

Editorial - neonatal respiratory support substation initiative for LMIC neonatal care

Editorial

This special Collection presents six extended scientific abstracts reporting on the adverse mortality effects of poor respiratory support interventions in the management of Nigerian newly born neonates which contribute to over 50% of neonatal deaths in Nigeria, and the need for a special indigenous intervention technique as funded by the Nigeria Liquefied Natural Gas (NLNG) Limited. The special intervention substation, as designed and implemented, could enable an uninterrupted or minimally interrupted life-support intervention at the benefitted hospitals as often orchestrated by power outages, inefficient imported and improvised devices, inadequate oxygen supply, and some practice knowledge-gaps, etc.

In this volume, Amadi HO¹ of Imperial College London United Kingdom and Abubakar AL of Kaduna State University Nigeria, presented a full report on the neonatal respiratory support substation as conceptualised and innovated by their team, covering the need for the NLNG charitable gift, the installations across four of Nigeria's tertiary hospitals, the limitations and challenges of the mission, staff training and the immediate impacts of the installations. Olateju EK et al.,² of the University of Abuja Teaching Hospital, presented their initial experiences with the NLNG substation in their article titled "The Nigeria LNG respiratory support substation at University of Abuja Teaching Hospital Gwagwalada, FCT – A preliminary report after installation", where they particularly highlighted that in the short time of less than eighteen weeks, all twenty-two presented neonates had been successfully managed and sub-discharged.

Idemudia et al.,³ of University of Benin Teaching Hospital, in their submission described the highly efficient life-support they have been able to achieve with their initial extremely-low birthweight patients at the NLNG-substation being powered by the politeheartCPAP device. Anene NM et al.,⁴ of the Niger Delta University Teaching Hospital, reported the high immediate impact of the new substation, including the successful weaning-off of all 24 initial patients they had in quick time within the first eight weeks of the installation. Jimoh A et al.,⁵ reported on the high success rate of the Neoroom at Calabar Women and Children Hospital where the politeheartCPAP has been used to anchor services in the last 24 months. Finally, in a compelling account of their "nurses' perspective", Ibrahim AM et al.,⁶ of Aminu Kano Teaching Hospital, presented an abstract of the immediate impact of the use of the politeheartCPAP in their nursing practice.

All the articles seem to suggest that the substation initiative has been perfectly tailored in the right direction with immediate impact and huge prospects ahead. The details of these various reports are covered as referenced, in the other articles of this Collection from these respective tertiary hospitals.

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Conflicts of interest

The authors declare that they have no conflict of interest.

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