



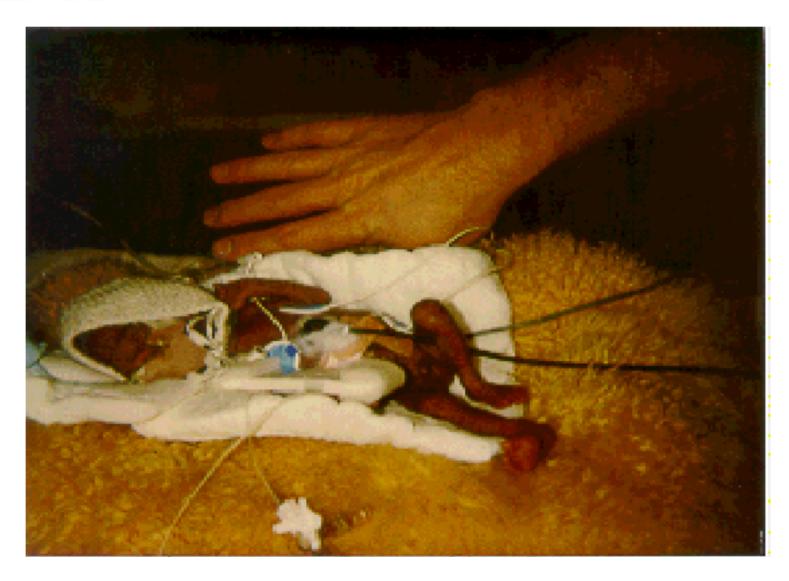
Prematurity

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PREMATURITY

- Below 37 weeks gestational age
- Different degrees of prematurity determine OUTCOME
- Extreme prematurity (<26 weeks gestation)
- Borderline of viability 24 weeks
- Increase in survival rate means an inevitable increase in long-term developmental problems.











Problems of Prematurity

• Respiratory:

- Respiratory Distress Syndrome -Surfactant deficiency.
- Chronic lung disease of prematurity oxygen dependency & imfalmmatroy changes of the lungs persisiting past 28 days or 36 weeks corrected gestation
- Apnoea of Prematurity due to immature brain stem



- Cardiovascular :
- Low circulating blood volume and blood pressure
- Patent Ductus Arteriosus' fetal duct remains open



- Hepatic :
- Jaundice due to immature liver
- Reduced clotting factors
- Reduced metabolism of drugs
- Renal and fluid balance:
- Renal tubule immaturity
- Reduced filtration rate
- Fluid and Electrolyte imbalance



- Immune:
- Low levels of immunoglobulins
- Limited defences
- Metabolic:
- Increased metabolic rate, oxygen and energy demands
- Poor glycogen stores hypoglycaemia is common

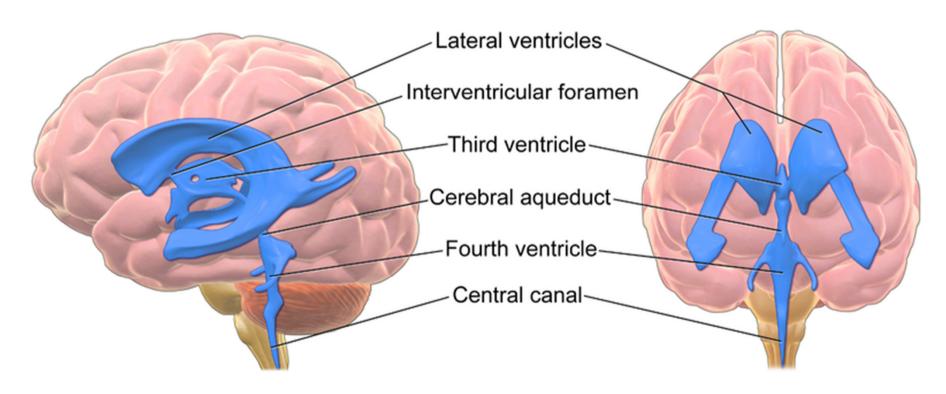


- Haematological:
- Anaemia of Prematurity
- Differences in values
- Nervous system:
- Intraventricular haemorrhage –
 bleeding into the ventricles of the brain
- Periventricular leukomalacia damage to the area around the brain ventricles



Intra ventricular haemorrhage

Ventricles of the Brain



Ventricular System (lateral view)

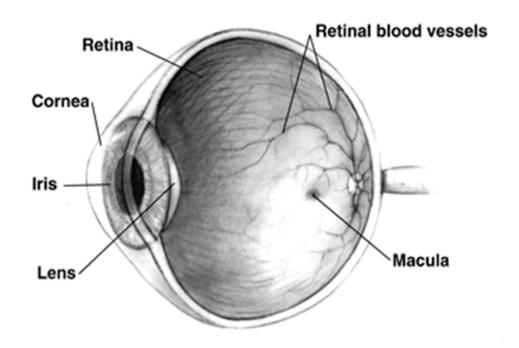
Ventricular System (anterior view)



Sensory deficits—eyes and ears

- Stages of Retinopathy of Prematurity (ROP)
- 1= Demarcation line between retina & nonvascularised area
- 2= Scar tissue seen & new vessels form a ridge
- 3= Ridge (vascular) increases with growth of extra retinal tissue
- 4= Partial retinal detachment
- 5= Full detachment







- Gastro-intestinal-
- Necrotising Enterocolitis an inflammatory disease of the bowel common in extreme prematurity
- Gastro-oesophageal reflux is common
- Delays in enteral feeding
- Weight loss / poor weight gain



- Thermoregulation;
- Immature thermal control
- Limited brown fat stores and inability to perform 'thermogenesis' (heat production)
- Rapid heat loss through the skin



- Skin;
- Thin, immature skin with no or underdeveloped waterproofing layer
- Skin fragile and easily damaged
- Muscle;
- Lack of muscular tone before 34 weeks
- Weak, floppy limbs requiring support



Further Reading

- Chatterjee J, Gullam J, Vatish M and Thornton S (2007) The Management of preterm labour, Archives of disease in Childhood; Fetal and Neonatal edition, 92,2, F88-93
- Hale, R (2007) Monitoring fetal and maternal wellbeing British
 Journal of Midwifery 15, 2, 107-110
- Hollier LM (2005) Preventing Preterm birth what works, what doesn't', Obstetrical and Gynecological Survey, 60, 2, 124- 131
- McGuire W, McEwan and Fowlie PW (2004) ABC of preterm birth:
 Care in the early newborn period, BMJ, 329, 1087-1089
- Tucker J and McGuire W (2004) ABC of Preterm Birth: Epidemiology of preterm birth, *BMJ*, 329, 675-678
- For further detail & more resources go to the online resource.... Unit 3E
- http://www.cetl.org.uk/learning/neonatal/unit 3e/player.html