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Is screening ultrasound central nervous system and abdomen in infants $\geq 35^{\text{th}}$ weeks of pregnancy should be recommended?

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Ultrasonography of newborns born long before term and newborns with extremely low birth weight or other significant pathology has become a gold standard on the neonatal pathology units and NICU. It is rather simple method, non-invasive; they aren't bringing the increased risk for the newborns, and are providing much information about the condition of the patient, the course of disease, the effectiveness of the treatment and further predictions. However, only 10-15 % of children are born below 35-th week of pregnancy and, is being hospitalized on the II and III degree of neonatal care units. It will leave the majority of children left without ultrasound diagnostics, because of very few centers of first degree of neonatal care is conducting that kind of diagnostics apart from very rigorous recommendations, acknowledging that these children are "from the assumption" healthy. Perhaps such an assumption isn't fully correct and many children from so-called physiology of pregnancy are burdened with certain diseases, which could be to recognize and possibly healed, if all children were examined. In this paper, we have studied ultrasound examinations of the central nervous system and the abdominal cavity carried out at children born after 35th week of pregnancy at the Neonatal Unit of the Hospital in Plonsk (first level of neonatal care) in the time period from 01.01.2014 to 02.12.2014. However, examinations didn't have screening character but readings for carrying them out were significantly widened, what had allowed providing with examinations with much larger group of children than average. A 49.1% of children were examined and in 14.63% cases abnormalities of different degree were stated through the ultrasound scan. Counted each abnormality individually changes within CNS slightly predominated over changes in the abdominal cavity (53.8%/45.2%). The majority of changes were requiring only a clinic control (63.89 %); however, serious changes requiring specialist diagnostics and treatment amounted to 36.11%.

Biography

Pawel Galecki has completed his PhD at the age of 25 years from Medical University of Warsaw. He is working at Neonatal Unit of Plonsk Hospital. He also cooperate with Neonatal Pathology Unit of second degree referenced hospital in Ciechanow, Poland. He usually deals with issues in the field of care of infant from physiological pregnancy and childbirth. As the result of the cooperation with the Clinic of Pathology and Intensive Care of the Newborn of Medical University of Warsaw was existence of work on ultrasound in neonatal care of physiological infant.

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