

The Underutilization of Caffeine in sub-Saharan Africa

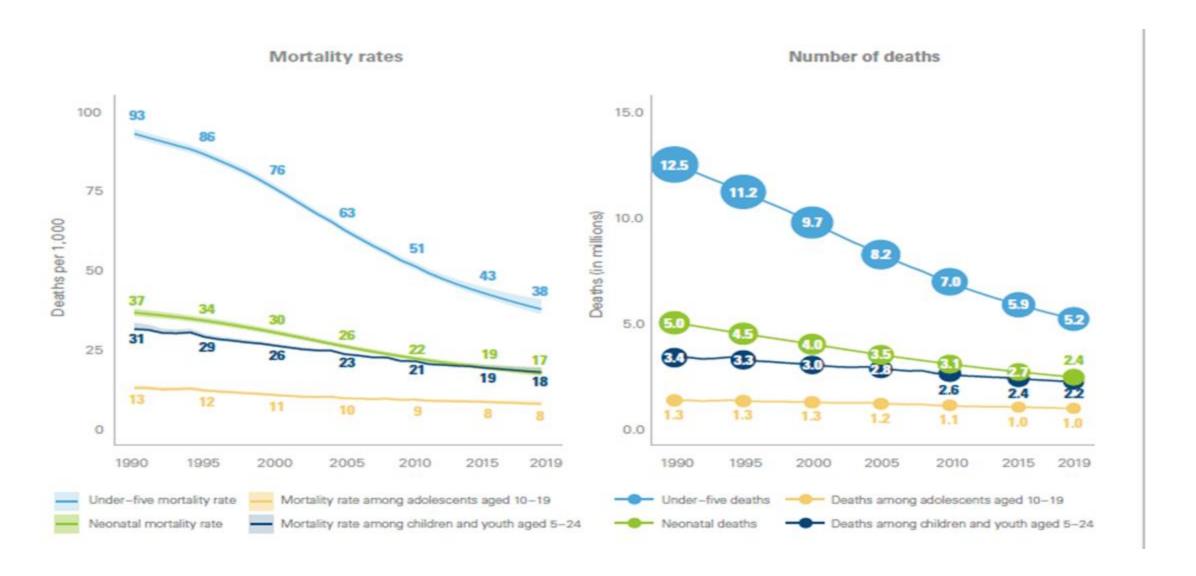
Dr Helen Nabwera

(On behalf of the Neonatal Nutrition Network for sub-Saharan Africa) https://www.lstmed.ac.uk/nnu

