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Twin to twin transfusion syndrome: Neonatal outcomes in a third level hospital in Mexico City

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**Introduction:** 95% of monochorionic-monoamniotic twins have veno-arterial placental anastomoses allowing blood transfusion from one to another. Without treatment, both babies are affected.

Material & Methods: A retrospective analysis of the outcomes of 55 monochorionic-monoamniotic pregnancies treated at Instituto Nacional de Perinatologia (INPer) in Mexico City, from January 1999 to July 2014 was performed. Data were obtained from clinical charts; percentages, means and standard deviations were calculated for descriptive analysis and t-Student's test was applied to compare quantitative variables and chi square for qualitative ones, with SPSS v. 20.

Results: 48 babies were alive, 38 died before birth and 20 continued their treatment outside of INPer. Survival correlated with Quintero stage at the diagnostic and treatment time: Stage 1 (83%), 2 (35%), 3 (67.5%) and 4 (50%). Mean gestational age at laser coagulation was 23.3 weeks. 93.7% born by cesarean section, at 31.2 weeks (56 days after coagulation); mean birth weight: 1399.8 g. Statistical difference in hematocrit values between donors (47.2±10) vs. receptors (48.9±11.2) was observed (p=0.000); frequent complications were: Hydrops (4%), necrotizing enterocolitis (4%) and thrombosis (2%) and main morbidities were retinopathy (14%), bronchopulmonary dysplasia (10%) and neurodevelopmental disability (10%).

**Conclusions:** Survival and outcomes of twin to twin transfusion syndrome patients are related to Quintero stage and gestational age at birth, so that, best chance of living without sequel are correct and early detection and treatment is needed.

## **Biography**

Guadalupe Cordero Gonzalez is a Neonatologist attending at the Neonatal Intensive Care Unit in the Instituto Nacional de Perinatologia at Mexico City. She has completed her Post-graduate studies from Instituto Nacional de Pediatria and Instituto Nacional de Perinatologia in Mexico City, and completed a Master's in Medical Education from Interamerican University in Mexico. She is the NICU Chief at INPer and has published more than 20 papers in reputed journals.

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