



Integrated Management of Neonatal and Childhood Illness (IMNCI)

Objectives

After completing this unit, you will be able to:

- Assess various signs and sickness in young infant and child
- Classify illness in a sick young infant and child based on signs and symptoms
- Identify treatment for various problems in young infant and child
- Treat young infant and child

IMNCI

- Almost 19,000 children under 5 yrs. of age, died everyday across the world, 50% of it occurs in India
- In India, there are nearly 16.55 lakhs child deaths during 2011 and we rank top amongst the countries with highest child mortality
- India : IMR-34/1000 live births in 2016, which was 47 in 2010; MP has the highest IMR followed by Assam, Orissa and UP
- MP- 47, Assam & Odisha-44, and UP- 43/1000 live births
- **WHO** and **UNICEF** recognized the need to strengthen child-health activities in the country and decided to launch **IMCI**; The generic IMCI guidelines were adapted and the **Indian version** was named Integrated Management of Neonatal and Childhood Illness (**IMNCI**)

IMNCI: An Introduction

- IMNCI is an integrated approach to child health that focuses on the well-being of the whole child.
- IMNCI aims to reduce death, illness and disability, and to promote improved growth and development among children under five years of age
- IMNCI includes both preventive and curative elements that are implemented by families and communities as well as by health facilities
 - ✓ The strategy includes three main components:
 - ✓ Improving case management skills of health-care staff
 - ✓ Improving overall health systems
 - ✓ Improving family and community health practice

Principles of Integrated Care

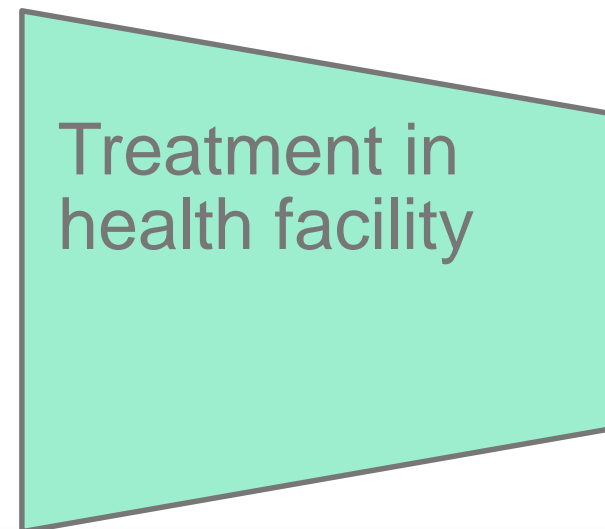
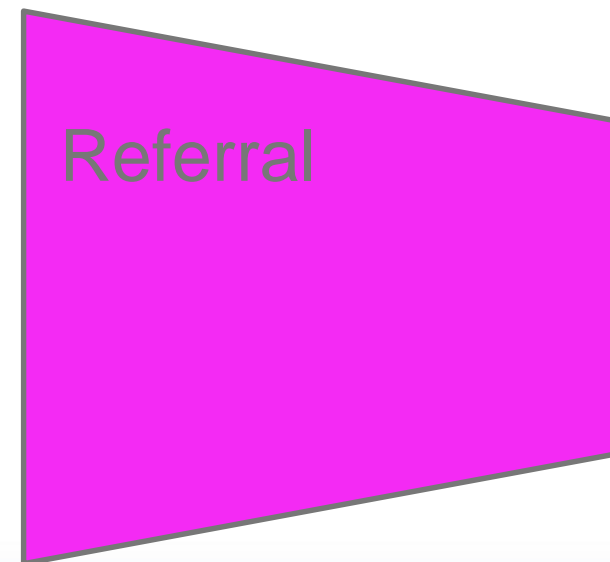
- All sick young infants up to 2 months of age must be assessed for “**possible bacterial infection / jaundice**”. Then they must be routinely assessed for the major symptom “**diarrhea**”.
- All sick children **age 2 months up to 5 years** must be examined for “**general danger signs**” which indicate the need **for immediate referral or admission to a hospital**. They must then be routinely assessed for major symptoms: **cough or difficult breathing, diarrhea, fever and ear problems**
- All sick young infants and children 2 months up to 5 years must also be routinely assessed for nutritional and immunization status, feeding problems, and other potential problems

cont...

