

**NEO FOR  
NAMIBIA**  
HELPING BABIES  
SURVIVE



#### TEAM

- Thomas M. Berger, MD

**A more detailed report  
can be downloaded from  
[www.neo-for-namibia.org](http://www.neo-for-namibia.org)**

## **MISSION REPORT 2026-1**

### **SHORT VERSION**

February 25 to March 22, 2026

#### **Mission goals**

- To assess the current quality of perinatal care at both Rundu Intermediate Hospital and Katima State Hospital
- To update inventories of medical equipment and consumables at both hospitals
- To meet Mr. Penda Ithindi, Executive Director (ED) of the MoHSS
- Renewal of VISA and work permits for Prof. Thomas M. Berger and Sabine Berger

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## Hospitals visited

- Rundu Intermediate Hospital
- Katima State Hospital

Arrival at Hosea Kutako International Airport on February 26, 2026 at 19:45 o'clock after a scenic flight: the rainy season in Namibia lasts from September to April.

On Saturday, February 28, 2026, world politics took a dramatic turn when the conflict between Israel, the USA and Iran escalated.

The enormous gap regarding interests and resources between the countries at a war, other high-income countries and the poor people in Namibia's north became even more obvious and frankly absurd.

Namibian newspaper headlines on March 2, 2026, three days after the war between Israel, the USA and Iran had started.



## Rundu Intermediate Hospital

As always, the team of NEO FOR NAMIBIA – Helping Babies Survive was warmly welcomed by the hospital staff. Consumables brought by the mission team were desperately needed and therefore much appreciated.

Loading donated goods from Switzerland and lines for B Braun infusion pumps (bought from Sun Medical Supplies in Windhoek).



Intubated term infant supported with an EVE TR neo ventilator (left); the Mindray SV300 (right) is used when both EVE TR neo machines are already in use.

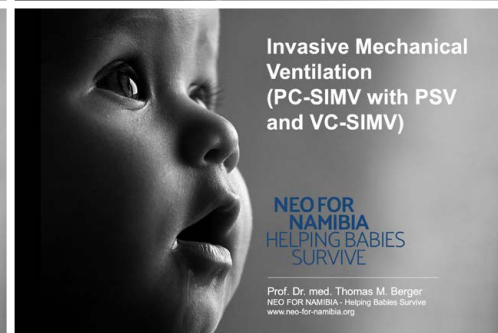
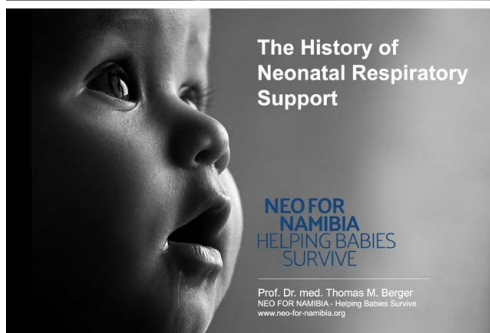
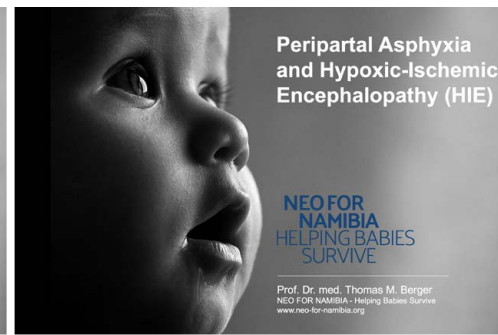
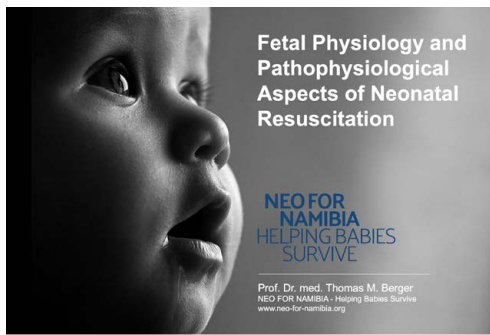


Some of the equipment donated by NEO FOR NAMIBIA – Helping Babies Survive has been in almost uninterrupted use for years and is now beyond repair; therefore, some of the equipment will have to be replaced.

Prof. Thomas M. Berger was able to give four formal lectures to new interns on the following topics:

- Fetal physiology and pathophysiological aspects of neonatal resuscitation
- Periparturient asphyxia and hypoxic-ischemic encephalopathy
- Neonatal respiratory support (adequate oxygen saturation targets to minimize oxygen toxicity)
- Mechanical ventilation using the EVE TR neo (differences between PC-SIMV with PSV and VC-SIMV)

Topics of lectures given to interns at Rundu Intermediate Hospital.



