Resources

INFECTION

Ebola Pocket Library

Ebola Pocket Library contains practical information from sources such as the CDC, WHO, Khan Academy and Wikipedia and includes:

- Ebola factsheets and basic information, such as symptoms, treattment, and prevention of Ebola
- Training information for medical staff
- · Resources for those dealing with grief and loss
- · Occupational health and safety guidelines
- · Case studies and reports
- General resources for emergency preparedness
- Travel safety
- Posters and other print materials for posting in public placess
- Safe burial practices for the victims of Ebola

The on-line Internet version of the Ebola Pocket Library can be viewed at: http://www.widernet.org/portals/ebola. The downloadable off-line version can be found here: http://widernet.unc.edu/research/ebolalibrary/downloading-the-ebola-pocket-libraryFrom HIFA2015

Ebola Resource Centre

The Ebola Resource Centre at http://ebola.thelancet.combrings together all Ebola-related content from The Lancet family of journals and is freely accessible.

Ebola Communication Network (ECN)

Ebola Communication Network (ECN), at http://ebolacommunicationnetwork.org/is an online collection of Ebola resources, materials and tools from and for the global health community. It is supported by USAID.

Revised WHO classification and treatment of childhood pneumonia at health facilities

The revised guidelines present two major changes to existing guidelines: (A) there are now just 2 categories of pneumonia instead of 3 ("pneumonia" which is treated at home with oral amoxicillin and "severe pneumonia" which requires injectable antibiotics) and (B) oral amoxicillin replaces oral cotrimoxazole as first line treatment, preferably in 250mg dispersible tablet form, twice daily for five days which can be reduced to three days in low HIV settings. This document's purpose is to assist national child health prgrammes in revising their guidelines to conform to the new recommendations.

Ref: World Health Organization, 2014. 34pp.364 kB: http://www.ncbi.nlm.nih.gov/books/NBK264162/pdf/TOC.pdf From CHILD2015

Malaria treatment rectal artesunate to be developed in India

A TDR multi-country trial among 17 000 patients in Bangladesh, Ghana and Tanzania demonstrated that a single inexpensive artesunate suppository substantially reduced the risk of death or permanent disability. The artesunate was given to children who were so ill they could not take a medication by mouth, giving their families time to get to medical facilities for further care – see http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(08)61734-1/fulltext . Agreements have now been signed between Medicines for Malaria Venture (MMV) and two Indian pharmaceutical companies, Cipla Limited and Strides Arcolab Limited, for the development of rectal artesunate for pre-referral treatment of children with severe malaria - seehttp://www.who.int/tdr/news/2014/malaria-treatment/en/

Praziquantel dose confirmed for schistosomiasis

Evidence gathered using different methodologies for combining clinical trial results confirm that 40 mg per kg of body weight, the WHO-recommended dose of praziquantel, works well for all types of schistosomiasis. See details at http://www.who.int/tdr/news/2014/praziquantel-for-schistosomiasis/en/

Guidance for national tuberculosis programmes on the management of tuberculosis in children. 2nd edition

This second edition aims to inform the revision of existing national guidelines and standards for managing TB, many of which include guidance on children. It includes recommendations, based on the best available evidence, for improving the management of children with TB and of children living in families with TB. National and regional TB control programmes may wish to adapt these recommendations according to local circumstances. Note: this publication is priced. http://apps.who.int/bookorders/anglais/detart1.jsp?codlan=1&codcol=93&codcch=299

Guidelines on the management of latent tuberculosis infection

These Guidelines on the management of latent tuberculosis infection were developed in accordance to the requirements and recommended process of the WHO Guideline Review Committee, and provide public health approach guidance on evidence-based practices for testing, treating and managing LTBI in infected individuals with the highest likelihood of progression to active disease. Note: this publication is priced.http://apps.who.int/bookorders/anglais/detart1.jsp?codlan=1&codcol=93&codcch=295

MATERNAL, NEWBORN CARE, CHILDHOOD

Global Health Media Project videos

All Global Health Media Project videos (http://www.healthphone.org) are free to download and distribute/reproduce. Recent ones are:

- Referring a sick baby- see http://www.healthphone.org/ghmp/referring-a-sick-baby.htm. This film shows the essential features of a referral process. It covers involving the family, arranging transport, preparing the baby for the journey, and writing the referral note. It also includes what to do if referral is not an option. The primary audience are frontline health workers in primary and district level facilities. It was filmed in Nigeria and the Dominican Republic.'
- Newborn care: Inserting an IV See http://www.healthphone.org/ghmp/inserting-an-iv.htm. This film shows how to insert an IV into the tiny vein of a newborn. It illustrates gathering supplies, finding a good vein, applying a tourniquet, the insertion technique, taping and splinting the IV, and administering medication. The primary audience are frontline health workers in primary and district level facilities. It was filmed in Nigeria and the Dominican Republic. From CHILD2015

The White Ribbon Alliance

See their materials on Respectful Maternity Care at. http://whiteribbonalliance.org/campaigns/respectful-maternity-care/

Early essential newborn care

This WHO Guide aims to provide health professionals with a user-friendly, evidence-based protocol to essential newborn care - focusing on the first hours and days of life. Note: this publication is priced.http://apps.who.int/bookorders/anglais/detart1.jsp?codlan=1&codcol=52&codcch=210

Supplement on Integrated Community Case Management in Africa

The Journal of Global Health has published a special supplement entitled "Current scientific evidence and future directions for Integrated Community Case Management in Africa," which highlightes the latest evidence on integrated community case management (iCCM) for childhood illnesses. It lists implementation approaches

that have and have not worked in various settings, along with recommendations for future programming, given the current context of innovation and funding opportunities. See details at http://www.who.int/tdr/news/2014/iccm/en/Note: this publication is priced.

Caregivers' knowledge and home management of fever in children

Fever is a sign that there is an underlying pathologic process, the most common being infection. Many childhood illnesses are accompanied by fever, many of which are treated at home prior to presentation to hospital. Most febrile episodes are benign. Caregivers are the primary contacts to children with fever. Adequate caregivers' knowledge and proper management of fever at home leads to better management of febrile illnesses and reduces complications. This study at Kenyatta National Hospital questioned 250 caregivers of children under 12 years presenting with fever in 2011. Three quarters of the caregivers' defined fever correctly and a majority of them used touch to detect fever. Infection was cited as the leading cause of fever (95.2%). Brain damage (77.6%) and dehydration (65.6%) were viewed as the most common complications. Fever was treated at home by 97.2% of caregivers, most of them used medication. It was concluded that Public Health Education should be implemented in order to enlighten caregivers on fever and advocate for the use of a clinical thermometer to monitor fever at home.

Ref: Caregivers' Knowledge and Home Management of Fever in Children PJ Koech, FE Onyango, C Jowi E. Afr. med. J. Vol 91, No 5 (2014). Abstract athttp://www.ajol.info/index.php/eamj/article/view/109970

Environmental Enteric Dysfunction

This Technical Brief from the CMAM Forum gives an up-to-date overview of this condition, including impact on health and nutrition, diagnosis, epidemiology, possible aetiology and approaches to treatment. It considers how this can affect management, and highlights current research, future priorities and further reading. It is aimed at stakeholders involved and interested in the reduction of childhood undernutrition, especially those addressing child health in low- and middle-income countries. See the Brief at http://www.cmamforum.org/Pool/Resources/Environmental-Enteric-Dysfunction-CMAM-Forum-techn-brief-Aug-2014.pdf

Ref: Environmental Enteric Dysfunction – an Overview 2014. Crane, Jones and Berkley on CMAM Forumat http://www.cmamforum.org/