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PREVENTION OF RETINOPATHY OF PREMATURE: NEONATAL CARE COULD LEAD TO THE DISAPPEARANCE OF THIS DISEASE?

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Objectives: To observe the incidence of the retinopathy of prematurity (ROP) and its correlation with the clinical risk factors, among premature babies treated in the neonatal unit intensive care of one 3rd level hospital. To recognize predictive factors for ROP those are preventable in neonatal period.

Study Methodology: It was a retrospective cross-sectional observation study of clinical data obtained from the electronic charts of premature babies born between Nov'2014 and Apr'2017. Premature babies with gestational age (GA) ≤ 32 weeks and birth weight (BW) ≤ 1.600 grams, attended at neonatal intensive unit care of the referrer hospital (UTINCHU), during above referred period, with registered ophthalmological evaluation data. And they needed to present a minimum of one ophthalmological exam, during the neonatal UTI period that was included. For those who did not attend, the inclusion factors were excluded. Two groups were formed in statistical study of the clinical variables of risk of ROP: G1 (any stage of ROP) and group G2 (without ROP). The clinical variables were: BW, GA, Apgar, corporal temperature of first hour of life, neonatal infection and oxygen therapy. The exam was made by obeying the established international criteria. The software statistical package for the Social Science version 21.0 statistical program was used and $p < 0.05$ was considered.

Results: 48/168 premature babies were studied: G1 with 21% premature with ROP (GA medium 26.1w and e BW 865,0g), did not have aggressive ROP and above stage three. G2 group were 38 premature without ROP. The GA, BW ($p < 0.01$) and hypothermia ($p = 0.02$) were presented statistical difference wrt ROP (univariate analysis). There wasn't independent factor for the development of the ROP (multivariate analysis), in this study.

Conclusion: The incidence of ROP was still high. The GA, BW and corporal temperature were predictive factors for ROP. The stabilization of corporal temperature in first hour is necessary to consider.

Biography

Ligia Beatriz Bonotto is a Doctor in Surgical Clinic of the Health Sciences Sector from the Federal University of Paraná (2012). She completed her Master's degree in Surgical Clinic of the Health Sciences Sector from the Federal University of Paraná (2003) and has Graduation in Medicine from the Faculty of Medicine of Petrópolis-RJ (1984). Currently is an Ophthalmologist at the Clínica de Oftalmologia e Oftalmopediatria-Ligia Beatriz Bonotto (COOLBB). She is the Ophthalmologist responsible for the screening of Retinopathy of Prematurity of the Neonatal ICU of the Unimed De Joinville-Sc Hospital Center. Her research topics include Retinopathy of Prematurity, Risk Factors, Maternal Factors and Connective-Visual Development of the Premature Child. She is responsible for the creation and maintenance of the Home Page: www.ofthalmopediatria.com.br and Facebook: [f / draligiabeatrizbonotto](https://www.facebook.com/draligiabeatrizbonotto).

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