections).

Making those improvements, however, will require training many more midwives and other health care workers -- a huge undertaking. In South Asia and sub-Saharan Africa, only about one-third of women deliver with the aid of a "skilled birth attendant."

However, some interventions cost nothing.

One of the authors of the Lancet series, Gary L. Darmstadt, described successful efforts by a team of U.S. and Indian researchers to change behavior in a region of 300 villages and 100,000 people in the state of Uttar Pradesh in northern India.

Traditionally, women who have just delivered consult a Hindu holy man called a pandit on when to start breast-feeding. After checking astrological tables and other sources, the pandit generally advises that feeding begin two or three days after birth. Until then, the baby is given tea or sugar water.

Many new mothers also squeeze out of their breasts and discard the thick, antibody-filled, disease-preventing first milk, known as colostrum, because it is mistakenly considered old and dirty.

One of the pandits in the area was a physician. After gaining his trust, the researchers asked him to consider changing his advice.

"We just leveled with him and said: You're a medically trained person; you know that breast-feeding is critically important," recounted Darmstadt, of the Johns Hopkins University's Bloomberg School of Public Health.

The man agreed, and he persuaded five other pandits serving the area to change their advice, too.

"I think, in essence, he took an evidence-based approach," Darmstadt said.
Simple Changes Urged to Save Newborns
Study Says $4B Could Keep 3 Million Alive

By Raja Mishra

The lives of 3 million newborn babies in poor nations could be saved annually through simple improvements in birthing procedures and basic healthcare that would cost the world $4.1 billion per year, according to a new study.

The study is the first to place a price, about $2,100 per life saved, on a problem that has been somewhat obscured in the recent rush to tackle global health issues, said public health advocates.

The global community has regarded the deaths of newborns as a second-tier issue behind the AIDS epidemic and other infectious diseases, said researchers and representatives of charities. Seeking to rectify that, a coalition of charities, activist groups, and researchers yesterday released the first broad assessment of the problem, a four-part series of studies published by the Lancet, a British medical journal, and framed as a call-to-arms by its authors.

Lancet editor Richard Horton said the newborn toll was "10,000 to 11,000 deaths per day, 450 deaths per hour, and seven neonatal deaths per minute, up to three-quarters of which are entirely unnecessary and preventable."

Newborns often enter the world amid squalor in developing nations, vulnerable to many infections, and far from medical care needed to treat complications from childbirth. Their often-impoverished families struggle to feed and care for them in the critical first weeks of life.

Three-quarters of the deaths of newborns occur in the first week after birth, with the first day of life the riskiest, the researchers found.

Two-thirds of the estimated 4 million annual deaths of newborns occur in India, China, Pakistan, Nigeria, Bangladesh, Ethiopia, the Democratic Republic of the Congo, Indonesia, Afghanistan, and Tanzania, the study found.

Most of the deaths are caused by preterm births, infections, breathing problems from a variety of complications, and tetanus, afflictions rarely fatal to newborns in developed countries. The authors said that 16 simple measures including widespread tetanus shots, access to antibiotics, breastfeeding education, and sanitary delivery rooms could prevent most of the deaths. Also needed were readily accessible basic emergency services, for caesarean sections and blood transfusions, the report said.

The developing world now spends about $2 billion annually on the issue. Another $4.1 billion is needed, the report concluded.

The research effort was spearheaded five years ago by the Bill & Melinda Gates Foundation, the charity funded by the Microsoft software mogul, which gave the nonprofit Save the Children USA a $50 million grant to work on the issue.

The US government also funded the research, which involved the United Nations and the World Bank.
Although physicians have long expressed concern about **newborns** dying, recent organized efforts in the developing world have focused on HIV, other infectious diseases, and women's health, while "**newborns** really fell through the cracks," said Anne Tinker of Save the Children USA.

Tinker said the international aid community has discussed setting up a global fund to fight the deaths of **newborns**. It would pool money from wealthy nations for distribution to poor governments or aid organizations, similar to an effort underway with HIV donations. She stressed bypassing governments that have misused donor money in the past.

"There are some honest governments. And where they are not honest, the money can go to nongovernmental organizations with strings attached," Tinker said. "Because so much of this can be done at the community level, it would be effective to give the money to nongovernmental groups that work at the local level."