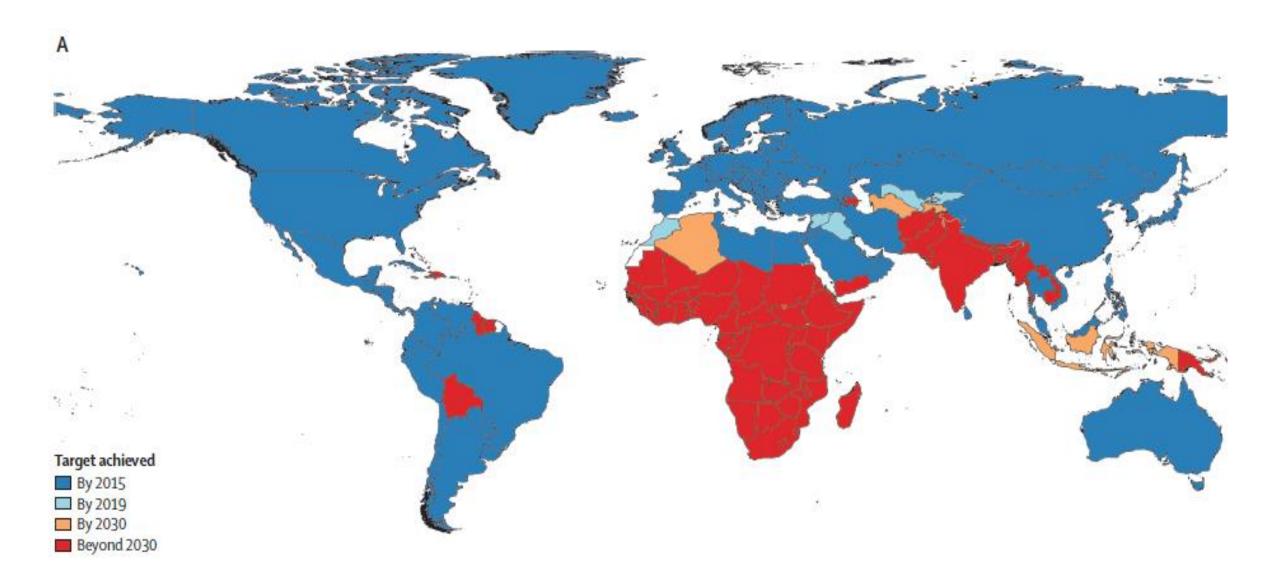
Disclosure

Nothing to disclose

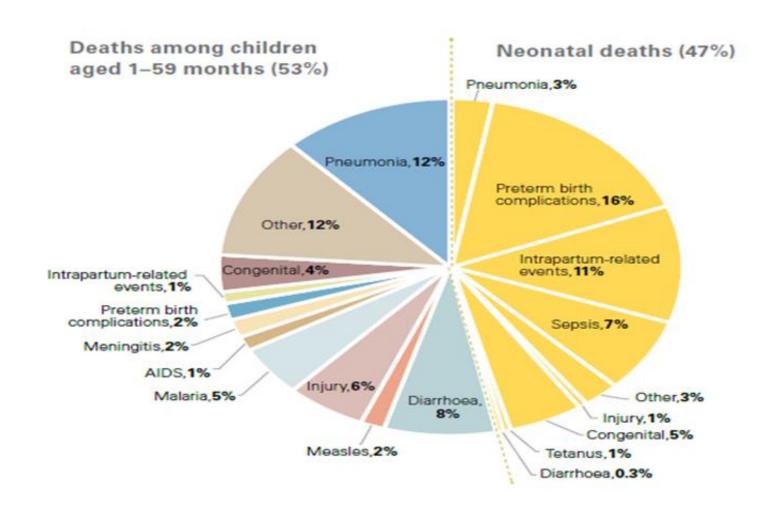
Global mortality rates and number of deaths by age, 1990-2019



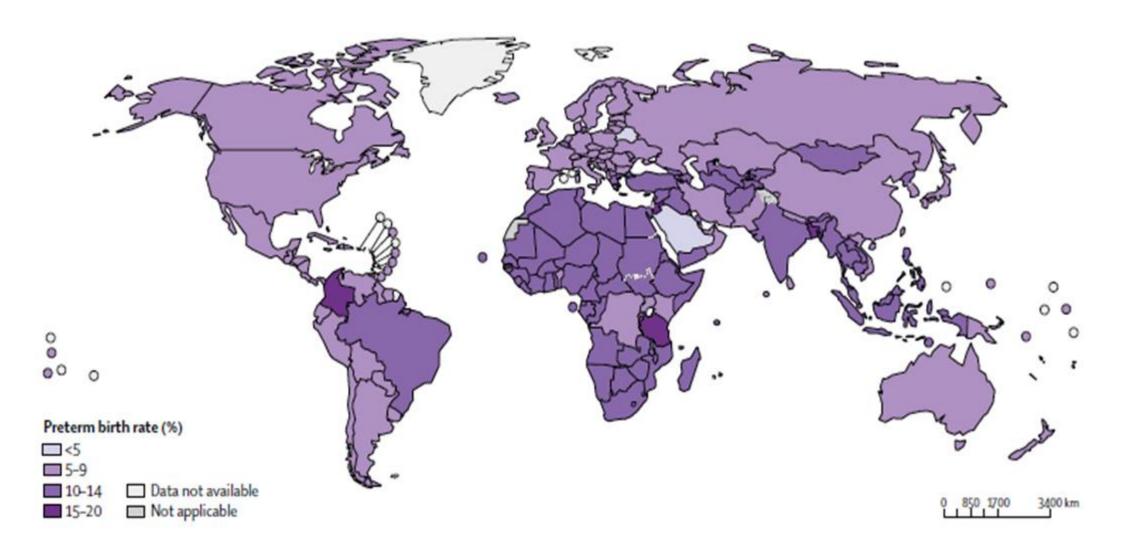
Progress towards achieving Sustainable Development Goal target for neonatal mortality



