



KEY MESSAGES - MSF Paediatric Days

15-16th of December 2017 || DAKAR

<https://paediatrics.msf.org>



MAIN MESSAGES*



1.

An **integrated approach** to maternal and child health care during the perinatal period is critical for improving neonatal outcomes.



2.

Early recognition and halt of status epilepticus in children is essential in the care of neurocritically ill children.



3.

Pain is **poorly recognised and undertreated** in children in humanitarian settings despite evidence of its implications on outcome and neonates/child development.



4.

Supportive care is critical to **providing care with dignity**, regardless of whether we can save the child's life.



5.

Play is an essential tool in the **treatment for sick children** with measurable and cost-effective impact.



6.

Innovation can push the limits for providing **low cost, high quality paediatric care** adapted to humanitarian settings.



7.

Adolescents (ages 10-19 years) are a **neglected paediatric population** in humanitarian settings.



8.

Task sharing is an important way to expand the reach and quality of neonatal and paediatric care. **Community involvement** is a critical component for the scale-up of activities to maximise impact.

RECOMMENDATIONS

- Scale-up of trainings and implementation of the golden minute algorithm at project levels.
- MSF to endorse a policy of continuum of care between obstetric and neonatal care, establishing minimum standards for the integration of maternal and neonatal care.

- Research is urgently needed to develop therapeutic options beyond antimalarials for cerebral malaria in children in humanitarian settings.
- Improve access to safer treatment options such as Levetiracetam by advocating for lower pricing for humanitarian settings.

- Train staff in the assessment and treatment methods of pain in children and neonates.
- Improve access to strong pain medications (eg. morphine).

- Integration of supportive care into MSF neonatal and child health programmes with clear guidelines, training of personnel, and deliberate focus.

- Space and adapted means for play to be part of all paediatric MSF programmes.
- Guiding tools and Training to be developed for integrating play in programmes.

- Stronger collaboration between Paediatrics and Innovation Units.
- Reduce cost of technology needed to provide high quality paediatric care.

- Improved documentation of the health needs and risks among adolescents in MSF projects.
- Development of youth-friendly clinics for adolescents.

- Protocols for community-based care practices must be adapted and simplified to fit the needs and constraints at the community level.
- Support and expand the use of eHealth.
- Scale-up trainings for doctors/clinical officers/nurses and CHW.

*A detailed account of the meeting will be presented in a separate report.

Don't miss the next Paediatric Days: Stockholm, early 2019