But Dr. Vinod Paul, a senior adviser to India's government on child and maternal health issues, said the money should go directly to government health ministries, who know their respective needs best.

"We have to give money to the countries. It is for the countries to make their own goals and targets," he said. "The countries have to be in the driver's seat."

The studies released yesterday in essence called upon the developed world to export its own advances in **newborn** care. For instance, in England, the **newborn** death rate fell from 30 per 1,000 births in 1940 to 10 in 1975 after officials there introduced free prenatal care, antibiotics for **newborns**, and improved delivery care. In recent years, such developing countries as Vietnam, Honduras, Indonesia, and Sri Lanka have reduced the deaths of **newborns** using aid money to enact similar changes.

The authors of the new papers pointed out that, unlike many other medical problems, the deaths of **newborns** did not require sophisticated medical technology or highly trained specialists to be remedied.

"We needn't hold our breath and wait until the pot is full of money. We can move now," said UNICEF executive director Carol Bellamy. "We can actually save as many as a million **newborns** with much less expensive interventions based on family care and community outreach programs."

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**U.P.I.**

March 4, 2005

**Low-tech methods could save many newborns**

By Phillip Heinz

An international panel of public-health experts has concluded that 3 million of the 4 million **newborn** babies who die worldwide each year could be saved by low-tech and low-cost medical interventions.
"We do not need high tech to make a difference," said Vinod Paul, a professor at the All Institute of Medical Sciences in New Delhi, India, where he directs the World Health Organization's Collaborating Center for Training and Research in Newborn Health.

"We believe that the most of these deaths can be prevented with the technology we have today," Paul added.

The panel presented their findings at a media briefing in Washington on Thursday, preceding publication of a series of articles in the British journal The Lancet.

The experts have found that 450 babies under age 4 weeks die each hour, mainly from preventable causes. The deaths during this time, the so-called neonatal period, are are one third higher than the number of all AIDS-related deaths around the world. Although 99 percent of these deaths occur in poor countries, almost all published research on neonatal deaths relates to the 1 percent in rich countries, the experts found.

"In Africa, one of three mothers will lose a child," said Anne Tinker, director of the Saving Newborn Lives initiative at Save the Children, a U.S. non-profit child-assistance organization. "It's time for governments and assistance agencies to take joint responsibility to reduce the needless deaths of women and children. It's about interventions that are available today."

Tinker said knowledge about work hygiene and how to treat a newborn child was at a very low level among the general population in many poor countries around the world. People in local communities should be taught about basic health and hygiene procedures and spread this knowledge, she said, adding that, of neonatal deaths, 20 percent to 40 percent could be prevented on a community level.

"We have a human resources crisis in the Third World, where nurses and doctors are in short supply," Tinker said.

According to the articles in The Lancet, more than one-third of neonatal deaths globally are caused by infections, almost another third by premature birth and a quarter by asphyxia, more commonly known as sudden infant death syndrome or SIDS. A baby in a low-resource, high-mortality country is 11 times more likely to die of infections than a baby in a rich, low-mortality country, concludes one of the articles.

Neonatal tetanus, which has been virtually unseen in rich countries for a century, kills half a million babies each year, another Lancet article concludes.

At the briefing, Tinker held up a hypodermic syringe filled with tetanus vaccine, saying each shot could be delivered for 20 cents to a pregnant woman.

The research published in The Lancet concludes that to provide neonatal health interventions at 90 percent coverage, an extra $4.1 billion per year estimated to be needed, on top of the $2 billion spent currently, for a total of $6.1 billion in the 75 countries with the highest mortality. The additional cost would be less than $1 per inhabitant per year in these countries.

"We must all take collective responsibility for this global health crisis and commit to working together in close coordination to achieve this goal," Baudouy said.

International health and development agencies -- including the World Health Organization, the World Bank, UNICEF, as well as the Saving Newborn Lives initiative -- contributed to the articles in The Lancet.

The research involved work of academics and health economists from the United Kingdom, United States, Asia and Africa. The Bill & Melinda Gates Foundation and the United States Agency for International Development provided funding

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Voice of America Radio Transcript
March 3, 2005

Infant Deaths/Campaign

DAVID McALARY

HEADLINE: Experts: Simple Measures Can Avert Millions of Infant Deaths a Year

INTRO: Public health experts say most of the four-million newborn babies who die each year in developing nations could be saved by simple, inexpensive interventions. They appeal to rich countries, international organizations, and charitable foundations to increase their funding to promote infant survival. VOA's David McAlary reports from Washington.

