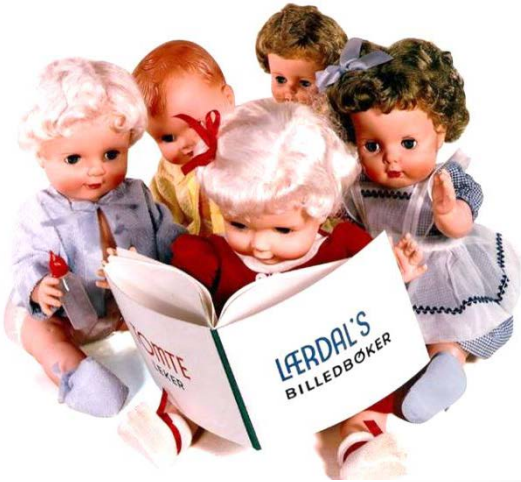

GDA approach and vision of Laerdal Global Health


Some lessons from 50 years of helping implement CPR training

A history from toy dolls to lifesaving dolls



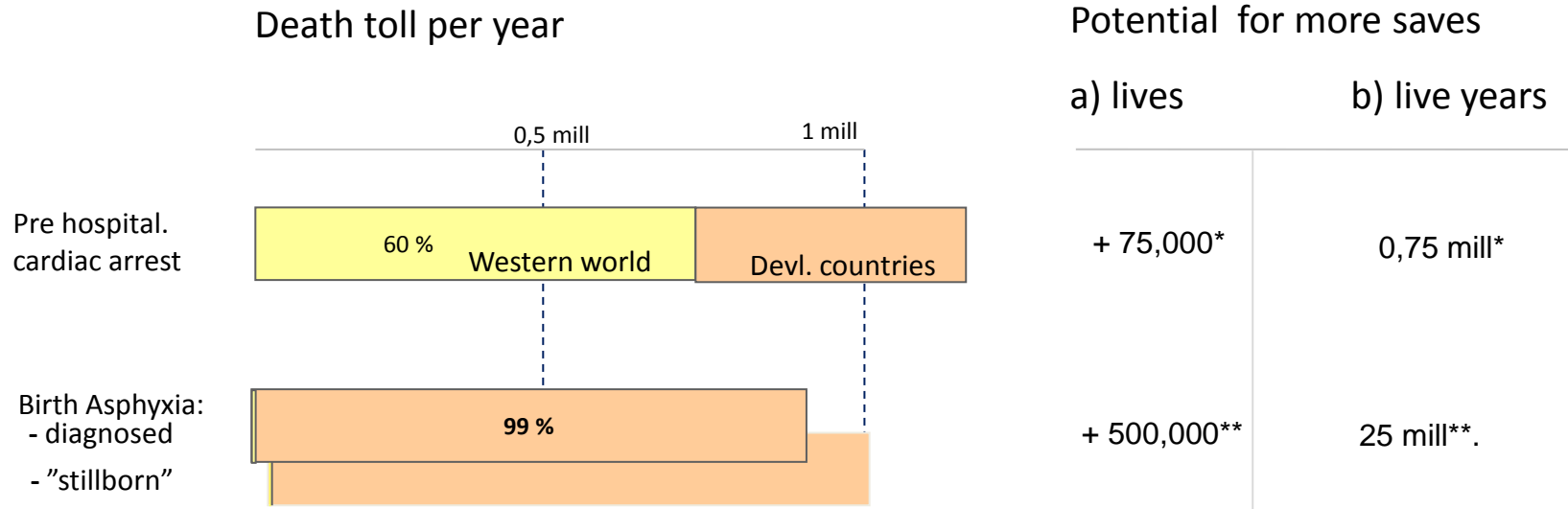
Status after 50 years of CPR

- 3- 400 million trained
- 2 million saved

A black and white photograph showing a man in a dark suit jacket and white shirt lying on his back on a sandy surface. Another man, shirtless and wearing a dark cap, is leaning over him, performing CPR. The background is a bright, hazy outdoor setting.

Asmund S Laerdal 1913 - 1981

1. Focus on patients with the highest save potential



The potential for saving lives with CPR may be tenfold , or more , greater within newborn resuscitation than on sudden cardiac arrest patients.

99% of the impact potential among newborns is in developing countries

Notes

- Assuming a doubling of present survival, increasing average survival from pre-hospital SCD from an estimated 7-8% currently, to 15% ; and 10 life years saved per survivor.

