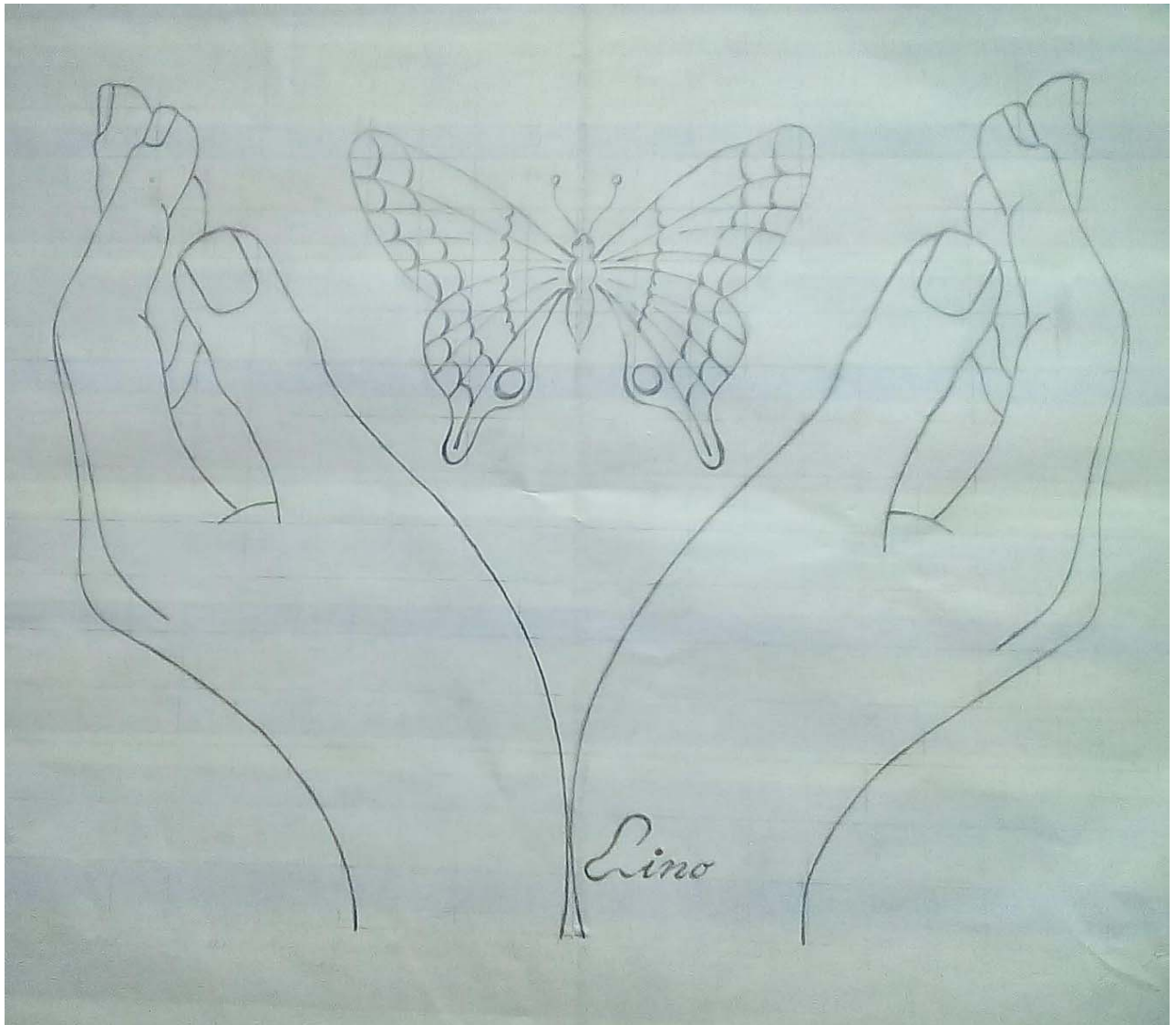


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# Experience in neonatal intensive care: management of premature newborns suffering from respiratory distress

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**KEY-WORDS:** intensive care, premature newborn, respiratory distress, nursing approach.

## ABSTRACT

**AIM:** the aim of our study project is to evaluate the different methodologies of approach to the pre- and post-partum care for expectant patients and their infants, with particular attention to the treatment of newborns with hypoxic complications. **MATERIALS and METHODS:** Our study enrolled 25 pregnant female patients with an average age of 33 years (minimum 29 and maximum 37 years of age), who voluntarily agreed to undergo multiparametric evaluation in the pre- and post-partum phase. The group subjected to the study was characterized by 25 pregnant women who completed their gestation with either vaginal birth (9) or cesarean section (16). In the group subjected to evaluation we found 1 yellow code and 1 red code for severe post-natal hypoxia.

In all women giving birth, age, mode of delivery and week of gestation were assessed. The newborn's weight, week of gestation, APGAR index, venous pH and arterial pH were evaluated before and after neonatal care treatment. All patients were asked for informed consent to carry out the screening procedure and to process their personal data. **RESULTS:** From the analysis of the data relating to the pregnant women, no significant variations emerged in relation to the week of gestation and the type of birth. The analysis carried out in newborns highlighted a variation bordering on statistical significance ( $P = 0.078$ ) regarding the variations in venous and arterial pH. No statistically significant change in the APGAR index was found. The statistically significant variation found in the study is that relating to the newborn's body weight, which is probably attributed to the physiological decline in body weight after birth.

**DISCUSSION:** Recent remarkable improvements in the technical and educational field allowed us to effectively manage the medical and nursing assistance given to women in labour so as to grant non statistically significant variations in the main parameters for the evaluation of clinical conditions in

newborns (APGAR, venous ph and arterial ph). The reduction in body weight, although significant, is due to the physiological weight loss that occurs during the first days of life. The data gathered in our research are a litmus paper for the highlighting of the improvements obtained in the neonatal healthcare assistance.

**Conclusions:** Our study allowed us to highlight the absence of statistically significant variations in the main parameters (APGAR, venous ph and arterial ph) used in the evaluation of the clinical conditions of newborns. A larger sample size could lead to the identification of further parameters to introduce in the evaluation so as to ensure a higher level of clinical safety during the post partum examination.

**Limitation of the study:** Currently the size of the sample under examination is not sufficient to carry out a reliable evaluation that can be extended to the entire population.

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