- only a limited number of carefully selected clinical signs, are used based on evidence of their sensitivity and specificity to detect disease.
- IMNCI guidelines address most common but not all pediatric problems.
- A limited number of essential drugs are used.
- Care takers are actively involved in the treatment of children.
- counselling of caretakers about home care including feeding, fluids and when to return to health facility

Cont...

- Based on the presence of selected clinical signs, the child is placed in a 'classifications'.
- Classifications are not specific diagnosis but categories that are used to determine the treatment. Referral Treatment in health facility Management at home



IMNCI PACKAGE

- IMNCI guidelines recommend standardized case management procedures
- That based on two age categories: -
 - 1. Upto 2 months and
 - 2. 2 months to 5 years

Care of Newborns and Young Infants (infants under 2 months)

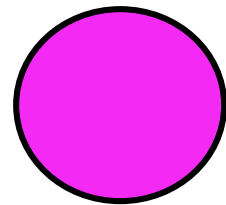
- 1. Keeping the child warm.
- 2. Initiation of breastfeeding immediately after birth and counseling for exclusive breastfeeding and non-use of pre lacteal feeds.
- 3. Cord, skin and eye care.
- 4. Recognition of illness in newborn and management and/or referral).
- 5. Immunization
- 6. Home visits in the postnatal period.

Care of Infants (2 months to 5 years)

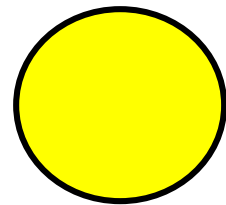
- 1. Management of diarrhea, acute respiratory infections, malaria, measles, acute ear infection, malnutrition and anemia.
- 2. Recognition of illness and at risk conditions and management/referral)
- 3. Prevention and management of Iron and Vitamin A deficiency.
- 4. Counseling on feeding for all children below 2 years
- 5. Counseling on feeding for malnourished children between 2 to 5 years.
- 6. Immunization

Principles of Integrated Care

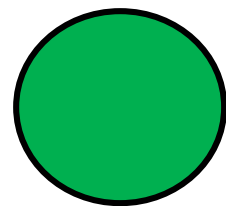
- A combination of individual signs leads to a child's classification(s) rather than diagnosis



Needs urgent hospital referral or admission
(classified as and color coded pink)



Needs specific medical intervention or advice
(classified as and color coded yellow)



Can be managed at home (classified as and
color coded green)