The number of newborn deaths worldwide is colossal in the view of one medical adviser to the Indian government. Vinod [VEE-node] Paul, of the All India Institute of Medical Services, says the number of infants who die in the first month of life is about 10-thousand every day, 99 percent of them in developing nations. But he notes that most of the concern and resources are focused on the other one percent in industrial countries.

[PAUL ACT]

"It's as if one Asian tsunami is hitting the world every two weeks, year-after-year. And yet, the responses are very different -- to that kind of an event and to this invisible tragedy that is happening."

[END ACT]

Dr. Paul is a co-author of one of four articles appearing in the medical journal "Lancet" that point out the worsening plight of newborns worldwide, and what should be done. The contributors are scholars and health economists from several countries, United Nations agencies, and the World Bank. Their research was funded by the U.S. government and the Bill and Melinda Gates Foundation of Seattle, Washington.
Lancet senior editor Faith McLellan told a Washington, DC, audience that the disaster of newborn mortality must end.

[McLELLAN ACT]

"The Lancet is publishing this series to inform the world about this appalling situation, and to call upon the global community to reform it."

[END ACT]

The Lancet papers say two-thirds of all newborn mortality takes place in just 10 countries -- Afghanistan, Bangladesh, China, Democratic Republic of Congo, Ethiopia, India, Nigeria, Pakistan, Indonesia and Tanzania. The major causes are infections, premature birth, delivery complications, diarrhea and lack of oxygen.

Dr. Paul says common, low-cost measures can prevent 75 percent of the newborn deaths, and can be offered within existing maternal care and child survival programs. They include tetanus shots for pregnant mothers, promoting clean delivery, extra care for low birth weight babies, inexpensive antibiotics, and breast-feeding. The Indian physician says the extra cost for assuring such safety is about six-billion-dollars annually, or just one-dollar a year for every person in the world.

[2nd PAUL ACT]

"There are not many health paradigms where such a low cost would save such a large chunk of deaths. We would like to plea, the time has come to bring these resources to save the babies."

[END ACT]

The Lancet outlines actions nations can take to address the crisis, including setting targets for reducing newborn mortality by 2015. It calls on the international community to demonstrate political commitment to increased resources, and to coordinate country support to turn what is known about saving newborn babies into action.

[REST OPT]

A private group addressing such needs is Save The Children-USA. The head of its newborn survival program, Anne Tinker, says boosting resources includes reversing the shortage of trained health workers in developing countries.

[TINKER ACT]

"Nurses and midwives, as well as doctors, are unbelievably in short supply. Many locally trained midwives and nurses are being lured away for better jobs in the United States and UK."

[END ACT]

Lancet editor Richard Horton says continuing to fail children under threat would deliver a verdict of wanton inhumanity against ourselves. (SIGNED)

NEB/DEM/TW/KL

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The $1 price of life for 4m babies

Sarah Boseley

Around 10,000 babies under a month old die every day - some 4 million a year - and most could be saved with relatively simple, low-cost treatment, according to medical researchers at the start of an international campaign to cut the death toll.

Most die from infections (36%), premature birth (28%) and asphyxia (23%). Tetanus, virtually unseen in babies less than four weeks old in the developed world, kills a million a year.

Two-thirds of the deaths occur in 10 countries - Afghanistan, Bangladesh, China, Democratic Republic of Congo, Ethiopia, India, Nigeria, Pakistan, Indonesia and Tanzania. The deaths are equivalent to the total number of live babies born in western Europe every year.

Nearly 3 million of the deaths could be prevented by 16 interventions such as tetanus vaccinations for pregnant women, the promotion of cleanliness at birth, prompt and exclusive breastfeeding, extra care for low-weight babies and antibiotics for babies who pick up infections.

Many of the low birthweight babies could be saved if they were kept warm and fed from birth, but more than half of women in Africa and south Asia do not have a midwife or other skilled birth attendant to avoid complications and give advice when they deliver.

