Editorial

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Received: 27 July 2010 / Accepted: 2 August 2010 / Published online: 27 August 2010
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Neonatology is one of the most rapidly advancing fields of medicine. In this era of evidence based medicine, today's management may not be acceptable tomorrow. But the disease and disorder in infant remain the same. There was a time when management of sick neonates was considered privilege of a handful of experts in the field of neonatology. India will not achieve MDG 4 goals unless every pediatrician is in a position to manage normal and sick neonate. All neonates must receive good quality care so that they become healthy and productive citizens of the country. Keeping this in mind we have decided to publish updated versions of the AIIMS evidence-based protocols for management of common neonatal conditions.

All good neonatal units follow protocol-based management of sick neonates for uniform standard clinical care. Consenting to follow the agreed protocols serves as a catalyst for new ideas to improve clinical care. These protocols however must be viewed as generic in nature. Suitable adaptation may be done at individual centers through the process of consultation with other team members. As new evidence emerges, and ones own experience becomes richer, the protocols will need to be updated and revised.

Our unit at AIIMS published a series of protocols in IJP in the year 2003, 2008; these protocols have been revised and modified in the light of current emerging evidences and changing practices in our unit. With use of antenatal steroids and early use of CPAP, the babies needing invasive ventilation has declined. Similarly with better monitoring of oxygen therapy, rational use of blood transfusion and improved supportive care, over the last decade the number of babies needing intervention for retinopathy of prematurity has gradually declined. This happened as nurses and physicians followed standard protocols laid in house for management of sick babies. We are sure many of you who would adhere to these evidence based guidelines will notice better outcomes in survivals on follow up.

The editors are grateful to all those who have contributed for compilation of these evidence based protocols. One can access the protocols on our website www.newbornwhocc.org. We would welcome suggestions and comments, if any, which will improve quality of care of sick neonates in resource poor developing countries.

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