





Discussion: Therapeutic hypothermia has been proven as standard of care in perinatal asphyxia in developed countries. However, in resource-limited settings and low, middle-income countries, the results from the developed world cannot be extrapolated due to various practical difficulties though they contribute too many asphyxiated babies. There is also a lack of enough studies which are adequately powered from developing countries which can prove that cooling is the standard of care. We aimed to study our unit outcomes after introduction of therapeutic hypothermia. We acknowledge that our sample is too small to draw any conclusion. We just present our experience in the past 2 years and 2 months. We noticed that cooling benefited in terms of mortality and neurodevelopmental outcomes in our babies. Practical problems faced by us were high hospital cost and requirement of trained staff round the clock. We also noticed that cooling did not cause any decrease in the number of abnormal MRI and EEG. Hence, it may be noted that additional neuroprotection may be needed along with hypothermia.