Neonatal survival of infants less than 2000 grams born at Kenyatta National Hospital.
Were, FN; Mukhwana, BO; Musoke, RN
Date: 2002

Abstract

Background: Survival of patients is regularly used as a measure of the level and appropriateness of medical care provided by institutions. Newborn services have been evaluated in this manner since the 1960s. Though Kenyatta National Hospital has provided neonatal services for over 25 years, no survival data for the low birth weight infants has been published since 1978. Objective: To determine the birthweight specific neonatal survival of infants born weighing less than 2000 grams at Kenyatta National Hospital. Design: A cross sectional survey. Setting: Newborn Unit, Kenyatta National Hospital, Nairobi. Main outcome measure: The proportion of infants surviving the first 28 days of life grouped in the following birthweight categories; below 1000 grams (extremely low birthweight), 1000-1499 grams (very low birthweight) and 1500-1999 grams (low birthweight). Results: The overall neonatal survival of 163 infants born below 2000 grams was 62.6%. None of the 23 infants born less than 1000 grams survived the neonatal period. Bigger infants fared much better with 68% (n=73) of the 1000-1499 and 78% (n=67) of the 1500-1999 gram groups surviving. Survival based on gestational age was also determined. Sixty nine per cent of infants born between 32 and 35 weeks survived while only 27% and 9% of the 28-31 weeks and those less than 28 weeks survived respectively. When the patients were analysed for age at death, it was found that over 28% of the deaths occurred within the first day and by the seventh day, more than 70% had died. Less than 30% of the deaths occurred after the first week. The commonest clinical syndromes seen were infection (41%) and respiratory distress (43%). Conclusion: Neonatal survival rates of low birthweight infants are still much lower than those observed in developed countries as far back as the early 1970's. The big proportion of deaths occurring during the first week, and in particular the first day, is due to lack of neonatal intensive care facilities and inadequate obstetric services.