عنوان مقاله:

MORTALITY WITHIN THE FIRST 24 HOURS OF ADMISSION AMONG NEONATES AGED LESS THAN 24 HOURS IN A SPECIAL CARE BABY UNIT (SCBU) IN NIGERIA: THE ROLE OF SIGNIFICANT HYPOTHERMIA AND HYPOGLYCAEMIA

محل انتشار:

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خلاصه مقاله:

Background: Neonatal deaths mostly occur within the first one week and first 24 hours of life from a variety of conditions. Objective: To examine the role of significant hypothermia and hypoglycaemia, in addition to some other factors, in neonatal mortality occurring within the first 24 hours of admission.Methods: A prospective study of newborn infants hospitalized within the first 24 hours of life in a Nigerian Special Care Baby Unit. The axillary temperature and serum glucose at the point of admission were recorded for consecutive admissions. Significant hypothermia (axillary temperature < 36C) and hypoglycaemia (random blood glucose < 40mg/dl) were related to the risk of death within the first 24 hours of admission using bivariate and multivariate analysis. Results: Out of 277 infants, 24.2% and 27.3% had significant hypothermia and hypoglycaemia respectively. The overall mortality rate was 21.6% (49/227); 38.8% (19/49) of the infants died within the first 24 hours of admission. The Case Fatality Rate (CFR) among infants with neither significant hypothermia and hypoglycaemia. Death within the first 24 hours of admission was significantly associated with hypothermia nor hypoglycaemia. Death within the first 24 hours of admission was significantly associated with hypothermia, significant hypothermia, asphyxia and apnea using both bivariate and multivariate analysis. Conclusion: Deaths within the first 24 hours of admission, among infants admitted within the first 24 hours of life constituted close to 40% of all neonatal deaths in the present study with significant hypothermia and hypoglycaemia is a prospectively with significant hypothermia and hypoglycaemia is a major independent contributors.

کلمات کلیدی:

Early neonatal death, Neonatal hypoglycaemia, Neonatal hypothermia, Perinatal Mortality, Resource-poor setting

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