Antenatal Factors Associated with Early Onset Neonatal Sepsis among Neonates 0-7 Days at Fort Portal Regional Referral Hospital

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Abstract: Introduction: Early onset neonatal sepsis is a systemic infection in a newborn baby during the first week after birth and contributes to 50% of neonatal deaths each year. Risk factors for early onset neonatal sepsis, which can be maternal, health care provider, or health care facility associated, can be prevented with access to quality antenatal care. Objective: The objective of the study was to assess early onset neonatal sepsis and antenatal factors associated with Fort Portal Regional Referral Hospital. Methodology: A cross sectional study design was used. The study involved 60 respondents who were mothers of breastfeeding neonates being treated for early onset neonatal sepsis at Fort Portal Regional Referral Hospital neonatal intensive care unit. Simple random sampling was used to select study participants. Data were collected using questionnaires, entered in Stata 16, and analysed using logistic regression. Results: The prevalence of early onset neonatal sepsis at Fort Portal Regional Referral Hospital was 25%. Multivariate analysis revealed that institutional factors were the only antenatal factors found to be significantly associated with early onset neonatal sepsis at Fort Portal Regional Referral Hospital (p < 0.01). Bivariate analysis revealed that attending antenatal care at a health centre III or IV instead of a hospital (p = 0.011) and attending antenatal care in health care facilities with no laboratory investigations (p = 0.048) were risk factors for early onset neonatal sepsis in the newborn at Fort Portal Regional Referral Hospital. Conclusion: Antenatal factors were associated with early onset neonatal sepsis, and health care facility factors like lower level health centre and unavailability of quality laboratory investigations to pregnant women contributed to early onset neonatal sepsis in the newborn. Mentorships, equipping/stocking laboratories, and improving staffing levels were necessary to reduce early onset neonatal sepsis.

Keywords: antenatal factors, early onset neonatal sepsis, neonates 0-7 days, fort portal regional referral hospital

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