A series of articles in the Lancet medical journal, which is leading the campaign, calls for the world to act to save children and their mothers who are also at risk in the poorest developing countries.

The cost of obtaining 90% coverage for the 16 basic interventions would be around $4bn (£2.09bn), the Lancet papers say - or about $1 for every woman and baby at risk.

"It is now time for governments and assistance agencies to take joint responsibility to reduce the needless deaths of women and children," say Anne Tinker and colleagues from Save the Children-USA in a commentary on the research.

The Lancet editor, Richard Horton, says newborn babies have been relatively neglected in the initiatives to improve the health of developing world children. "If we continue to fail children under threat, we will be delivering a verdict of wanton inhumanity against ourselves," he said. "We will be a knowing party to an entirely preventable mass destruction of human life.

"The weapon that will be wielded in this crime will not be a bomb, a biological agent or an aeroplane. It will be something more sinister - withdrawal from the universe of human reason and compassion into a national solipsism that degrades the values that we claim to revere."
Dr Horton says governments in rich countries have failed newborn babies because they value them less than adults. He criticises British politicians whose drive to help the developing world did not extend to the youngest.

"Politicians such as Tony Blair and Gordon Brown speak proudly of their commitment to making poverty history, and they are happy to be photographed with Bob Geldof and Bono, but when it comes to children and especially the newborn, it's foundations and charities that have to step in to provide life-saving support to fill the vacuum left by governments."

One of the papers in the series of four published today on the Lancet website says a shortage of skilled staff is the biggest obstacle to scaling up care for newborns. The lead author of that paper, Rudolf Knippenberg of Unicef, says: "To save the lives of newborn children and mothers, our analysis suggests the need to double or even quadruple the health budget of many of the world's poorest countries - while increasing accountability for the use of those resources."

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The Independent
March 4, 2005

New Strategy to Cut Three Million Baby

Jeremy Laurance

BEHIND CLOSED doors in Mangochi district hospital, Malawi, Lukia Idrusi was told that 32 hours previously she had given birth to a stillborn baby. Although she had been anxiously asking about the baby since coming round from her operation, her grandmother had felt she was too ill to be given the tragic news.

Lukia had realised something was wrong almost as soon as her labour began. "It went on for hours and hours and then I felt something burning inside me. Then I stopped feeling labour pains," she said. A clinical examination confirmed that her uterus had ruptured and the foetal heartbeat had stopped.

Lukia lost her baby, and nearly her life, for want of basic obstetric care. Each year four million babies die in the first four weeks of life, 99 per cent of them in developing countries.

Today, a panel of public health experts assembled by The Lancet medical journal sets out a strategy based on 16 simple, cheap measures which they say could save three million of these lives. By treating infections, delaying premature birth and improving care at delivery they believe the global death toll could be cut by 70 per cent.

The cost, $4.1bn (£2.15bn) on top of the $2bn already being spent, amounts to less than $1 a day per inhabitant of the 75 countries with the highest mortality, they say. Most of the deaths occur in 10 countries in Asia and sub-Saharan Africa.

Richard Horton, the editor of The Lancet, which publishes the research today, said: "The annual death toll is equivalent to all the babies born in Western Europe each year being wiped out.
Although 99 per cent of these deaths occur in poor countries, almost all published research relates to the 1 per cent of newborn deaths in rich countries. The deaths of 10,000 newborn children every day, largely ignored in global policy, demands immediate and sustained action from international agencies, professional organisations and governments in rich and poor countries."

The main causes of newborn death are prematurity, severe infections, diarrhoea and suffocation. Tetanus and labour complications are also important causes. Another four million babies are stillborn, and most of those die during labour, the researchers found.

Success is possible without high technology, such as intensive care units and ventilators, and even without massive hospital building programmes or the overhauling of health systems, say the experts. Tetanus vaccine is safe and cheap - 40 cents for the two shots required. Yet 250,000 babies die each year from the infection. Major programmes are in place to prevent mother-to-child transmission of HIV, yet this costs $20 per patient.

Cheap antibiotics can treat infections, delay premature birth and improve birth weight. A shortage of skilled staff is the main problem, but the authors argue that outreach campaigns to provide vaccination, promote home care of babies and community schemes to treat babies with pneumonia can save lives.