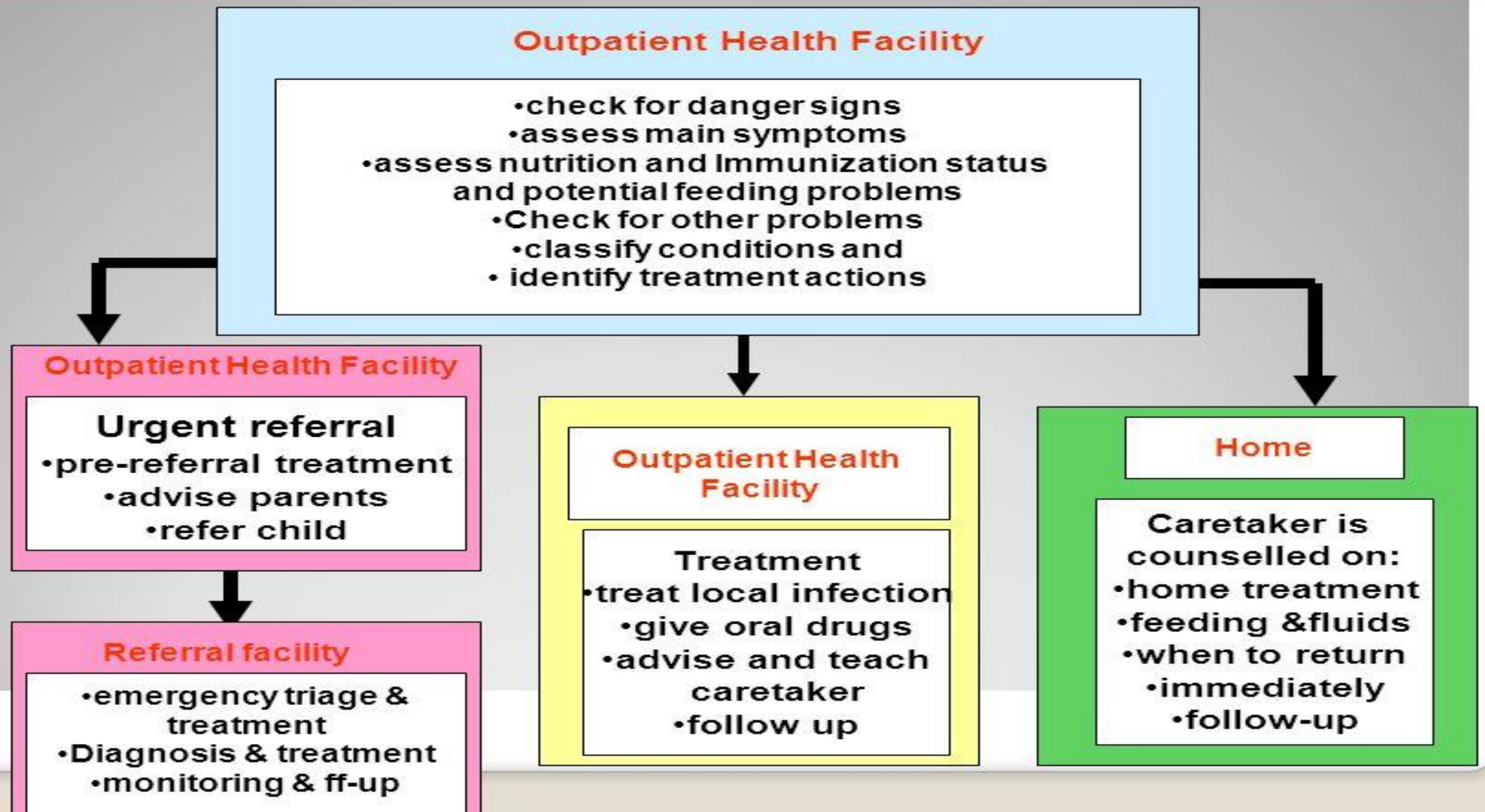
Goals of IMNCI

- Standardized case management of sick newborns and children
- Focus on the most common causes of mortality
- Nutritional assessment and counseling for all sick infants and children
- Home based care for newborns to:
 - ✓ promote exclusive breastfeeding
 - ✓ prevent hypothermia
 - ✓ improve illness recognition & timely care seeking behavior

