

Complications associated with preterm birth

Short Term issues:

Breathing problems: A premature baby has an immature respiratory system. Depending upon the gestation, baby may lack surfactant — a substance that allows the lungs to expand. Baby may need that to breathe well and may also need some form of respiratory support.

Gastrointestinal problems: Premature infants have immature gastrointestinal systems. They need to be fed slowly. These babies are at risk for intestinal perforation and necrotizing enterocolitis (NEC). These conditions might require surgery. Breast milk fed babies have a much lower risk of developing NEC.

Heart problems: When babies are inside mom's womb they have patent ductus arteriosus (PDA). PDA is a persistent opening between the aorta and pulmonary artery. PDA is usually managed conservatively but some might need surgery. Premature babies are at risk for low blood pressure that may need medicines and sometimes blood transfusions.

Blood problems: Premature babies need to have blood draws to monitor glucose, electrolytes and blood gases. The lost volume sometime needs replacement with blood transfusions. Premature babies are also more likely to develop jaundice (yellow discoloration), which is treated with phototherapy (blue lights).

Brain problems: The earlier a baby is born, the greater the risk of bleeding in the brain, known as an intraventricular hemorrhage (IVH). Most IVH are mild and resolve with little impact. But some babies may have larger brain bleeding that may cause brain injury.

Skin: Premature babies have a very thin and delicate skin that may get damaged with handling, placing tapes and needles.

Eyes: Premature babies retina is immature and may develop retinopathy of prematurity (ROP). ROP causes abnormal blood vessels to grow in retina. ROP is divided into Stages and Zones. A close follow up with an ophthalmologist is needed to prevent the complications of ROP. A severe ROP may lead to blindness.

Infection: Premature babies are at higher risk for infection due to immaturity of their immunity system. They need to be watched closely with prompt institution of antibiotics.

Predicted Outcome per NICHD

www1.nichd.nih.gov
(approximates, see disclaimer)

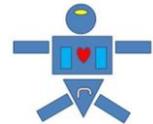
Estimated Fetal Weight: _____ grams
Gestational age: _____ weeks
Gender: _____ Male / Female
Number of Fetus (es) : _____ Single/ Multiples
Antenatal Steroids: _____ Yes / No
Survival : _____ %

Survival without Profound Neuro-
developmental impairment: _____ %

Long-Term issues:

Developmental Issues

Cerebral palsy
Behavioral Problems



Hearing and Visual problems

May need Hearing aid / Glasses

Respiratory problems

May need home oxygen / medications

Follow your Obstetrician's (OB) and
Maternal-Fetal-Medicine (MFM) specialist's
advice. Feel free to ask questions.

***This is NOT a legal document. It is an
informational and education resource.***