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Objective:

To evaluate clinical course and prognosis at one year of corrected age of a cohort of 4247 oxygendependent preterm infants cared in our ambulatory KMC program between 2002 and 2012.

Patients and design:

Prospective cohort of 4247 oxygendependent (OD) preterm infants discharged home in kangaroo position (KP) with periodical follow-up until 12 months of corrected age to determine survival, growth, development and morbidity.

Intervention: 1) Continuous KP (skin-to-skin contact 24 hours), 2) Exclusive breastfeeding whenever possible and 3) Early discharge in KP with close monitoring and follow-up (dynamic oxymetry each week up the weaning)

Results:

12564 eligible infants (\leq 37 weeks of gestational age or weight \leq 2000 at birth) were admitted in the ambulatory KMC program during this period, 4247 were discharged home with supplementary use of oxygen. Weight at birth for 41,9% of infants was under 1500g and for 11,7% was under 1000g, 24,5% weighted more than 2000a. 30.7% of patients were less than 30 weeks of GA, 22.3% were less than 32 and even 4,2% were more than 37 weeks of GA. Post-natal age at entry was between 1-15 days for 26,6%, 15-30 days for 30,2% and more than 1 month for 43,2% of them. 65,7% were NICU graduates and 86,1% of them have been ventilated. 40,3% were diagnosed with BPD at entry and 14,4% had intraventricular hemorrhage. 15,0% had history of nosocomial infection at entry. Los of follow up was 15,7% from entry into KMC to one year of corrected age. Overall mortality in the cohort was 1,7% up to one year, with 1,3% of deaths occurring between discharge and 3 months. 32,4% of infants were readmitted at least once. Main causes of readmission before 40 weeks GA were anemia (40,7%) and main cause of readmission before 3 months was acute respiratory infection (70,6%). In average, oxygen was discontinued at 4155 g of weight. 42,9% received exclusive breastfeeding up to term, 24,7% up to three months, and 14,0% up to 6 months. Average weight, length and head circumference were 2874g, 46,5cm, 34.6cm at term and 8587g, 71,5 and 45,6 cm at one year of

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OP17

corrected age; Retinopathy was detected in 9,1%, laser surgery 1,8% and blindness in 0,2%. Mild auditive impairment 2,7% and severe 0,7%. Diagnosis of cerebral palsy at one year was 3,9%. Mean developmental coefficient at 6 months was 97,5 and at 12 months 104 (Griffiths + Bailey test).

| Conclusions. |
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| Our experience shows that weight, over age, is a major indicator of oxygen discontinuation. Weaning |
| in our cohort reached its peak at $3431g$. There is an unacceptable rate of OD in infants > 32 weeks |
| GA that may be explained by inappropriate ventilation practices in NICUs, suboptimal oxygen delivery |
| and factors that need to be further explored in prospective studies. |
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