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# MRC-developed 'brain-cooling' treatment reaches families

### 4 June 2010

A procedure developed by scientists at the Medical Research Council (MRC) which saves the lives of babies starved of oxygen at birth has been deemed "safe and effective" for NHS use by The National Institute for Health and Clinical Excellence (NICE).

The procedure, called therapeutic hypothermia, involves healthcare professionals 'cooling' newborn babies who are at risk of severe disability or death due to oxygen deprivation by using a blanket or mattress filled with cooled air or fluid, or a special cooling cap on the head. Cooling slows down the rate of cell damage in the brain.

The treatment is currently available in many neonatal intensive care units in the NHS. However the evidence of how well it works or how safe it is had never been collated and analysed on a national scale before. NICE has therefore reviewed the research published in this area and produced guidance for the NHS outlining the circumstances in which it can be offered for these vulnerable babies.

Every year in the UK more than 1,000 otherwise healthy babies born at full term die or suffer brain damage caused by a lack of oxygen at birth or during labour. Babies who do survive can be left with lifelong disability such as cerebral palsy.

Dr Catherine Elliott, Head of Clinical Research Support at the Medical Research Council, said:

"This guidance is a significant step in a very long journey of medical research into this area. It's a shining example of how the MRC's work, alongside the work of other scientists, doctors and academics, can impact clinical practice and ultimately save lives. It's only with long term research funding, that stretches through from the laboratory bench to the patient's bedside, that these kinds of results can be achieved."

Professor Bruce Campbell, Chair of the Interventional Procedures Advisory Committee which produced the guidance for NICE, said:

"Having analysed the evidence, it is clear that therapeutic hypothermia is better than standard intensive care treatments at reducing the risks for carefully selected newborn babies who have been deprived of oxygen.

"Therapeutic hypothermia does, however, have some risks and possible complications, such as localised bleeding or infection. It is therefore very important that it is only carried out by specifically-trained staff and in units that are accustomed to looking after severely ill newborn babies. We also expect healthcare professionals to record the details and outcomes of all babies who have this treatment so that we can learn more about it."

To support this clinical audit, NICE is encouraging healthcare professionals to record the details of babies undergoing therapeutic hypothermia onto a national register called the UK TOBY cooling register - www.npeu.ox.ac.uk/tobyregister which is funded by the MRC and will

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help determine the long term benefits and specific patient groups that the treatment is most likely to help, as not all babies will benefit. NICE is responsible for setting the standards for good healthcare and the relevant procedure guidance is provided at <a href="https://www.nice.org.uk/IPG347">www.nice.org.uk/IPG347</a>.



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