

## عنوان مقاله:

Assessment of Delivery Room Resuscitation with Different Levels and Its Related Factors in Preterm Neonates

## محل انتشار:

مجله علمی ناباروری ایران، دوره 11، شماره 3 (سال: 1399)

تعداد صفحات اصل مقاله: 7

## نویسندگان:

Shahrzad Tabatabaee - *Shahid Beheshti University of Medical Sciences, Imam Hossein Hospital, Tehran, Iran*

Abolfazl Afjeh - *Neonatal Health Research Center, Research Institute for children s Health, Shahid Beheshti University of Medical Sciences, Tehran, Iran*

Mitra Radfar - *Shahid Beheshti University of Medical Sciences, Imam Hossein Hospital, Tehran, Iran*

Minoo Fallahi - *Neonatal Health Research Center, Research Institute for children s Health, Shahid Beheshti University of Medical Sciences, Tehran, Iran*

## خلاصه مقاله:

**Background:** There are many known risk factors related to maternal or neonatal problems which can predict the need for resuscitation. In this study, we evaluated the resuscitation process of preterm neonates and analyzed the impact of different risk factors on the level of resuscitation required in the patients. **Methods:** This cross-sectional descriptive study was conducted on inborn preterm infants with a birth weight of < 1500 g during one year. Moreover, the present study evaluated the resuscitation process of the delivery room and analyzed the association of maternal-neonatal risk factors and requirement for different levels of resuscitation. **Results:** In the present study, 193 preterm neonates were evaluated. In addition, 82 (42.5%) and 110 (57%) patients were female and male, respectively. The mean values of gestational age and birth weight of the patients were  $29.9 \pm 2.4$  weeks and  $1191.6 \pm 265.2$  g, respectively. The mode of delivery in 159 (82.4%) patients was cesarean section. In the assessment of different levels of resuscitation, 84 (43.5%), 35 (18.1%), 54 (28%), 10 (5.2%), 10 (5.2%), and 9 (4.7%) neonates needed initial steps, free flow of oxygen, positive pressure ventilation, endotracheal intubation, chest compression, and drug administration, respectively. The rate of neonatal mortality was 23.8% (n=46), and hypoxic-ischemic encephalopathy was recorded in 10 (21.7%) subjects. In the evaluation of mothers, 117 (60.6%) subjects had medical problems during pregnancy. The most common problem was preeclampsia in 44 (22.8%) mothers. The lower birth weight ( $P < 0.001$ ), gestational age ( $P < 0.001$ ), Apgar score ( $P < 0.001$ ), and longer duration of resuscitation had a significant effect on the needed level of resuscitation in neonates. **Conclusion:** According to the obtained results, it was shown that premature neonates needed more advanced resuscitation. Therefore, improving the quality of care for mothers and neonates is necessary to obtain better outcomes. Regarding the need for noninvasive positive pressure ventilation was the second most frequent intervention, the proper use of equipment is necessary for the prevention of advanced resuscitation.

## کلمات کلیدی:

neonate, Neonatal resuscitation program guideline, Preterm, Resuscitation

## لینک ثابت مقاله در پایگاه سیویلیکا:

