Follow-up of Very Low Birth Weight Infants and Infants with Fetal Alcohol Syndrome

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**Background.** The neurological complication and delay of development occur in 15-52% of preterm infants and in infants with fetal alcohol syndrome (FAS). **Objective** of study was a comparison of development from birth to 24 month in VLBW infants and children with FAS. **Methods.** The developmental assessment was performed in 60 VLBW infants and in 21 children with FAS. There were used Albert scale (gross motor) and KID - RSDI scale (cognitive, fine motor, speech and language, social and adaptive development). All infants have been include to early interventional program. **Results.** The comorbidity of VLBW were following: retinopathy of newbon (10%); neurosensory deafness (3,3%), bronchopulmonary dysplasia (5%), congenital heart diseases (12,5%). The medical problems of FAS were intrauterine growth retardation (42,8%, p<0,05), premature VLBW (28%, p<0,05), congenital cataract (9,5%), congenital heart diseases (19%). There was significant delay of motor development (-2 mo) in VLBI (45%) compare in infants FAS (19%, p=0,03). The delay of cognitive development were in 45% of VLBW and in 52,3% infants with FAS on the first year. Mean cognitive delay in VLBW was 3,1 mo; in infants with FAS – 3,9 mo (p>0,05) at the first year of life, at the second year - 3,3 mo and 5,6 mo respectively (p<0,05).

**Conclusions.** About half children of both category - very low birth infants and infants with fetal alcohol syndrome - has cognitive developmental delay on the first year of life. The delay of motor development on the first year of life predominates in very low birth weight infants, the cognitive delay of development on the second years predominates in children with fetal alcohol syndrome.