

Review of Preterm Birth and the Outcome of Neonatal Admission Focusing on Preterm Birth in 2017 and 2018 at Myungsung Medical Center



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Biography

Aster a pediatrician since 1990, and as a neonatologist since 2014. Currently he is working in myungsung christian medical center (mcm), a korean hospital neonatal intensive care unit, and teaching as associate professor in myungsung medical school.



Abstract

Preterm is a newborn delivered before 37 completed weeks of gestation. Preterm birth globally, is the leading cause of perinatal and neonatal morbidity and mortality. More than 60% of preterm births occur in Africa and South East Asia, but preterm birth is truly a global problem. In the lower income countries, an average, 12% of babies are born too early compared with 9% in higher income countries. Within countries, poorer families are at higher risk. In Ethiopia nearly 3 million babies are born every year and 10% of them are born prematurely or low birth weight. The prevalence of preterm births 84% occurred at 32 to 36 weeks of gestational age, 10% occurred at 28 to 32 weeks and 5% occurred at less than 28 weeks.

In low income countries only 30% of those born at 28 -32 weeks survives, while almost all preterm <28 weeks die within few days of life

70 to 80% of preterm birth occurs spontaneously remaining 20-30% are medically indicated because of maternal and fetal issues.

In mcm NICU from year 2017- 2018 a total of 593 patients was admitted, preterm admission was 235(39.6%) from them 14(5.9%) are extreme preterm below 28 weeks of gestational age and only 5(2.1%) died.

The survival chances of babies born preterm in the resource constraints setting is acceptably low though vary significantly depending on proper prenatal and neonatal care where they are born. In my hospital due to better neonatal ICU extreme preterm <28 weeks survives considered abortion in my country.

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Annual Meeting on Pediatrics and Neonatology, June 26-27, 2020

Citation: Aster Tsegaye, *Review of preterm birth and the outcome of neonatal admission focusing on preterm birth in 2017 and 2018 at Myungsung medical center*, *Pediatrics* 2020, Annual Meeting on Pediatrics and Neonatology, June 26-27, 2020, pp. 01-02.