Zulfiqar Bhutta of the Aga Khan University, Pakistan, one of the authors, said 50 measures were considered and the 16 most effective selected. "Delivering these simple low-cost interventions would save three out of every four deaths," he said.

Carol Bellamy, the executive director of Unicef, said: "This is where Unicef will be placing its emphasis in the next few years." The authors tackled the myth that only rich nations had reduced neonatal deaths, pointing to successes in Honduras, Indonesia, Moldova, Nicaragua, Sri Lanka and Vietnam.

16 LIFE-SAVING STEPS

1 FOLIC ACID SUPPLEMENTS
Cost: £93m
Cuts the incidence of spina bifida by 72 per cent. Has small impact on mortality but good in preventing disability

2 TETANUS VACCINATION Cost: £64m
Tetanus accounts for 500,000 deaths a year. Universal immunisation would wipe that out

3 SYPHILIS SCREENING Cost: £1.6m
Syphilis is one of the most important causes of stillbirth and babies can be born infected. One shot of penicillin treats it

4 PRE-ECLAMPSIA (HIGH BLOOD PRESSURE) IN PREGNANCY
Cost: £263m
More common in Africa than Europe and threatens life of mother and baby. Treatment with magnesium sulphate can help

5 MALARIA Cost: £17m
Many pregnant women have malaria, slowing growth of the baby. Treat every woman with one
dose of Fansidar a month

6BACTERIURIA Cost: £ 11m
A common infection of the urine which causes premature birth. Screen and treat women with
antibiotics

7PREMATURE LABOUR Cost: £ 12m
Early rupture of the membranes caused by infection. Birth can be delayed with the use of antibiotics

8STEROID TREATMENT Cost: £ 226m
Two injections given to women in premature labour reduces breathing difficulties in the baby
and cuts deaths by 40 per cent

9EMERGENCY OBSTETRIC CARE
Cost: £ 1.4bn
Skilled midwives and equipment to deal with breech deliveries and other emergencies

10LABOUR SURVEILLANCE
Cost: included in no. 9
Tracking progress of labour - how the cervix is dilating - allows early intervention to prevent
problems such as asphyxia

11CLEAN DELIVERY Cost: £ 27m
Clean hands, clean surface, clean blade to cut the cord and a clean tie to tie it, reduces infection
and can cut deaths

12RESUSCITATION Cost: £ 27m
Immediate assistance from midwives or birth attendants to revive the baby after birth can cut
deaths by up to 42 per cent

13BREASTFEEDING Cost: £ 395m
Promoting exclusive breast-feeding for four to six months ensures the gut is lined with
protective bacteria

14PREVENTING HYPOTHERMIA
Cost: £ 50m
Keep the baby warm by drying it straight after birth. No early bathing saves lives

15KANGAROO MOTHER CARE
Cost: Included in No9
Promoting skin to skin contact for smaller babies is better for them than an incubator, reduces
infections and promotes breast-feeding

16PNEUMONIA TREATMENT
Cost: £15m
Checks for infected babies by counting their breathing rate and treating with antibiotics cuts deaths by 27 per cent
Total: $6.1bn (including $2bn being spent)
Extra spending required: $4.1bn

Press Association
March 3, 2005
Three-Quarters of World Infant Deaths ‘Preventable’
John von Radowitz

As many newborn babies die around the world each year as are born in western Europe, it was claimed today.

Three quarters of the four million deaths, 99% of which occur in poor countries, are unnecessary and preventable, said Dr Richard Horton, editor of the Lancet medical journal.

Yet most of the concern of the rich world focused on just 1% of newborn infant deaths.
"That's a grotesque imbalance in our attention," said Dr Horton.

The Lancet today published a series of papers on tackling child mortality. They marked the start of a campaign described by Dr Horton as the most important the journal had been a part of "in a generation".

Nearly three quarters of newborn deaths could be avoided by 16 simple interventions, according to the research.

They included tetanus vaccinations for pregnant women, promoting clean delivery, prompt and exclusive breastfeeding, extra care for low weight babies, and antibiotics for infection in the womb and just after birth.

The cost of providing such help with 90% coverage was said to be an extra £2.1 billion on top of the £1.04 billion currently spent on averting infant deaths.

The additional cost amounted to less than 52p per head of population in the affected countries per year.

