

INCIDENCE AND RISK FACTORS FOR RETINOPATHY OF PREMATURITY IN A TERTIARY CARE NEONATAL UNIT

VIJAYALAXMI GAGANDEEP¹ & ARUN. P²

¹Assistant Professor, Neonatal Intensive Care Unit, Department of Paediatric, Bowring and Lady Courzon Hospital, Bangalore Medical College and Research Institute, Bangalore, Karnataka, India

²Research Scholar, Neonatal Intensive Care Unit, Department of Paediatric, Bowring and Lady Courzon Hospital, Bangalore Medical College and Research Institute, Bangalore, Karnataka, India

ABSTRACT

Background

Retinopathy of prematurity (ROP) is a serious condition affecting the retina of premature infants and is a major cause of blindness and visual morbidity in survivors.

Objective

The objective of the study was to find out the incidence of ROP in premature infants in the Neonatal Intensive Care Unit (NICU), to identify the risk factors which causes ROP, and to assess the outcome of these cases.

Materials and Methods

A ROP screening was performed enrolling all premature babies admitted to the NICU from February 2014 to January 2015, with a gestational age of 32 weeks or less at birth and a birth weight of 1500 g or less. Infants with gestational age of more than 32 weeks or birth weight of more than 1500 g were included in the study if they were exposed to oxygen therapy for more than 7 days. A total of 194 infants were screened by indirect ophthalmoscopy within fourth week of life and followed up later. Perinatal risk factors for ROP were assessed and infants who had stage 3 ROP were undergone laser therapy.

Conclusions

The incidence of ROP in this study was 17 %; prematurity, low birth weight, respiratory distress syndrome and duration of oxygen therapy were significant risk factors for ROP. Laser was effective in treatment and decreasing the progression of ROP. As this is a unit-based study, a comprehensive country wide survey on ROP in India is recommended to determine any regional differences in disease incidence.

KEYWORDS : *Retinopathy of Prematurity, Oxygen Therapy, Prematurity*

Received: Apr 10, 2017; **Accepted:** Apr 30, 2017; **Published:** May 07, 2017; **Paper Id.:** TJPRC:IJGPMJUN20174