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Hypoxic ischemic encephalopathy – is it preventable? Important associations and outcomes

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Despite advances in obstetric and neonatal care over the last four decades the neonatal encephalopathy rate in newborns >2.5 kg shows no decline and there is uncertainty of associated risk factors and outcomes. To determine risk factors associated with hypoxic ischemic encephalopathy (HIE), our group set up an encephalopathy database and have been working to identify potentially modifiable risk factors which may serve to identify newborns at risk of not tolerating the labor process. Secondary aims of our group are to assess the predictive value of laboratory and neuroimaging investigations for neurological outcome. In particular we are interested in attention, memory and behavioral outcomes of survivors without cerebral palsy. Phase 1 of our research [237 cases (155 newborns with grade 1 encephalopathy, 61 newborns with grade 2 encephalopathy, 21 newborns with grade 3 encephalopathy) and 489 controls] defined distinct risk groups with HIE rates that ranged from 0-86%. Associations of placental, laboratory and neuroimaging findings with both short and longer term outcomes will be presented.

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