ken his/her life with chaos and suffer. The long —term effects of such situation cause the infant to appear motor, sensorial and other developmental problems. "Individualized Developmental Care" which involves communication with the infant, assessment of the infant and planning the care of the infant forms the key of the success in NICU. The approach of Individualized Developmental Care needs the continual and harmonious working of not only the nurses but also all the members of the medical team. Our basic goal in NICU is to provide the behavioral and developmental organization of newborn and gradually make the care given less required, and to transfer such task to the owners having the rigts mostly that is to say to the parents.

L113

MATERNAL MORTALITY IN MULTIPLE PREGNANCY

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The combination of physiological changes and perinatal pathologies certainly increase the maternal risk for serious morbidity associated with multiple pregnancies. A recent review cited mortality cases attributed to beta-mimetic tocolysis, 1:6 deaths from eclampsia, and delivery-related mortality attributed to blood loss.

In France, the maternal mortality was 10.2 vs. 4.4. per 100,000 live birth in multiples vs. singletons, and for the entire Europe, the corresponding figures were 14.9 vs. 5.2.

In a database from Latin America the adjusted relative risks for pre-eclamptic toxemia, eclampsia, preterm labor, anemia, post-partum hemorrhage, and endometritis were 2.2, 3, 3.9, 1.8, 2, and 1.8, respectively. These risks were mainly associated with nulliparity, but the risk of death for the multipara was twice in a multiple pregnancy than in a singleton gestation.

Admittedly, the true incidence of maternal mortality in multiple pregnancies is unknown, merely because death is registered by the prime cause (e.g., eclampsia) but not attributed to what increased the risk for eclampsia (i.e., a twin pregnancy). With the increasing numbers of multiple births, it is important to register all mortalities by plurality in order to realize the risk of maternal death in multiple pregnancies.

L115

MATERNAL MORTALITY IN TURKEY

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All maternal deaths are considered as a social injustice. For this reason, governments should take necessary measures to make motherhood safer. In order to prevent premature deaths of women, causes of deaths must be known. In Turkey, the latest survey conducted in hospitals in selected 53 provinces. This hospital-based survey revealed that maternal mortalities make up 5% of all women deaths and maternal mortality is 49.2 per hundred thousand live births. Factors which are related with the status of women including, education, socio-economic conditions, early marriage age, and fertility level have influence maternal mortality level in the community. Accessibility and availability of maternal health care services are also very important factor to reduce maternal mortality.