Dr Horton said the enormous infant death toll around the world had been largely ignored.

A "sea-change" of attitude was needed to ensure that the life of a newborn was seen as equal to that of an adult.

"If you look at the 23 nations of western Europe, there are four million births every year, so the annual global neonatal mortality, which is also four million, is equivalent to all newly born babies
in Western Europe being entirely wiped out," said Dr Horton. "That equals 10-11,000 deaths a day, 450 deaths per hour, seven neonatal deaths per minute, up to three quarters of which are entirely unnecessary and preventable."

The plight of newborns was not just a medical issue but also a "moral barometer of our times", he said.

He added: "Politicians such as Tony Blair and Gordon Brown speak proudly of their commitment to make poverty history, and they're very happy to be photographed with the likes of Bob Geldof and Bono, but when it comes to children and especially newborn children, it's foundations and charities that are forced to step in and provide life-saving support and fill the vacuum left by politicians. Governments go silent when the hue and cry of the photocall and the television interview are over.

"The problem we say is not too big, the obstacles are solvable, and the resources are simply a matter of how seriously one wants to take the issue of the newborn life. If you are indifferent to that life then its absolutely true to say the resources will not be available. If you're serious about that life then you just sign the cheque."

However, experts who attended a news conference today at the London School of Hygiene and Tropical Medicine accepted that the solution largely lay with governments of developing countries.

Carol Bellamy, executive director of Unicef, said: "The majority of the money has to come from the governments themselves. First and foremost, it's got to come from governments. Governments make choices. Do they put the money into health, or do they put it into armaments?"

The experts also agreed that before the life-saving strategies could be put in place, health systems in many countries would have to be upgraded. This could cost up to £5 a head in the most deprived places.

Professor Zulfiqar Bhutta, of the Aga Khan University in Karachi, Pakistan, said developing countries could not tackle the problem on their own.

"The international community does need to come up with additional resources," he said. "Most of these resources could be available just by fulfilling commitments that they have already made."

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Associated Press
March 3, 2005

Cheap, Simple Care May Save Newborn Lives

By Emma Ross

LONDON -- More than 10,000 newborns die every day in poor countries, and more than 7,000 of them could be saved by simple, cheap - and deliverable - care, according to research announced Thursday.
While global attention has focused on improving the health of mothers and children in the developing world, the fate of the newborn has fallen through the gap, according to analysis papers to be published in coming weeks in The Lancet medical journal.

Almost 40 percent - 4 million - of the annual 10 million deaths of children under age 5 occur in the first month of life. That's more than the number of people who die of AIDS each year, and experts say it's an "unconscionable" statistic for the 21st century.

Nearly 3 million of those babies could be saved by such simple interventions as tetanus shots, breast-feeding, sanitary conditions during delivery and antibiotics, as well as basic hospital emergency services, such as Caesarean sections and blood transfusions, according to the research.

"At less than $1 per capita per year in additional spending to provide these lifesaving interventions to 90 percent of mothers and babies, the cost is affordable," said one of the investigators, Dr. Gary Darmstadt, director of the Center for International Neonatal Health at Johns Hopkins University.

Success is possible without intensive care units stocked with incubators and ventilators. Many lives can be saved without hospital building programs or the overhaul of health care systems, according to a panel of public health experts who did the analysis.

The main causes of newborn death are premature birth, infection, diarrhea and suffocation. Tetanus and labor complications are also important causes.

Rich countries have newborn death rates of four per 1,000 live births on average. By contrast, the rate in poorer countries, where 99 percent of all neonatal deaths occur, is 33 deaths per 1,000 live births. The highest rates are seen in sub-Saharan Africa.

It's not high-tech care that has made the difference in rich countries.

In England, newborn death rates fell from 30 per 1,000 live births in 1940 to 10 in 1975 after the introduction of free prenatal care, better care during labor and the availability of antibiotics for babies. And in Sweden, the introduction of midwives for home deliveries at the end of the 19th century slashed the death rate by a third.

And it's not only wealthy nations that have succeeded in reducing neonatal deaths. Countries such as Honduras, Indonesia, Moldova, Nicaragua, Sri Lanka and Vietnam have done it, despite being quite poor.

