

commencement of Kaftrio® are unavailable on our patients therefore a case control comparison is not possible. Also, 'stockpiling' of medication may occur (patient obtains medication but does not take) and compliance may be lower than reported.

PP-084 NEONATAL FACTORS IN TERM BABIES ADMITTED TO NEONATAL INTENSIVE CARE UNIT (NICU) VERSUS NON-NICU IN INDONESIA: A RETROSPECTIVE ANALYSIS

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Aim Neonatal intensive care unit (NICU) admission is commonly associated with prematurity in which increased morbidity and mortality are more frequent, it therefore remains rare for NICU admission among term neonates in clinical settings. This study therefore aims to investigate the potential neonatal characteristics of term neonates contributing to NICU admission.

Material and Method This retrospective study was conducted by reviewing the medical records of all the live births born to women who gave birth at the Kosambi Mother and Children Centre and Harapan Kita National Hospital between 2019 and 2022. Cases with preterm delivery, preexisting diabetes and hypertension were excluded. Study case group was neonates admitted to NICU and thus those not admitted to NICU was included in the control group.

Abstract PP-084 Table 1 Neonatal characteristics by NICU admission

Variables	NICU admission (N = 8)	Not admitted to NICU (N = 1951)
Maternal Characteristics		
<i>Type of delivery</i>		
Spontaneous vaginal delivery	0 (0)	818 (41.9)
Assisted vaginal delivery	0 (0)	4 (0.2)
Caesarean section	8 (8)	1125 (57.7)
<i>Type of conception</i>		
Spontaneous	8 (100)	177/192 (92.2)
IVF	0 (0)	96 (4.9)
Ovulation drugs	0 (0)	5 (0.3)
Maternal Smoking	0 (0)	16 (0.8)
Gestational DM	1 (12.5)	11 (0.6)
Gestational HT	0 (0)	22 (1.1)
Neonatal Characteristics		
Birth Weight (g)	2575.33 ± 774.93*	3141.38 ± 403.56
Head Circumference (cm)	32.87 ± 3.06	33.64 ± 2.46
Male/Female	767/1519	71/142
Neonatal sepsis	1 (12.5) *	0 (0)
Respiratory distress syndrome	8 (100) *	0 (0)
Mode of delivery	8 (100) *	1130 (71%)
Caesarean Section	0 (0)	814 (41.7%)
Spontaneous		

Data is presented as n(%) or mean ± SD. Asterisk symbol (*) represents significant difference between groups (p<0.05).

Results Between 2019 and 2022 and 1959 deliveries of term neonates were recorded, in which 8 of them were admitted to NICU. Compared to control, there were higher proportions of NICU admitted neonates care to be reported with respiratory distress syndrome (8/8 vs 0/1951), neonatal sepsis (1/8 vs 0/1951), and those with a history of caesarean section delivery (8/8). NICU-admitted neonates also significantly had a lower birth weight than control (2575.33 ± 774.93 vs 3141.38 ± 403.56) (table 1).

Conclusions The clinical presentations of term neonates who received NICU care were associated with lower neonatal birth weight, respiratory distress syndrome, neonatal sepsis, and history of surgical delivery. Perinatal care to reduce the risk of these morbidities should be addressed to prevent the associated harm.

PP-085 PREMATURE RETINOPATHY-CERRAHPASA EXPERIENCE

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Aim Premature retinopathy (ROP), one of the significant and preventable causes of childhood blindness, occurs due to abnormal proliferation of retinal blood vessels in premature babies. The most important risk factors are low birth weight and prematurity. In Turkey, babies that are born before 34 weeks or have birth weight less than 1700 grams are screened. In this study, we compared the stages and frequency of ROP in Neonatal Intensive Care Unit (NICU) of Istanbul University - Cerrahpasa with the Istanbul University-Cerrahpasa Ophthalmology Department, which is a ROP center.

Material and Method Data from 162 NICU patients, admitted from April 2021 through November 2023, that are born before 34. gestational weeks, were reviewed. Additionally, data from 1539 patients who presented to the IUC-Department of Ophthalmology ROP clinic were also retrospectively examined.

Results Among the 162 patients we followed up in the NICU, minimum stage 1 ROP was detected in 18 (11.1%) of them. In 14 of the ROP patients, the stage regressed spontaneously, while 2 (1%) patients received anti-VEGF (vascular endothelial growth factor) treatment, and 2 (1%) patients received laser photocoagulation treatment. Among the patients who presented to the ROP clinic, minimum stage 1 ROP was detected in 250 (16%) patients. Anti-VEGF treatment was given to 45 patients (18%), and laser photocoagulation treatment was applied to 37 patients (14.8%).

Conclusions With the advancements in Neonatology, low birth weight and small gestational age, which are unmodifiable risk factors for ROP development, are more common. Avoiding unnecessary oxygen therapy in the follow-up of premature infants who have poorly developed respiratory systems in the NICU is crucial for ROP. Maintaining target oxygen saturation levels between 90–94 in patients receiving respiratory support plays a significant role in reducing the frequency of ROP.