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Risk factors for intraventricular hemorrhage in very low birth weight infant

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Abstract:

Objective: The purpose of this study was to determine the risk factors which predispose to the development of high grade IVH (grade 3 and 4) in very low birth weight infants. **Material & Methods:** In a retrospective case control clinical study files of all premature infants with birth weights less than 1500 grams admitted between April 2004 and Oct 2005 to the neonatal intensive care unit of Akbar Abadi hospital in Tehran were reviewed. 39 infants with IVH grade 3 and 4 were identified. A control group of 82 VLBW infants matched for gestational age and birth weight were selected. Prenatal data, delivery characteristics, neonatal course data and reports of cranial ultrasonography were carefully collected for both groups. Those variables that achieved significance ($p < 0.05$) in univariate analysis entered to multivariate logistic regression analysis. **Findings:** A total of 325 VLBW infants were evaluated. Mortality rate was 21.5%. Of the remaining the incidence of high grade IVH was 15.5%. Multivariate logistic analysis showed that following factors are associated with greater risk of high grade IVH occurrence: Low gestational age (OR: 3.72; 95% CI: 1.65-8.38), low birth weight (OR: 3.42; 95% CI: 1.65-8.38), low Apgar score at 5 minute (OR: 1.58; 95% CI: 1.59-6.32), hyaline membrane disease (HMD, OR: 3.16; 95% CI: 1.42-7.45) and maternal tocolytic therapy with magnesium sulfate (OR: 4.40; 95% CI: 1.10-24.5). **Conclusion:** Our results showed that maternal tocolytic therapy, mechanical ventilation, low gestational age, low birth weight, apnea, and low 5 minute Apgar score increased the risk of major IVH.

Keywords:

[Intraventricular hemorrhage](#) . [Cranial ultrasonography](#) . [Tocolytic therapy](#) . [Hyaline membrane disease](#)

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