While it may take a decade to bolster hospital services in some of the poorest areas so that the target of saving 3 million babies a year can be reached, experts say much of the reduction in deaths can be achieved without fully developed health systems.

Community programs that offer basic services and educate families about safer home birth and baby care, and encourage mothers to seek help if there are complications, can go a long way and can be rolled out quickly and cheaply.
"We needn't hold our breath and wait until the pot is full of money. We can move now," said UNICEF Executive Director Carol Bellamy. "We can actually save as many as a million newborns with much less expensive interventions based on family care and community outreach programs."

Skilled help during delivery is a major factor, experts say. In sub-Saharan Africa, more than 60 percent of women give birth at home alone, and in South Asia, the figure is above 70 percent. About half of newborn deaths happen after a home birth where there is no midwife or other attendant.

The research was produced by experts from several countries, as well as international agencies such as the World Health Organization, UNICEF and the World Bank. The project was funded by the Bill & Melinda Gates Foundation and USAID.

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Reuters
March 3, 2005

Simple measures could reduce child deaths - experts

By Patricia Reaney

LONDON (Reuters) - Four million newborn babies die every year in the world but three-quarters of them could be easily saved, researchers said on Thursday.

Most of the deaths occur in 10 countries in Asia and sub-Saharan Africa and are caused by infections, prematurity and breathing problems related to birth complications.

"If you look across 23 nations of western Europe there are 4 million births every year," said Richard Horton, editor of The Lancet medical journal.

"So the annual global neonatal mortality is equivalent to all newly born babies in western Europe being entirely wiped out," he added.

"That equals 10,000-11,000 deaths per day, 450 deaths per hour and seven neonatal deaths per minute, up to three-quarters of which are entirely unnecessary and preventable," he told a news conference.

In a series of reports on newborn deaths in the journal, scientists and health experts show where and why the deaths are occurring, how they can be prevented and how much it will cost.

They estimate an extra $4.1 billion per year, on top of the current spending of $2 billion, will be needed to provide simple health treatment for 90 percent of people at risk in 75 countries with the highest mortality rates.

PREVENTABLE TRAGEDY
Most newborns who die do so in the first week of life. Most have been born at home. Two-thirds of the deaths occur in India, China, Pakistan, Nigeria, Bangladesh, Ethiopia, the Democratic Republic of the Congo, Indonesia, Afghanistan and Tanzania.

"The plight of newborns is not just a medical issue, it is also a moral barometer of our times, a measure of our values and our feelings for others," said Horton.

To prevent infant deaths, healthcare systems need to be strengthened, which experts believe could mean a doubling or even quadrupling of the health budget in the poorest nations.

But Dr Gary Darmstadt, of the Johns Hopkins School of Public Health in Maryland and an author of one of the studies, said 16 measures, such as vaccinations against tetanus for pregnant women, antibiotics for newborn infections, and exclusive breastfeeding could save lives.

"Early success in preventing neonatal deaths is possible ... by improving home care practices, raising demand for skilled care and increasing care-seeking for illnesses through outreach services and a family-community care package," he said.

Dr Zulfiqar Bhutta, of Aga Khan University in Pakistan, said low-cost, low-tech interventions could be packaged together and delivered at birth and afterwards to prevent three million of the four million newborn deaths.

"This is affordable," he said. "The cost of this is estimated at $1 a person per year."

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**Agence France Presse**
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**Four billion dollars could reduce newborn mortality by 61 percent**

PARIS -- Investment of little more than four billion dollars a year could slash the global death rate among newborn babies by 61 percent, according to research published online Thursday by the British journal The Lancet.

Each year, four million babies die in the first four weeks of life, 99 percent of them in developing countries.

Ten countries, led by India and China, account for two-thirds of these deaths.

Afghanistan, Pakistan, Nigeria and Ethiopia lead the table of countries with the most neonatal deaths as a percentage of live births.

Many of the deaths could be prevented by simple, low-cost initiatives, such as folic acid supplements, tetanus vaccination, anti-malaria treatment, better hygiene in hospital delivery rooms and improved monitoring of pregnancies to spot any complications, The Lancet studies suggest.
The Millennium Development Goals, committing UN members to tackling global poverty and ill-health, call for a two-thirds reduction in the death rate among children aged under five by 2015, as compared to 1990 levels.