

Publications

Key publications

Essential Emergency and Critical Care – a consensus among global clinical experts. Schell CO, Khalid K, Wharton-Smith A, Oliwa J., Sawe H, Roy N, Sanga A, Marshall JC., Rylance J, Hanson C, Kayambankadzanja RK, Jirwe M, Baker, T. *BMJ Glob Health.* 2021 Sep;6(9):e006585. <https://gh.bmj.com/content/6/9/e006585>

Essential care of critical illness must not be forgotten in the COVID-19 pandemic. Baker T, Schell CO, Petersen DB, Sawe H, Khalid K, Mndolo S, Rylance J, McAuley DF, Roy N, Marshall J, Wallis L, Molyneux E. *The Lancet* 2020 Apr 18;395(10232):1253-1254 [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30793-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30793-5/fulltext)

The global need for essential emergency and critical care. Schell CO, Gerdin Wärnberg M, Hvarfner A, Höög A, Baker U, Castegren M, Baker T. *Critical Care.* Oct.2018; 22(1): 284. <https://ccforum.biomedcentral.com/articles/10.1186/s13054-018-2219-2>

EECC Related publications

Towards definitions of critical illness and critical care using concept analysis RK Kayambankadzanja, CO Schell, M Gerdin Wärnberg, T Tamras, H Mollazadegan, M Holmberg, H Mølsted Alvesson, T Baker medRxiv 2022.01.09.22268917; doi.org/10.1101/2022.01.09.22268917

Unmet need of essential treatments for critical illness in Malawi Kayambankadzanja RK, Schell CO, Mbingwani I, Mndolo SK, Castegren M, Baker T.. *PLoS One.* 2021 Sep 10;16(9):e0256361. DOI: [10.1371/journal.pone.0256361](https://doi.org/10.1371/journal.pone.0256361)

Oxygen provision to severely ill COVID-19 patients at the peak of the 2020 pandemic in a Swedish district hospital: medical records-based cohort study. Hvarfner A, AIDjaber A, Ekstrom H, Enarsson M, Castegren M, Baker T, Schell CO. 11/3-21 medRxiv 2021: doi.org/10.1101/2021.03.11.21253350 *Accepted for publication in PLOS ONE*

Establishment of a high dependency unit in Malawi. Morton B, N Banda, E Nsomba, C Ngoliwa, S Antoine, J Gondwe, F Limbani, MYR Henrion, J Chirombo, Baker T, P Kamalo, C Phiri, L Masamba, T Phiri, KS Mndolo, SB Gordon, J Rylance. *BMJ Global Health* 2020; 5(11): e004041.

The use of antibiotics in the intensive care unit of a tertiary hospital in Malawi.

Kayambankadzanja RK, Lihaka M, Barratt-Due A, Kachingwe M, Kumwenda W, Lester R, Bilima S, Eriksen J, Baker T. BMC Infectious Diseases. 2020;20(1):776

Emergency and critical care services in Malawi: Findings from a nationwide survey of health facilities.

Kayambankadzanja RK, Likaka A, Mndolo SK, Chatsika GS, Umar E, Baker T. Malawi Medical Journal 2020; 32(1): 259-63.

Vital Signs Directed Therapy for the critically ill: improved adherence to the treatment protocol two years after implementation in an intensive care unit in Tanzania.

Hvarfner A, Blixt J, Schell CO, Castegren M, Lugazia E, Mulungu M, Litorp H, Baker T. Emergency Medicine International. 2020; 6. doi/org10.1155/2020/4819805

The prevalence and outcomes of sepsis in adult patients in two hospitals in Malawi.

Kayambankadzanja RK, Schell CO, Namboya F, Phiri T, Banda-Katha G, Mndolo SK, Bauleni A, Castegren M, Baker T. American Journal of Tropical Medicine and Hygiene. 2019. doi.org/ 10.4269/ajtmh.19-0320

Referral and admission to intensive care: a qualitative study of doctors' practices in a Tanzanian university hospital.

Engdahl Mtango S, Lugazia E, Baker U, Johansson Y, Baker T. PLoS One. 2019; 14(10): e0224355.

Inability to walk predicts death among adult patients in hospitals in Malawi.

Kayambankadzanja,RK, Schell CO, Nsanjama G, Mbingwani I, Mndolo SK, Rylance J, Baker T. Emergency Medicine International. 2019; 5. doi.org/10.1155/2019/6586891

Global Critical Care: add essentials to the roadmap.

Schell CO, Beane A, Kazidule R, Khalid K, Haniffa R, Baker T. Annals of Global Health. 2019; 85(1):97

Critical care of tropical disease in low income countries: Report from the Task Force on Tropical Diseases by the World Federation of Societies of Intensive and Critical Care Medicine.

Baker T, Khalid K, Acicbe O, McGloughlin S, Amin P; J Crit Care. 2017 Dec;42:351-354. doi: 10.1016/j.jcrrc.2017.11.028

Critical care in Malawi: The ethics of beneficence and justice.

Manda-Taylor L, Mndolo S, Baker T. Malawi medical journal : the journal of Medical Association of Malawi. 2017;29(3):268-71.

Derivation and validation of a universal vital assessment (UVA) score: a tool for predicting mortality in adult hospitalised patients in sub-Saharan Africa

Moore CC, Hazard R, Baker T, et al. BMJ Global Health. 2017; 2: e000344

Global Intensive Care Working Group of the European Society of Intensive Care Medicine. Current challenges in the management of sepsis in ICUs in resource-poor settings and suggestions for the future.

Schultz MJ, Dunser MW, Dondorp AM, Adhikari NK, Baker T, et al; Intensive Care Med. 2017;43(5):612-624.

Establishing an Anaesthesia and Intensive Care partnership and aiming for national impact in Tanzania.

Ulisubisya M, Jornvall H, Irestedt L, Baker T. Globalization and Health. 2016;12(1):7.

Single Deranged Physiologic Parameters Are Associated With Mortality in a Low-Income Country. Baker T, Blixt J, Lugazia E, et al. Critical Care Medicine. 2015;43(10):2171-2179

Severely deranged vital signs as triggers for acute treatment modifications on an intensive care unit in a low-income country. Schell CO, Castegren M, Lugazia E, Blixt J, Mulungu M, Konrad D, Baker T. BMC Research Notes. 2015;8:313

Critical Care in Low-income Countries.

Baker T. World Anaesthesia News 2014;July:8-11

Emergency and critical care services in Tanzania: a survey of ten hospitals.

Baker T, Lugazia E, Eriksen J, Mwafongo V, Irestedt L, Konrad D. BMC Health Services Research 2013;13:140

Identifying resource needs for sepsis care and guideline implementation in the Democratic Republic of the Congo: a cluster survey of 66 hospitals in four eastern provinces. Baelani I, Jochberger S, Laimer T, Rex C, Baker T, Wilson IH, et al.

Identifying resource needs for sepsis care and guideline implementation in the Democratic Republic of the Congo: a cluster survey of 66 hospitals in four eastern provinces. Middle East journal of anaesthesiology. 2012;21(4):559-75

Recommendations for sepsis management in resource-limited settings.

Dünser MW, Baker T et al. Intensive Care Med. 2012 Apr;38(4):557-74.

Availability of critical care resources to treat patients with severe sepsis or septic shock in Africa: a self-reported, continent-wide survey of anaesthesia providers

Baelani I, Baker T et al. Crit Care 2011;15(1):R10

Critical illness in developing countries: dying in the dark.

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