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NEONATAL OUTCOMES OF LARGE-FOR-GESTATIONAL AGE INFANTS DELIVERED BY WOMEN WITH AND WITHOUT GESTATIONAL DIABETES MELLITUS?

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Objective: The objective of the study was to compare the neonatal outcomes of large-for-gestational age (LGA) infants delivered by women with and without gestational diabetes mellitus (GDM).

Methods: This was a retrospective study of LGA singleton infants of ≥ 36 weeks of gestation born at the Gazi University Medical School Hospital between 2006-2009. Neonatal outcomes included hypoglycemia, polycythemia in early neonatal period and hospital admissions. The Chi-square and Student's t-test were used for comparing variables.

Results: Seven hundred eligible infant-mother pairs were included into the study. 87 of them (12.4 %) were infants of diabetic mothers (IDMs) and 613 (87.6 %) were infants of non-IDMs. Incidence of hypoglycemia at the first hour were higher in diabetic group (12.8 %) compared to non-IDMs (5.3 %) ($p=0.014$). Polycythemia were also more frequently observed in IDMs (9.3 %) than non-IDMs (3.0 %) ($p=0.010$). Although overall hospital admission rates weren't different between groups, IDMs were more likely to be admitted due to resistant hypoglycemia ($p=0.045$).

Conclusions: The results of this study suggested that LGA infants of women with GDM were at risk for hypoglycemia and polycythemia in early neonatal period. However, routine care was sufficient for healthy LGA infants from non-diabetic mothers.

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LANGUAGE ASSESSMENT OF NON-HANDICAPPED TWINS

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Background aims: At present, we know very little about whether such language delay should be

seen in healthy non-handicapped children. The present study was designed to evaluate language development of twin children in comparison with singletons after excluding children with overt handicap.

Methods: We performed a prospective study of a large cohort of all children born between 1 January 2001 and 31 December 2003 at Gazi University Hospital. From this sample, we identified all live-born twin pairs of which both twins survived, and also chose a comparable sample of families with singletons. Perinatal data were derived from medical charts. The Stanford-Binet Intelligence Scale Form, the Peabody Picture Vocabulary Test- Revised were completed at 60 months.

Results: The findings showed that twins performed worse than singletons in language development. Twin girls had better scores than twin boys. There was a statistically significant difference between the scores of term and preterm twins. No significant difference has been noted when compared according to birth order. AGA twins did better than SGA twins in the test scores. Twin girls did not differ from singleton girls, but twin boys performed worse than singleton boys, all preterm twins had lower scores than preterm singletons. SGA singletons had better scores than SGA twins, AGA twins and singletons did not differ.

Conclusion: It is hoped that the findings of comparison of language development of non-handicapped twins with singletons could lead a more precise assessment of language development in twins and if needed more efficient preventive interventions in this group.

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FOLLOW-UP FOR NEUROLOGIC DISABILITIES IN VERY LOW WEIGHT NEWBORN CHILDREN ATTENDED IN THIRD CARE LEVEL UNIT

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Aim: Determine most common neurological disabilities in very low weight newborns attended in third care level unit.

Methods: A cohort design study was formed during a third year period, with very low weight newborn children's in alertness for neurological development

categorized by auditory, ophthalmology and neurological disabilities. Clinical evaluations carried out every month in ambulatory pediatric department. Auditory keenness was evaluated by otoacoustic emissions and visual keenness by direct ophthalmologic exam. Auditory capacity categorized patients in three groups, and in same number groups, diopters established visual capacity. Non parametric statistics was used for data analysis.

Results: Fifty four newborn children's were included, we divide in two groups: 32 that needed mechanical ventilation and 22 without them. Average age was 29.60 weeks, with weight average of 1175 +/- 250 gr. Respiratory distress was more important morbidity (60%). From two groups formed, 14 (43.80%) of mechanical ventilation patients presented neurological damage. In this group, 19 (59.4%) appeared with audiologic alterations and 11 (44.40%) present visual disabilities, not statistics difference ($p>0.05$) in these items presented between groups. Neurological disabilities frequency presented more in mechanical ventilation group (14 / 43.80%) with statistical difference ($p=0.005$) compared it with other patients group.

Conclusions: Neurological, auditory and ophthalmological disabilities need opportune attention to send these children's for rehabilitation and educational therapy. Improve the quality of life in very low newborn children's with neurological disabilities it's a health care priority.

Key words: prematurity, neurological development, audition, visual alterations, disabilities

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CLINICAL PICTURE OF PATIENTS HOSPITALIZED IN A CONCENTRATION MEDICAL UNIT FOR INFLUENZA A N1H1 DURING EPIDEMIC OUTBREAK IN MEXICO

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Background and Aim: A new stock of influenza virus in 2009 provoked pandemic state with initiating point in Mexico City. The aim is characterize clinical picture in a group of patients received attention in a Mexican hospital.

Methods: By a serial cases we check files of patients joined for medical attention in a concentration health care unit in México (April-December 2009). All patients had signs and symptoms A N1H1 influenza virus disease complications, divided in general, respiratory high / low, and digestive symptoms, leukocyte count trend, antiviral therapy, and management in critical care pediatric unit in agree with presence or not. Statistical was non parametric.

Results: We included 9 boys and 7 girls, 6.5 years average age. Not contact site detected in 58% and precedent influenza seasonally vaccine in 81.25%. Clinical picture predominance were, fever (100%), cough (100%), pulmonary abnormal sounds (93.70%), headache (87.50%), respiratory distress (81%), coriza and muscular pain (75%), abdominal pain (43.75%). Suddenly beginning in 100% and 87% had been treated before come hospital. In hospital 100% were treated with Oseltamivir and 37.50% need intensive care unit attention. We looked leucopenia trend in 37.50% of cases. Not exist difference ($p>0.05$) between boys and girls in any of variables. Two (12.50%) patients died.

Conclusions. Clinical picture showed complications intensive care meritorious treatment for avoid lethal course. The absence of vaccination in this group reflects the disadvantage conditions that health care systems have in latinamerican countries like México.

Key words. Influenza, epidemic, children, intensive care, viral diseases.

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LONG-TERM FOLLOW-UP OF EX-PRETERM INFANTS - RELATIONSHIP BETWEEN NEUROLOGICAL FINDINGS AND QUALITY OF LIFE (QOL) AT SCHOOL AGE

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Purpose: To correlate long-term follow-up data and QOL of ex-preterm infants with neurological findings and other risk factors for impairment.