



ASSESSMENT OF THE HEALTH STATUS OF PROFOUNDLY PREMATURE INFANTS IN INFANCY

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Annotation. Young children are the object of close attention, as they constitute a high-risk group in terms of morbidity and mortality. This scientific article presents the results of assessing the health status of deeply premature infants in the first year of life. It has been found that in the first year of life, profoundly premature children are most often sick with acute respiratory viral infections (up to 8 episodes per year), pneumonia (41% of children), perinatal encephalopathies (59,8%), accompanied by lag in neuropsychiatric (90,4%) and physical development (57%). Retinopathy also occurs in 29% of patients.

Key words: *premature infants, retinopathy, pneumonia.*

Relevance. Infant mortality of children born with a birth weight of less than 1500 g reaches 90%. For children with a birth weight between 1001 and 1500 g (ONMT) it is 85%, and for those with a birth weight of less than 1000 g (ENMT) it is 95%. Only 10% of babies born profoundly premature survive to one year of age. Infants born very prematurely are characterised by a combination of causes of death in the first year of life. In the neonatal period, most children die from respiratory pathology (81.7 per cent), CNS diseases (49.6 per cent) and intrauterine infections (43.4 per cent). The causes of mortality in the post-neonatal period are CNS diseases (96.2 per cent), intrauterine infections (46.2 per cent) and respiratory pathology (24.1 per cent). Congenital pneumonia (51.9%), intracranial haemorrhage (43.0%) and intrauterine infections (31.6%) are the leading causes of death in children with ENMT in the neonatal period. Retinopathy occurs in 45% of infants. This is especially true for babies with a body weight of 1500 g or less (ONMT) and especially for babies with a body weight of less than 1000 g (ENMT). They are prone to the development of diseases and complications that can be fatal for them. They are characterised by impaired health, physical and sexual development in later periods. 40% of survivors have cerebral palsy, hydrocephalus, mental retardation, seizures, behavioural disorders, hearing and visual impairment (retrolental fibroplasia).

Purpose of the study: To determine the main indicators of the health status of profoundly premature infants in the first year of life.

Materials and methods: The work was carried out on the basis of the clinic of the Bukhara State Medical Institute OBMPMcE. The statistical material for 2022-23 years and retrospective analysis of children's medical records was carried out: exchange card of maternity hospital, maternity department of hospital (form 113/u), medical history (form 23/u), history of child development (form 112/u), discharges from hospitals (form 027/u), statistical coupons for registration of final (clarified) diagnoses (form 25-2/u), control card of dispensary observation

(form 030/u). Infant mortality, morbidity and health status of children in the first year of life born with a body weight of less than 1500 grams were studied

Results of the study and their discussion. In the first year of life, according to our data, the morbidity of profoundly premature infants in the neonatal period in 2022 was 920.1, with 598.3 in infants with ENMT and 321.9 in infants with ONMT, which was significantly lower ($p < 0.05$). In 2023, these rates were 870.2, with 365.7 in infants with ENMT and 504.5 in infants with ONMT ($p > 0.05$). The obtained data indicate a slight decrease in the dynamics of morbidity indicators in the neonatal period in profoundly premature infants. The structure of morbidity of profoundly premature babies in the maternity hospital was studied on the example of 2022 (65 children). The first place is occupied by respiratory disorders - in 80.1% of the profoundly premature. The second place is occupied by diseases of perinatal period - 66.86% and among them cerebral disorders are most frequent 44.8%. The third place is occupied by intrauterine infection - 43.5%, jaundice - 40.5%. The fourth place is occupied by FVC-29.8% and metabolic disorders (16.6%).