## Katima State Hospital

The Neonatal Unit at Katima State Hospital continues to provide solid neonatal care at an Intermediate Care Unit (IMC) level. The Cuban neonatologist, Dr. Yurisleidy Valdes, continues to provide excellent care.

Scenes from the Neonatal Unit at Katima State Hospital.



The mother of this two-month-old infant named Hope fled from an attack during the rebel conflict in Democratic Republic of Congo. When she arrived in Katima, she was well advanced in her fifth pregnancy (likely the result of rape).

Hope's (left) story shows: how armed conflicts (rebel conflict in the DRC, right) harm the most innocent.



Lack of antenatal care can have dramatic consequences: on two occasions (2022, 2025), Manolo Berbe, MD, head of obstetrics and gynecology, had to perform destructive operations (fetal decapitation) on dead fetuses to save their mothers' lives.

Baby with hydrocephalus (A) and a myelomeningocele (B): following delivery of the body from a breech presentation, the head had to be separated from the body and then delivered by Cesarean section to save the mother's life; the head was reattached to the body following delivery (arrows).





REPUBLIC OF NAMIBIA



Ministry of Health and Social Services

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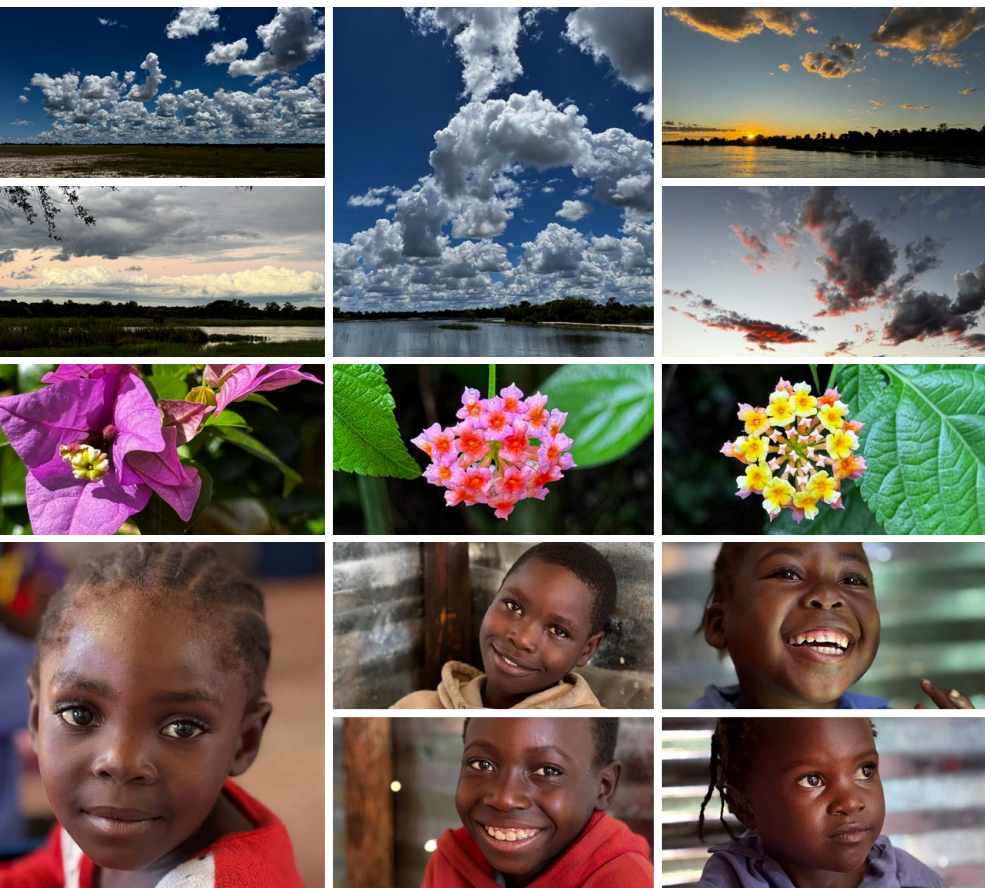
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## Strengthening our collaboration

During his stays in Windhoek, Prof. Thomas M. Berger met with several representatives of the Ministry of Health and Social Services (MoHSS).

A Memorandum of Agreement (MoA) was drafted and forwarded to the Attorney General for approval; hopefully, the document will be ready to be signed during Mission XXVI in May 2026.

Meeting with Mr. Penda Ithindi (right), Executive Director (ED) and Mr. Lawrence Siyanga (left) of the Ministry of Health and Social Services (MoHSS).



## Impressions from the 25th mission

To conclude this report, some images will illustrate various African sceneries the team encountered on their mission.

Cloud formations in African skies.

African flowers.

Children at Unique's Pre-School.

## Donate and help babies survive

[neo-for-namibia.org/donate](https://neo-for-namibia.org/donate)



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