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Monivent Neo100 was associated with superior performance in a study from King's College London

The study conducted at King's College London with the use of Neo100, was published in Archives of Disease in Childhood, Fetal and Neonatal Edition. The manikin study demonstrates that the use of a RFM (respiratory function monitor) was associated with superior performance in mask ventilation with the effect being more pronounced in less experienced resuscitators.

The results of the study were presented in the publication "Influence of clinical experience on newborn manikin mask ventilation performance using a respiratory function monitor".

The study was conducted to evaluate whether the use of a respiratory function monitor (Neo100) with a neonatal manikin model improved performance of ventilation and if this was influenced by the level of experience of the resuscitators. Data from 23 participants were analysed where blinded and non-blinded sequences were compared. There was lower leak and a reduced delivery of excessive tidal volumes (Vte) when participants were unblinded to the Neo100 display.

"We are very pleased with the results presented by the very prestigious research group lead by Professor Anne Greenough at King's College London. These results are once more proving the usefulness of Neo100", says Karin Dahllöf, CEO at Monivent.

"Use of the Neo100 was associated with improved performance in neonatal clinicians in a manikin study, importantly this was particularly in the least experienced trainees. This suggests it could be useful in resuscitation scenarios and which we are studying", says Professor Anne Greenough, Department of Women and Children's Health, School of Life Sciences, Faculty of Life Science and Medicine, King's College London, London.

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Monivent AB *("Monivent") develops, manufactures and sells medical devices in order to improve the emergency care provided to newborns in need of respiratory support at birth. About three to six percent of all newborns end up in this critical situation and healthcare professionals today lack good tools to determine how effective this manual ventilation is. Monivent has developed equipment that measure the airflow to the child directly in the face mask via a sensor module that sends data wirelessly to an external monitor. The caregiver thereby receives immediate feedback, which enables necessary adjustments to support an effective but at the same time gentle treatment. The company is also marketing a product for simulation-based training on manikins, building on the same technology as the clinical product. The clinical product, Monivent Neo100, is not available for sale in the United States.*