

QUALITY OF LIFE OF PRETERM INFANTS WITH PERINATAL HYPOXIC-ISCHEMIC CENTRAL NERVOUS SYSTEM INJURY

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Background. According to many authors, perinatal brain damage in children accounts for a significant proportion of morbidity, neonatal and early childhood mortality and disability. At birth, the brain of a newborn, especially with low birth weight, is most susceptible to damaging factors of the perinatal period (hypoxia, asphyxia, pathology of childbirth, traumatic birth), and 40 to 80% of preterm infants have neurological complications. Clinical syndromes associated with perinatal hypoxia that develop after the newborn period include cerebral palsy, mental retardation, attention deficit hyperactivity disorder, visual and auditory analyzers, and speech disorders.

In most cases, the causes of neurological disorders in premature infants are periventricular leukomalacia, intraventricular hemorrhage, and hydrocephalus, which contribute to the development of cerebral palsy. The severity of possible neurological consequences and a high percentage of permanent disability in preterm infants determine the need to identify risk factors for the development of severe neurological pathology in perinatal hypoxic-ischemic central nervous system damage. Allocation of children to risk groups for the formation of cerebral palsy, hydrocephalus and epilepsy, determination of their prognosis will help to resolve the issue of a differentiated approach to the appointment of methods and timing of examination of infants with low gestational age and the development of therapy tactics in each case with an assessment of its effectiveness. According to the results of many studies, the effectiveness of therapeutic intervention can be assessed by the quality of life of such children, for which purpose the author's own methodology for assessing the quality of life of the examined children with neurological pathology was developed.

The purpose of the study is research and evaluation of the quality of life of preterm infants with perinatal hypoxic-ischemic central nervous system damage.

Materials and methods. The work was carried out at the clinic of the Ukrainian Research Institute of Prosthetics, Prosthetic Engineering and Rehabilitation and at the City Children's Neurosurgical Center. The study was retrospective and prospective. Children of early childhood and preschool age with perinatal hypoxic-ischemic central nervous system damage, born prematurely, were examined. The author's methodology was used to assess the quality of life of the examined children with neurological pathology. The developed methodology allows to determine the quality of life of a child with neurological pathology by evaluating a block of indicators characterizing various aspects of life and health of a child using the formula of normalization relative to one.

Results. According to the results of the quality of life of children of early childhood and preschool age with cerebral palsy, it can be noted that the quality of life of such patients with spastic diplegia ranged from low to optimal, and with hemiplegic form, on the contrary, was optimal. The diagnosis of double hemiplegia corresponded to an unsatisfactory quality of life.

Conclusions. The influence of perinatal hypoxic-ischemic central nervous system damage on the quality of life was determined, which was confirmed by a significant proportion of children with low and unsatisfactory quality of life.