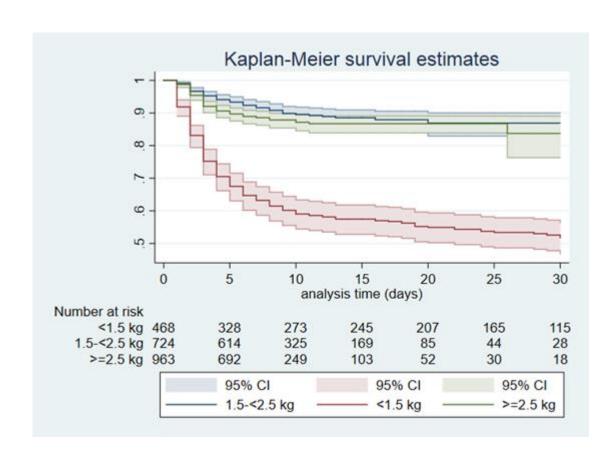
Causes of under 5 mortality

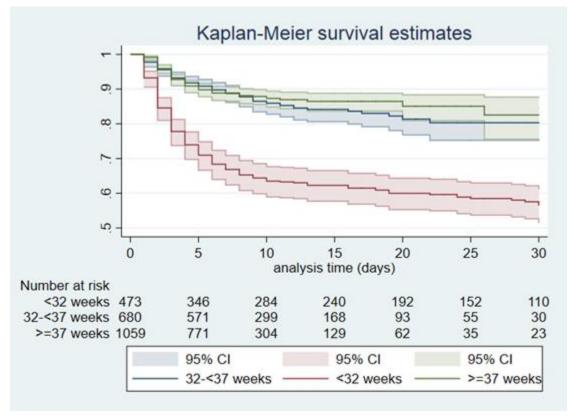


Estimated global preterm birth rates in 2014



Neonatal Nutrition Network project in sub-Saharan Africa





Purpose:

- Enhancing equitable (universal) access
 to effective and sustainable highquality care for pregnant women and
 their newborns.
- Improved quality of data to assess progress and promote accountability.





Caffeine citrate for apnea of prematurity

Benefits Potential side effects

- Safe
- Non-invasive
- Effective in decreasing the frequency of apneic episodes hence need for mechanical ventilation
- Given once a day (oral/ intravenous)
- Reduced risk of cerebral palsy months ($\sqrt{42\%}$), cognitive impairment ($\sqrt{19\%}$) and death/survival with neurodisability ($\sqrt{23\%}$) at 18-21 .
- Reduced risk of motor impairment ($\sqrt{34\%}$) and improved respiratory outcomes at middle school age (11y).

- Tachycardia
- Jitteriness
- Feed intolerance

Essential Medicines

 Caffeine citrate one of only two drugs listed under "medicines administered to the neonate". WHO Model List of Essential Medicines for Children (2021)



Why is caffeine citrate not underutilized sub-Saharan Africa?

- Uncertainty of the efficacy and safety of methylxanthines in the prevention and treatment of apnea of prematurity in lowand middle-income countries.
 - > Caffeine citrate vs intravenous aminophylline
 - ➤ Randomize clinical trials relatively small, often single centre trials in HICs/LMICs.
 - Clinical equipoise minimal benefits by either drug or no difference.
 - Caffeine citrate lower risk toxicity.



- Not in national guidelines where available.
 - > Predominantly used in tertiary centres.
 - > Lack of knowledge/experience of using caffeine.
- Unavailable in some countries
 - > Legislation to avoid misuse.
- High cost
 - > 7- day course can cost upto USD 600 in Kenya sourced through private pharmacies.
 - > Limited availability through hospital pharmacies.
 - Patenting.
- South Africa
 - ➤ Accessible, affordable, prescribed regularly

Suggested next steps

- Evidence of efficacy/safety in sub-Saharan Africa
 - > multi-centre randomised controlled trial caffeine citrate versus standard of care
- Availability
 - > Stakeholders (in-country partners, industry and drug regulatory bodies etc)
 - > Feasibility of locally produced generic caffeine citrate for neonatal care
 - ➤ Pricing



















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