** Assuming potential to reduce birth asphyxia by 50% and "fresh stillborn" by 25%; and 50 life years saved per survivor



2. Focus on interventions with the highest save potential

For SCA patients

- Pre arrival instructions
- Bystander CPR
- Early defibrillation
- Hypothermia

For Newborns

- Bystander stimulation
- HBB by birth attendants
- Institutional deliveries

3. Make it simple !



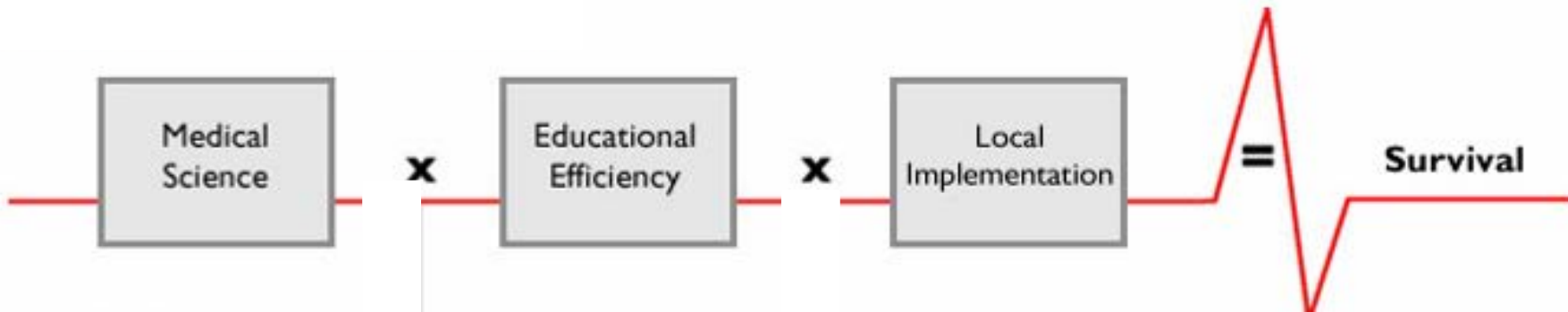
- Evidence based;
- Scenario based,
 - Hands on, peer training
 - Low dose high frequency



- Upright Bag
- Better seal
 - Fewer parts
 - Easier cleaning
 - Lower cost

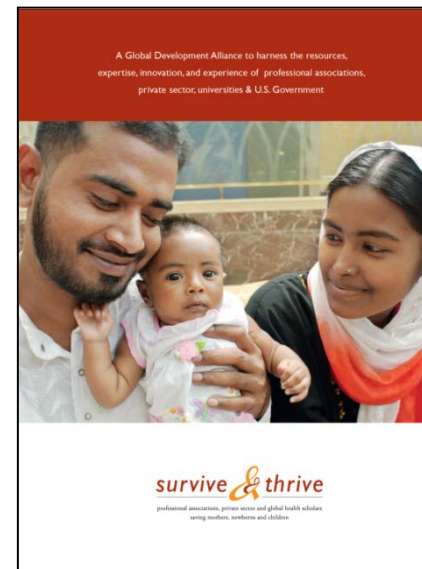
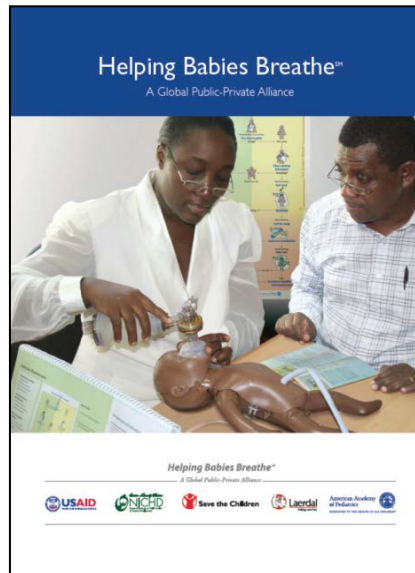
4. Work with partners

Formula of Survival



Educational efficiency and local implementation are the Relatively weakest factors

Implementation can in particular benefit from collaboration among synergistic partners



5. Integrate solutions

Essential Newborn Care
Preterm
“Stillborn”

Basic Emergency
Obstetric Care

