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Small For Date Babies : Morbidity And Mortality

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Summary.

The neonatal morbidity and mortality in 150 full term small for gestational age babies (study group) was compared to that in 150 full term average for gestational age babies (control group) in the present study.

The operative delivery rate was 22% in study group as compared to 15.3% in control group and caesarean was done more commonly for foetal distress in study group. The early neonatal morbidity was 31.33% in study group comprising mainly of respiratory tract problems as compared to 4.6% in control group. Early neonatal morbidity was 10.6% in study group as compared to 0.1% in control group. The late neonatal morbidity like poor weight gain, respiratory tract infection and diarrhoea was found to be main problems in these babies.

Introduction

The W. H.O. assembly has adopted the standard of 2.5 kg. to define a S.G.A. baby. In developing countries like India, SGA babies stand as a major cause for perinatal mortality and neonatal morbidity which is almost three times higher than the general population.

The present study was undertaken to find out neonatal morbidity and mortality associated with S.G.A. babies in comparison to A.G.A. babies.

Materials and Methods

The present study was carried out in Sassoon General Hospitals, Pune. 150 full term babies with birth weight < 2500 gms were included in study group and babies with weight > 2500 gms were included in control group.

Babies were examined immediately after birth and following factors were noted:

1) Mode of Delivery
2) Birth Weight
   All babies weighed naked immediately after birth.
3) Gestational Age:
   It was calculated from first day of last menstrual period or by ultrasound when available and then confirmed by physical examination of baby using the Dubowitz scoring system.

Babies were followed till discharge and complications such as asphyxia, congenital anomalies, persistent fetal circulation, meconium aspiration syndrome, hypoxic ischaemic encephalopathy, hypothermia, hypocalcemia, hyperviscosity syndrome and infections were noted.

The total hospital stay was noted in days from time of admission till discharge.

All babies were called for follow up after 1 month and each one was examined for gain in weight and recurrent infections (respiratory tract, gastrointestinal tract).