INTRODUCTION & OBJECTIVES

Training first medical responders in India has been considered a very cost-effective intervention for frequently occurring diseases and injuries1. In 2013, the Belgian Red Cross-Flanders together with the Indian Red Cross launched a project to develop evidence-based first aid guidelines and prevention advice specifically adapted to the Indian context. As a basis for these guidelines, scientific evidence was searched to decide which first aid and preventive interventions are effective.

METHODS

• Evidence-based guidelines were developed according to our methodological charter, adhering to the principles of AGREE II5,6.

• The selection of topics was based on published injury and disease statistics for South Asia7: fever (malaria/pneumonia), diarrhoea, head injuries ...

• For every pillar of ‘evidence-based practice’ the corresponding steps of guideline development are given below:

PRACTICAL EXPERIENCE AND EXPERTISE OF EXPERTS IN THE FIELD

• Two meetings with a multidisciplinary panel of 12 Indian experts, including experienced first aiders, took place in New Delhi. The panel formulated the final recommendations, assigned the grades of recommendation and formulated Good Practice Points.

• Peer reviewers with additional expertise have provided feedback on the final draft.

RESULTS

Box 1: Study selection flowchart for alternative first aid interventions for diarrhoea, identified in Indian studies (B: level of evidence moderate; C: level of evidence low)

Evidence and corresponding recommendation for rice water as a first aid treatment for diarrhoea

• 175 references identified in previous evidence-based first aid guidelines were included in the evidence base8.

• 48 additional studies were selected that were in favour of 10 different first aid interventions (for diarrhoea and chest discomfort) and 16 different preventive interventions (for malaria, pneumonia, diarrhoea, road traffic injuries and safe pregnancy), relevant for India.

• See Box 1 and 2 for a detailed example about alternative first aid interventions for diarrhoea (in case no Oral Rehydration Solution (ORS) is available).

CONCLUSION

• Evidence-based first aid guidelines adapted to the Indian context were developed based on the collection of scientific evidence, the preferences of the target group and the expertise of Indian experts.

• In a next step, didactical materials based on these contextualized guidelines will be developed, taking the preferences of the Indian lay people into account, and tested in a pilot implementation phase in different states of India.

References: 