

SafeBoosC News

'Another potential reason why SafeBoosC-II may come out negative:

Our last patient in the open group was clinically well, i.e., breathing spontaneously at low FiO2 with a good blood pressure and a good capillary refill. He had a systolic murmur though, and developed a marked tendency to apnea. Cerebral oxygenation was OK although to the low side most of the time, and for some periods it was below 55%. It was only very low for brief periods, concurrent with his apneas. No action was taken. On day 4 he had an echo, which showed a 3 mm DAP.

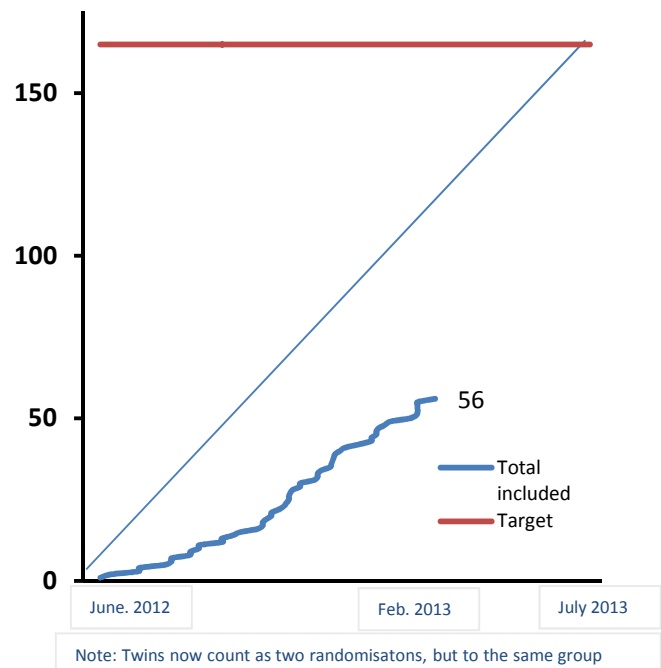
This may not be bad management. But the fact is that he had two clinical signs of problems: the murmur and the apneas. When the cerebral oximetry was to the low side, this did not influence management.

So, are we as neonatologists happy to put on yet another piece of monitoring equipment and yet reluctant to use that new information? While it may generally be wise to be conservative in an uncertain world, this attitude will not make SafeBoosC-II a success.

I am looking forward to our meeting in Dragør and your experiences with interventions and non-interventions prompted by out-of-range cerebral oxygenation.'

Best wishes,
Gorm

Site	Screened	Included	hereof Twin-Pairs	Targeted
Graz	16	4	1	6
Leuven	0	0	0	6
Zurich	0	0	0	6
Tübingen	0	0	0	6
Copenhagen	46	19	5	28
Madrid	28	14	1	35
Lyon	12	10	1	20
Cork	7	2	1	25
Milan	3	3	0	6
Utrecht	0	0	0	15
Uppsala	0	0	0	6
Cambridge	7	4	0	6
Total	119	56	9	165



Calendar

SafeBoosC Annual F2F Meeting Dragør,
Denmark : March 14-15, 2013,