

ted materials NRP Textbooks, Neonatal Transport guidelines and curriculum on common neonatal problems management (either translated or original) were produced and disseminated. Printed materials for women education education (signs of danger, feeding of the pregnant women, importance of medical supervision) was also worked out and disseminate.

**RESULTS.** Comparison of the amount of the survived patients after the resuscitation, rate of CNS and other complications in patients transferred in NICU, rate severe forms of bacterial infection, hypothermia were less in Trained maternity houses. The best dates were in maternity houses where the almost whole staff were trained. Even the implementation of new model is a difficult process but it proved the effectiveness comparing the statistical data. We conclude that implementation of the neonatal resuscitation in a complex with improvement of pregnant women care, medical supervision and women education will contribute reduction of the level of early neonatal mortality

## FCP10

### **CASE REPORT: NEONATAL MENINGITIS IN TRIPLETS OF A MULTIPLE PREGNANCY COMPLICATED BY URINARY TRACT INFECTION**

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**Aim:** Urinary tract infections are relatively common in pregnancy and may result in significant morbidity for the pregnant mother and fetus. Here we report a pregnant women with multiple gestations complicated by urinary tract infection (UTI) and effects of UTI on prognosis of pregnancy outcome.

**Case:** A 26 year-old mother with multiple gestations delivered triplets by cesarian section. The gestational ages of babies were 34 weeks and their birth weights were greater than 2000 gram. They were admitted to the neonatal care unit due to minimal tachypnea which was improved in the first few hours. At the third day of admission, symptoms of sepsis were observed in the third baby and by one by, clinical findings of other babies got worse. Meningitis was diagnosed in all of the three babies and two of them developed hydrocephalus later on. All three were externalized, unfortunately only second baby had no sequelae. At the time of occurrence of first symptoms of early sepsis in third baby, evaluation of mother showed untreated UTI with Gram (-) bacteria.

**Conclusion:** This case underscore the importance of antepartum urine screening to identify patients with UTI and treatment of maternal UTI by prenatal care providers.

## FCP11

### **PROTOCOL FOR MONITORING OF NEWBORNS WITH INTRAUTERINE GROWTH RESTRICTION (IUGR)**

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Intrauterine growth restriction (hereinafter: IUGR) is a foetal suffering which is clinically manifested in low antropometric parameters and typical problems after birth. The study group consisted of the newborns with IUGR born in Gynaecological and Obstetric Clinic in Tuzla in 2001. The control group consisted of the newborns with IUGR born in 1990 and 1994. This means that the study included three different socio-economic periods. The objective was to determine the incidence, morbidity and present the protocol for monitoring children with IUGR. The incidence of IUGR is 4,80 %, which is by far lower than the two previous periods. The authors emphasize that the share of pre-term newborns in the study group was reduced by one half compared to the two previous periods. The most frequent problems of newborns with IUGR are perinatal asphyxia (47%), thermal instability (38,70%), while metabolic and respiratory disorders are present in almost the same percentage (37,78%). The authors came to the conclusion that the existence of a protocol for monitoring of newborns with IUGR is the best method of early discovery of health problems and their timely treatment.