



Abstract Book



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Neonatology

URINARY URIC ACID / CREATININE RATIO AS A PREDICTOR OF MORBIDITY IN NICU ADMITTED INFANTS

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Background and aims: There are many studies which were focused on evaluation of risk factors for prediction of mortality and severity of disease especially in perinatal asphyxia.

We presumed whether urinary uric acid/ creatinine (UUA/UCr) ratio can predict morbidity in neonates which were admitted to NICU.

Methods: All the infants who were admitted to our NICU after birth from June 2013 to July 2014 were enrolled in prospective cross sectionals study. UUA/Cr was measured during the first day of life. Severity of diseases and neonatal death were considered as the final outcome. Statistical analysis was done by using STATA version 11 (STATA Corp, TX, USA). A $P < 0.05$ was considered of statistical significance.

Results: The total of 362 neonates were admitted to NICU in which, 45.6% were male and 54.4% were female. The mean gestational age was 32.7. The mean UUA/Cr ratio were significantly higher in the admitted infants. There is a relationship between UUA/Cr ratio, APGAR score and the duration of stay by linear regression analysis. There are correlations between UUA/Cr ratio and APGAR score with outcome. ($P = 0.006$) and duration of stay ($P = 0.009$) by using univariable logistic regression.

Conclusions: Urinary uric acid/ creatinine ratio can be used as a simple, noninvasive parameter for prediction of the severity of disease and morbidity in NICU admitted infants.

Keywords: Neonatal morbidity, Outcome, Urine Creatinin, Urine Uricacid