

# Babies with clinically suspected serious infections can be safely and effectively treated outside hospital

April 2 2015

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Newborns and young infants with possible severe bacterial infections (PSBI), such as pneumonia and sepsis, whose families do not accept or cannot access hospital care, can be safely and effectively treated with simplified antibiotic regimens outside hospital, according to the results of three large trials from Africa and Bangladesh published in *The Lancet* and *The Lancet Global Health* journals.

In light of these findings, WHO guidelines on the management of newborns and young infants with PSBIs should be modified, say the authors.

About 1 in 5 babies worldwide develop severe bacterial infections during the first month of life. These infections are responsible for around 700000 deaths in newborns every year. Current WHO guidelines recommend that [newborns](#) and young infants with PSBI be hospitalised and treated with injectable antibiotics for at least 7-10 days. However, in resource poor settings, many children with PSBI never reach hospital for reasons such as poor transportation, cost, and distance. What is more, around 60% of parents refuse hospital treatment for young infants and many are unwilling to adhere to treatment regimens of injectable antibiotics.

"Safe, effective, simplified treatment alternatives provided on an outpatient basis could help increase the number of children receiving

care, improve adherence to treatment, and reduce the burden on limited hospital resources and the risk of [hospital acquired infections](#)," explains Professor Ebunoluwa Adejuyigbe, co-lead author of one of the studies, and Dean of the School of Medicine at Obafemi Awolowo University in Nigeria.

The two African Neonatal Sepsis Trial (AFRINEST) studies, published in *The Lancet*, examined whether two groups of young infants with clinical signs of PSBI—those with mild disease (fast breathing only) and those with severe but non-critical disease (eg, poor feeding, lethargy, temperature  $\geq 38^{\circ}\text{C}$  or

Citation: Babies with clinically suspected serious infections can be safely and effectively treated outside hospital (2015, April 2) retrieved 19 July 2023 from <https://medicalxpress.com/news/2015-04-babies-clinically-infections-safely-effectively.html>

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