

# Respiratory Morbidity in Late Preterm

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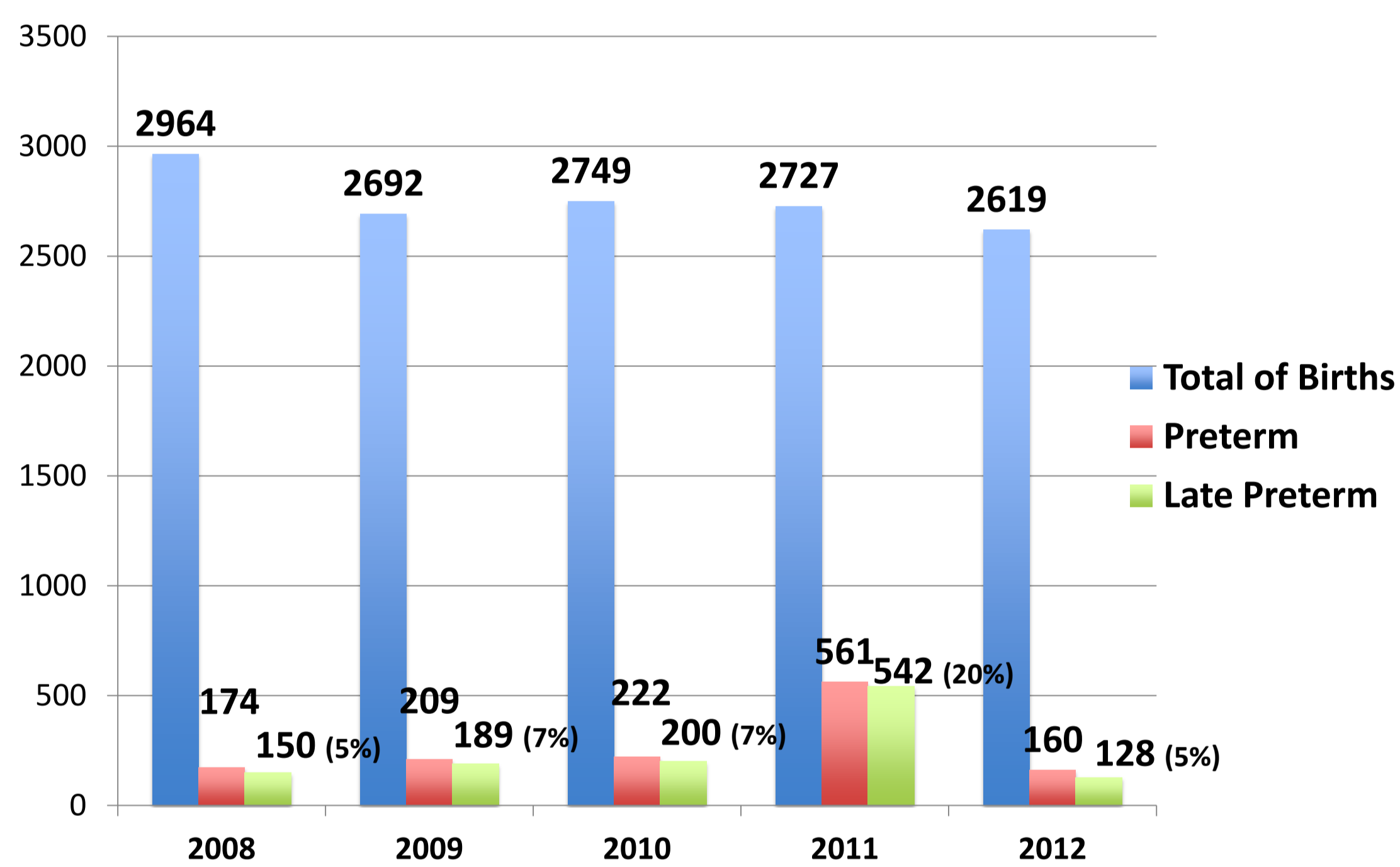
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**Introduction:** Late preterm infants (LPT) are born at a gestacional age between 34 and 36 weeks. They have greater vulnerability and morbidity compared with term newborn, particularly respiratory pathology.

