

PubMed

Format: Abstract*Afr J Med Med Sci.* 2004 Dec;33(4):299-303.

Outcome of low birth weight neonates in a tertiary health care centre in Lagos, Nigeria.

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Abstract

The records of all low birth weight (LBW) neonates admitted into the Neonatal Unit of the Lagos University Teaching Hospital (LUTH) from January 1997 to December 2001 were retrospectively analysed in order to determine the outcome and risk factors associated with mortality. There were 535 LBW admissions of which 411(76.8%) survived while 124(23.2%) died. The birth weight specific mortality rate for the < 1000g neonates was 818 per 1000, 451 per 1000 for the 1000-1499g, 216 per 1000 for the 1500-1999g, and 67 per 1000 for the 2000-2499g neonates ($X^2 = 127.70$, $p = 0.0001$). Primary indications for admission were neonatal sepsis (25.2%), perinatal asphyxia (23.0%) and neonatal jaundice (19.6%) with case fatality rates of 20.0%, 34.1% and 10.5% respectively ($X^2 = 34.24$, $p = 0.00001$). Death occurred within 48 hours of admission in 45.2% of subjects and by the 7th day, 72.6% had died ($X^2 = 70.07$, $p = 0.0001$). Significant risk factors associated with mortality were birth weight [OR 4.24, 95% CI = 3.14-5.72] and category of LBW [OR 2.79, 95% CI = 1.65-4.69]. Sex, twinning, booking status and mode of delivery had no significant influence on mortality. Since the provision of adequate intensive care for these vulnerable infants remains a major challenge in countries with poor resources, efforts should be intensified to implement effective strategies for the reduction of low birth weight deliveries.

PMID: 15977435

[Indexed for MEDLINE]

MeSH terms