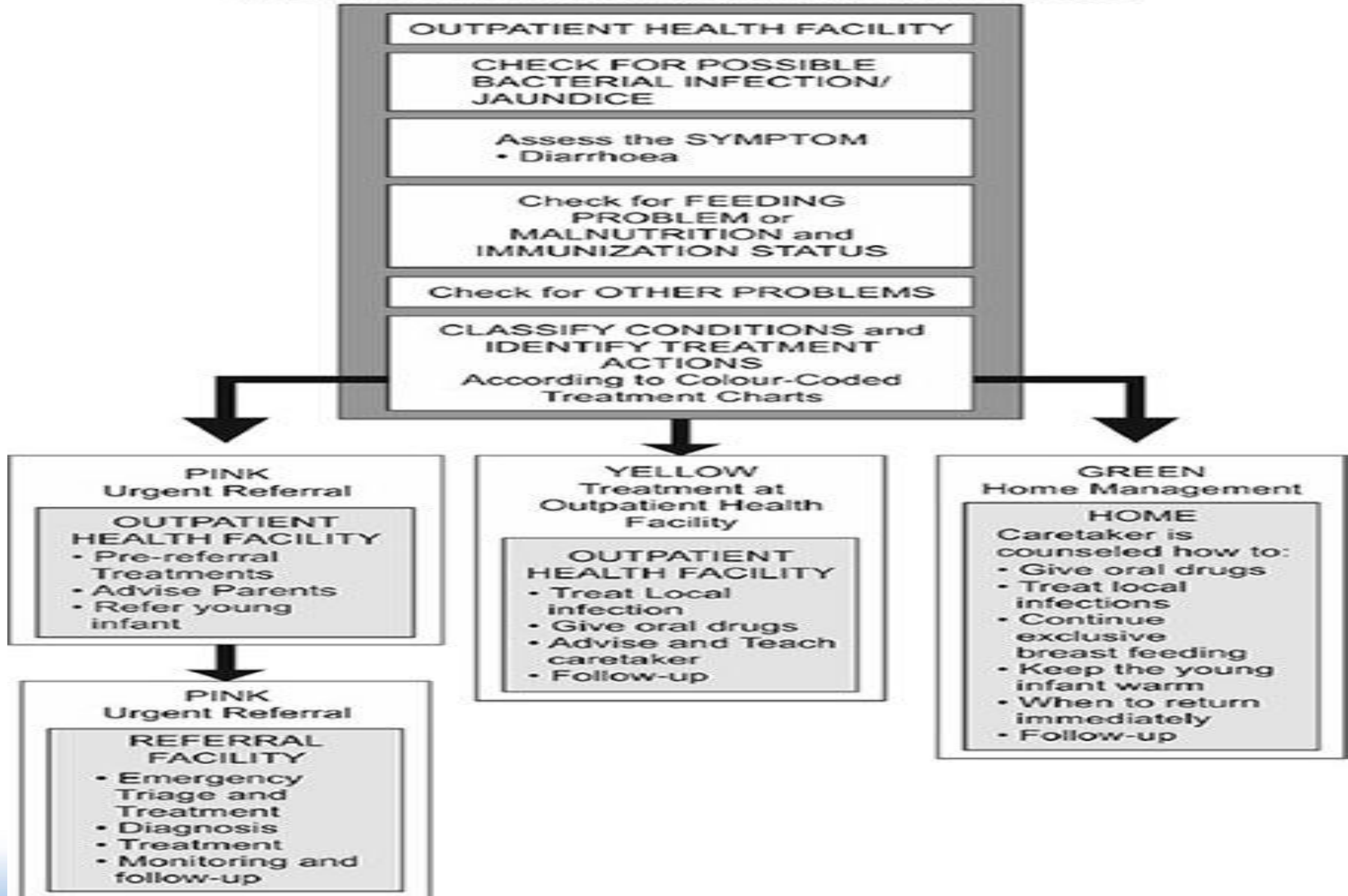
Elements of Case Management Process

- **Assess:** Child by checking for danger signs by history and examination
- **Classify :** Child's illness by color coded triage system
- **Identify:** Specific treatments
- **Treatments:** Instructions of oral drugs, feeding & fluids
- **Counsel:** Mother about breast feeding & about her own health as well as to follow further instructions on further child care
- **Follow up care:** Reassess the child for newer problems

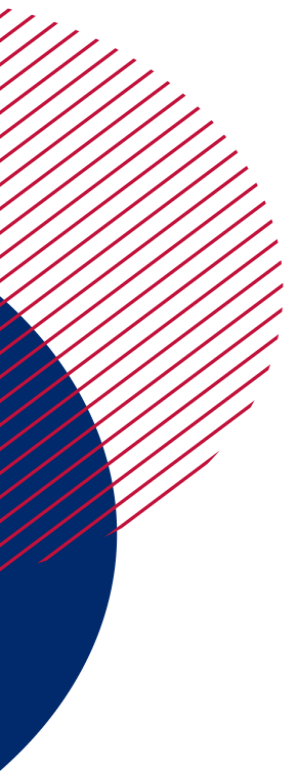
The Integrated Case Management Process



THE INTEGRATED CASE MANAGEMENT PROCESS



ADVANTAGES OF INTEGRATED APPROACH

- 
- • Speeds up the urgent treatment and treatment seeking practices.
 - • Prompt recognition of serious condition, hence prompt referral.
 - • Involves parents in effective care of baby at home.
 - • Partial Success of Individual disease control program
 - • Involves prevention of diseases by active immunization, Improved nutrition and Exclusive Breastfeeding practices.
 - • Highly cost effective.
 - • It avoids wastages of resources by using most appropriate medicines and treatment.
 - • It reduces duplication of effort.



**THANK
YOU**