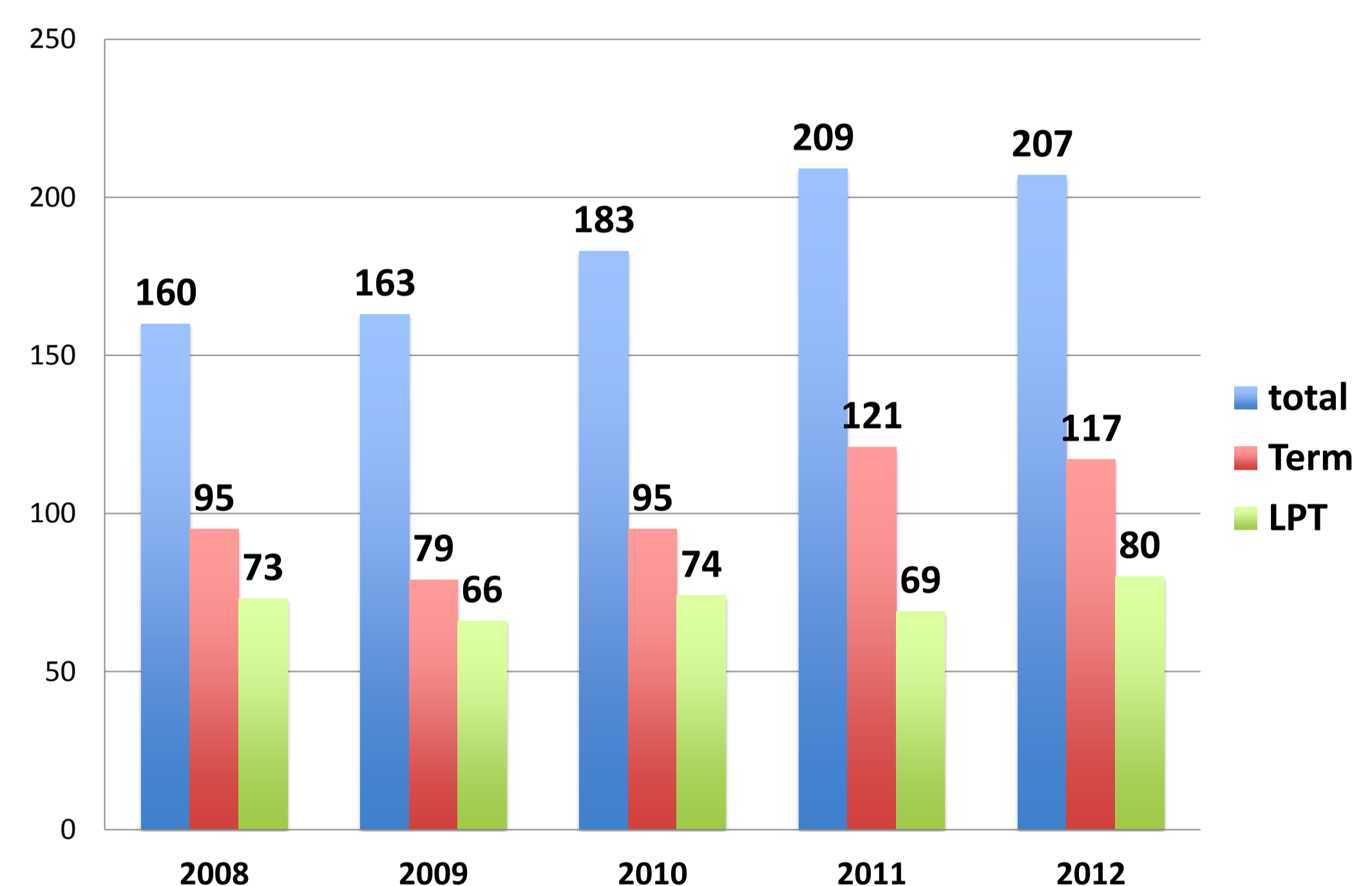
**Objective:** Evaluate the respiratory morbidity of late preterm infants in hospital Cuf Descobertas (HCD) between 2008 and 2012.

**Methods:** Review of all medical records of late preterm births, analysing particularly the respiratory complications requiring hospitalization to the Special Care Unit.