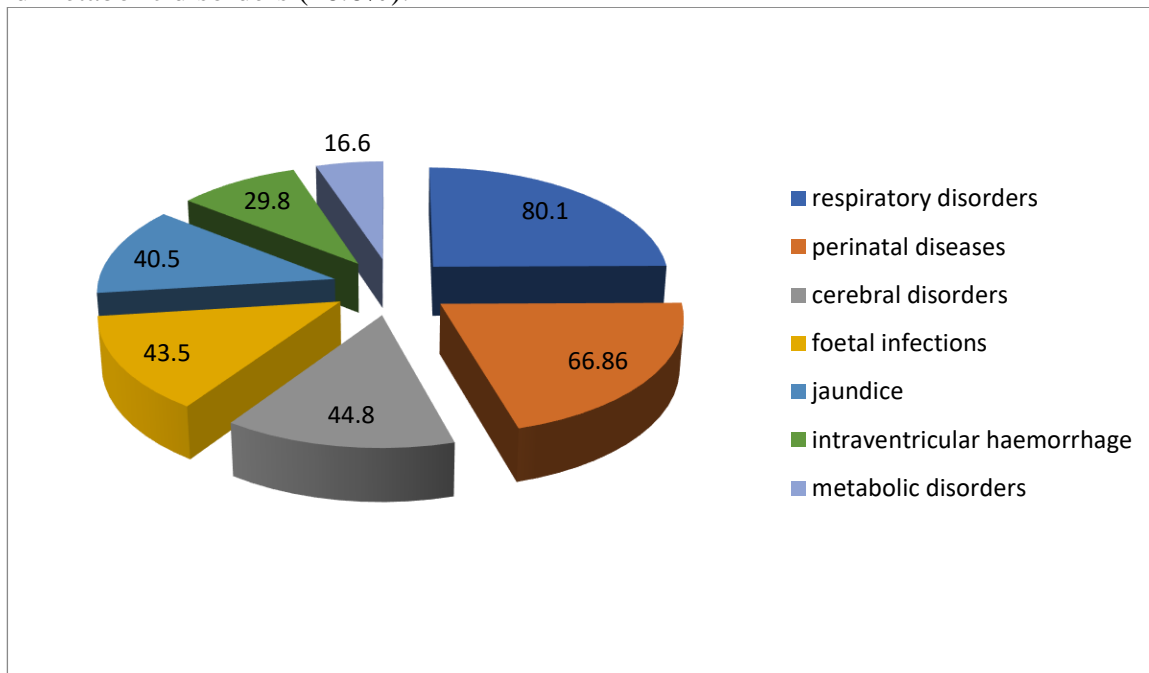


Figure 1: Morbidity of deep premature infants in 2022 in the maternity hospital.

In 2023, the first place among inpatient morbidity was occupied by intrauterine infection (39.3%), followed by SDR and CLL (35.5%), and FVC (24.3%). The fourth place was occupied by hypoxic-ischaemic CNS lesions (20.7%), and the fifth place by pneumonia (19.1%). Among profoundly premature infants who survived to one year of age, 40.7.0% of babies (i.e. every fourth child) had a disability in 2022. In 2023, this figure was 19.1% and decreased to 20% in 2023 ($p < 0.05$). Visual impairment as a cause of disability was recorded in 39.0% of children in 2022 and in 26.4% of children in 2023, reflecting a significant decrease ($p < 0.05$) and indicating an improvement in medical care for children with retinopathy. Mental, language and speech disorders were noted in an average of two years in up to 20.0% of children, motor disorders in 22.0% of survivors up to one year of age. Visceral and metabolic disorders occurred in 1.9% of profoundly premature infants.

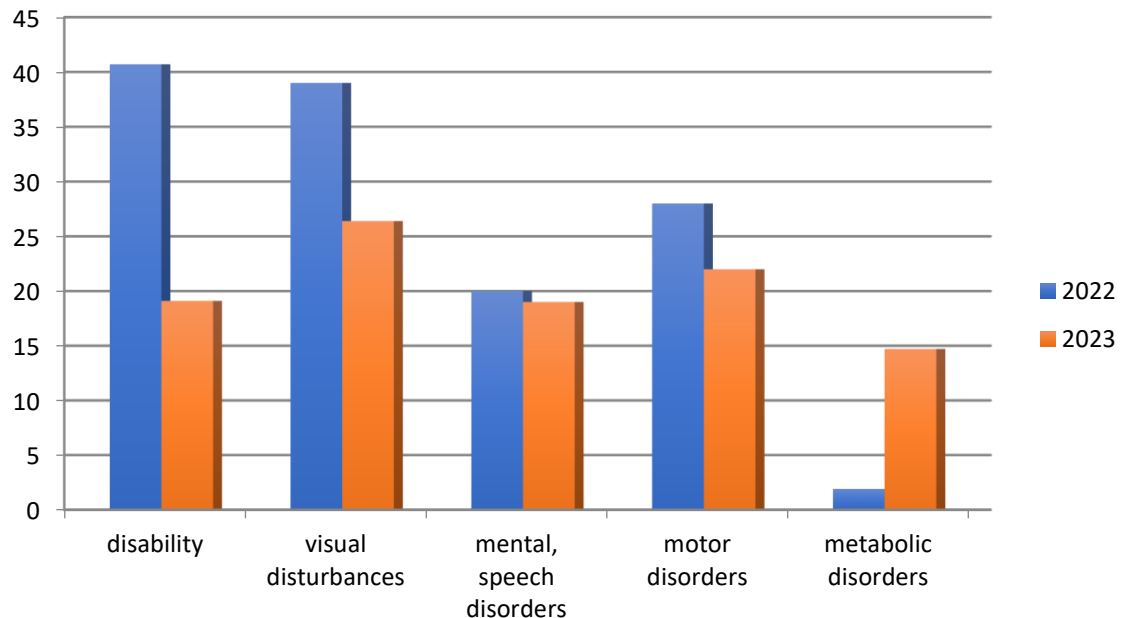


Figure 2: Disability among profoundly premature infants under 1 year of age.

Conclusion. In the first year of life, profoundly premature children are most often ill with acute respiratory infections, they have perinatal encephalopathies accompanied by lagging neuropsychiatric and physical development. In the first year of life there is a significant decrease in visual pathology in control years, leading to disability.

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