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A study on the neurodevelopment outcomes of late preterm infants

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Introduction: The study is intended to fill the knowledge gap about the neuropsychology and neuro motor developmental outcomes and identify the perinatal risk factors for late preterm infants (LPIs 34~36 weeks GA) born with uncomplicated vaginal birth at the age of 24 to 30 months.

Methods: The parents/guardians of 102 LPIs and 153 term infants, from 14 community health centers participated in this study. The Modified Checklist for Autism in Toddlers (M-CHAT) questionnaire, the Chinese version of Gesell Development Diagnosis Scale (GDDS) and the Sensory Integration Schedule (SIS), a neurological examination for motor disorders (MD) were carried out. Infants screening positive to the M-CHAT were referred to specialist autism clinics.

Results: 46 LPIs (45.1%) scored low in GDDS. 9 LPIs (8.8%) scored positive on M-Chat. 8.8% of LPIs (9 out of 102) were diagnosed MD (p<0.05). LPIs had statistically lower scores in GDDS and the Child Sensory Integration Checklist. LPIs that had positive results on M-CHAT showed unbalanced abilities in every part of GDDS. Risk factors of twin pregnancies, pregnancy induced hypertension and premature rupture of membranes had negative correlation with GDDS (all p<0.05). Birth weight and gestational age were positively correlated with GDDS.

Conclusions: LPIs shall be given special attention as compared to normal deliveries, as they are at increased risk of neurodevelopment impairment, despite being born with no major problems. Some perinatal factors such as twin pregnancies and pregnancy induced hypertension etc. have negative effects on their neurodevelopment. Regular neurodevelopmental follow-up and early intervention can prove beneficial.

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