**Late Preterm Number**



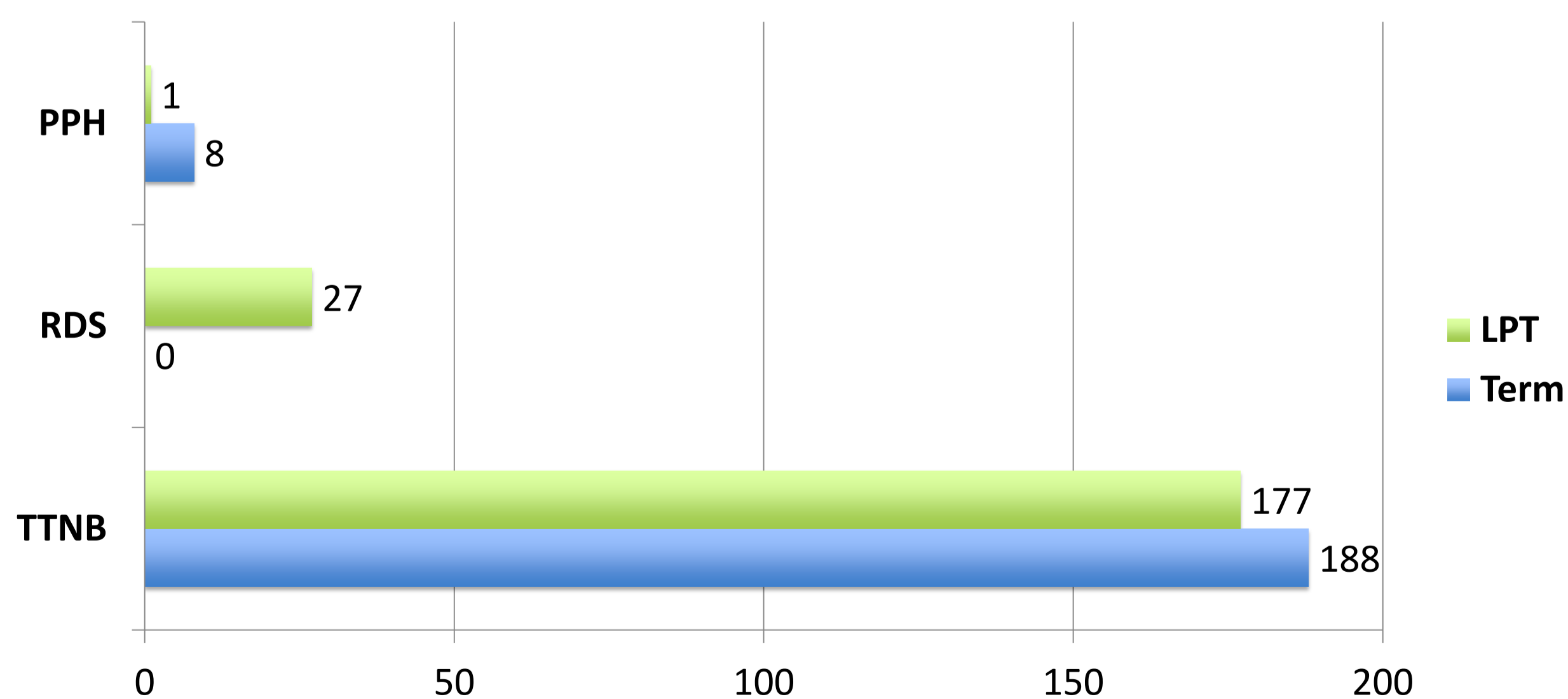
**Admissions**



Births	Total of Births	Late Preterm	Preterm	LPT/Preterm
Total	13719	1209 (8,8%)	1326 (9,7%)	91,2%

Hospitalization	Number	%	Days
Term	494/11184	4,4%	1422
Late Preterm	375/1209	31%	2075

**Respiratory Morbidity**



Ventilation	CPAP	Mechanical ventilation
Term (N=494)	19(3,8%) infants (30 days)	19 (3,8%) infants (49 days)
Late Preterm (N=375)	63 (17%) infants (96 days)	18 (4,8%) infants (72 days)

PPH - Persistent pulmonary Hypertension  
 RDS - Respiratory distress syndrome  
 TTNB - Transient Tachypnea of Newborn

**Conclusion:** Late preterm had higher morbidity than term infants. They were hospitalized in 31% of cases compared to 8,5% of all newborns. On admission, respiratory disease was the most prevalent, in 42% of cases. The disease was severe enough requiring ventilatory support in 22% of hospitalized LPT. One had a neuromuscular disease and died.

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