asphyxiated newborns with room air or 100% oxygen at birth: A multicentric clinical trial. Indian Pediatr 2003; 40: 510-518.

1. The inclusion criteria included newborns weighing more than 1000 grams. A look at the baseline neonatal variables shows that on taking mean birth weights and standard deviation into account, there were no babies below a birth weight of 1800 grams. Were no such babies delivered; as there is no mention about their exclusion?

2. Hypoxic Ischemic encephalopathy (HIE) is defined clinically on the basis of a constellation of findings, including a combination of abnormal consciousness, tone and reflexes, feeding, respirations, or seizures. Staging of HIE in to Stages I, II and III describes the clinical states of asphyxiated infants over 36 weeks gestational age(2). How was the same staging system used for babies of lesser gestational ages?

3. There is no record of cord blood pH, a significant indicator of perinatal asphyxia.

4. A significant number of neonates including preterm neonates who develop hyaline membrane disease are dependent on Oxygen from the time of birth. The recommendation about resuscitation with room air may not be applicable to this group of neonates.

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REFERENCES

We have the following comments to offer on the recent article(1) on this subject:

1. The room air group in treatment failure was switched over to 100% oxygen supplementation after 90 seconds of resuscitation. According to international guidelines for neonatal resuscitation 2000(2), some of the babies in room air group might have received external cardiac massage by then. Generally myocardial failure does not occur until both pH and PaO₂ are extremely low, approximately 6.9 and 20 mm of Hg.