Wellington Regional Neonatal Intensive Care Unit



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Data on Wellington NICU 23-24 week gestation infants 2019-2020

General Approach

- Counsel parents with option to not treat if they don't want to
- Majority of parents want to initially resuscitate, counsel about move to palliate if signs of poor prognosis
- Usually ventilate first 3 days for haemodynamic stability
- POCUS to look at haemodynamics and structure of heart, indomethacin
- Frequently ventilate longer (may be day 9-10 before first try off)
- Very rarely use HFV, but do as rescue
- Do use UAC/UVC in all 23 -24 week gestation infants

23 – 25 week gestation infants 2015-20

| Gestation | Number | Survival to discharge (%) |
|-----------|----------------|---------------------------|
| 22 | 5 | 60% |
| 23 | 32 | 65% |
| 24 | 45 (4 outborn) | 66% |
| 25 | 51 | 86% |

Method of delivery

| Gestation | NVD | CS |
|-----------|---------------|----|
| 23 | 19 (4 breech) | 4 |
| 24 | 27 (3 breech) | 28 |

Head Ultrasound findings

| IVH grade | 23/40 | 24/40 |
|------------|---------------|-------|
| Normal | 38% | 41.6% |
| Grade 1-2 | 33% | 39% |
| Grade 3-4 | 29% (2/7 WoC) | 19.4 |
| Cystic PVL | 11% (1/3 WoC) | 2.7% |

ROP requiring treatment

| Gestation | Laser tx | Avastin |
|-----------|----------|---------|
| 23/40 | 4 (19%) | 0 |
| 24/40 | 0 | 1 (3%) |

NEC/perforation

| Gestation | percentage |
|-----------|--------------|
| 23 | 5/32 |
| 24 | 7/45 (15.6%) |

Chronic lung disease and length of stay

- Many infants discharged to peripheral level 2 units prior to 36/40s gestation but estimate all (or near all) would be on LF O2 or more significant support still at 36/40s
- Average (local) discharge 42-45 weeks gestation (2 extended), lung disease main factor extending admission
- Contributing factors to severe lung disease
 - Infection (VAP) klebsiella/staph aureus/pseudomonas
 - Pulmonary haemorrhage
 - Gut complications leading to prolonged ventilation
 - Severe IUGR

Long term outcomes 23/40s

- Data on 15 of 21 survivors:
 - 7 Normal
 - 2 mild delays
 - 1 autistic
 - 1 mod isolated language delay
 - 1 more sig language delay
 - 2 mod-severe global delays (est 1.5 years delay at age 4, 1 with CP)

Long term outcomes 24/40s

- Of 45, 30 survived
- Significant number are from peripheral units, 2 went to Finland
- From 12 with accessible outcome notes
 - 9 normal
 - 1 low average on Bailey testing
 - 1 mod delay
 - 1 autistic (but at age 3 could recite word for word any page on any Hairy McCleary book) - fhx

Ongoing focuses for improvement

- Optimising golden hour process including maintaining normothermia
- Infection reduction incl CLABSI
- Respiratory optimization and avoiding VAP
- Cerebral circulation
- Nutrition
- Electrolyte stability......

