

Preterm Infants: Complications related to gestational age

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Abstract

Each year 15 million babies are born preterm (<37 weeks of gestation (GA)) worldwide and their survival chances vary dramatically around the world. Most premature babies (>80%) are between 32 GA and 37 GA (moderate/late preterm). About 10% of preterm babies are born 28 to <32GA. Survival gap for preterm babies born in high-income countries and babies born in the low-income countries has widened dramatically. Multiple gestations are at increased risk for preterm delivery, intrauterine growth restriction, congenital anomalies and higher incidence of perinatal death. Prematurity is the leading cause of neonatal mortality and morbidity. Over 1 million children die each year due to complications of prematurity. Mortality is inversely proportional to birth weight (BW) and GA. Advances in neonatal intensive care during the last decades has decreased mortality in premature babies but morbidity is still high (at least 20-50%), especially in extreme preterm babies (<28 GA). The major neurodevelopmental morbidities (mental retardation, cerebral palsy, seizure disorders, hydrocephalus, visual or auditory impairment) in extreme preterm infants occur in approximately 20-30% survivors. Neonatal mortality rate for twins is 5 times more than in singletons. Discordant twins are present in 25% twins pregnancy (10x greater than singletons). In discordant small twins (IUGR) mortality is 6 times more than in concordant twins. Incidence of congenital anomalies is significantly related to the level of discordance (IUGR). Systematic team approach and safe and effective transport of high-risk mothers and newborns is an essential component of regional perinatal care and the goal is to provide the required level of specialized care.



Biography:

Brankica Vasiljevic is the Head of Maternity and Child Health Services in NMC Royal Hospital DIP in Dubai, UAE. After completing her MD, she had completed her clinical postgraduate education (Pediatric and after that Neonatology fellowship) and academic postgraduate education (MSc in

Pediatric and Ultrasonography field and PhD in Neonatology field) at Belgrade University School of Medicine in Belgrade, Serbia. She also completed Safety, Quality, Informatics and Leadership Program at Harvard Medical School in Boston, USA. She had won the ESPNIC Educational Grant at 5th World Congress on Pediatric Intensive & Critical Care in Geneva Switzerland (2007). She was a local coordinator for International Neonatal Immunotherapy Study-INIS for Serbia and Montenegro and participated in SIOP 93-01 Study, ITP Study and Twin Birth Study. She has published more than 35 international publications in international indexed journals (100 citations), 5 chapters in various fields of neonatal medicine and has more than 30 presentations in international conferences. She is a Member of Editorial Board of different international journals.

Speaker Publications:

1. "A Randomized Trial of Planned Cesarean or Vaginal Delivery for Twin Pregnancy"
2. Isolation and characterization of four novel Gram-positive bacteria associated with the rhizosphere of two endemorelict plants capable of degrading a broad range of aromatic substrates, Applied Microbiology and Biotechnology, 2011
3. Didehydroroflamycoin (DDHR) pentaene macrolide family from *Streptomyces durmitorensis* MS405(T): Production optimization and antimicrobial activity. Journal of Applied Microbiology 08/2013; DOI:10.1111/jam.12326

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