ABSTRACT BOOK ABSTRACTS



A new ERA for global Dermatology 10 - 15 JUNE 2019 MILAN, ITALY

PAEDIATRIC DERMATOLOGY

## IATROGENIC SKIN DISORDERS AND RELATED FACTORS IN NEWBORN INFANTS

Z Csoma<sup>(1)</sup> - A Meszes<sup>(1)</sup> - R Ábrahám<sup>(1)</sup> - L Kemény<sup>(1)</sup> - G Tálosi<sup>(2)</sup>

Department Of Dermatology And Allergology, University Of Szeged, Szeged, Hungary<sup>(1)</sup> - Department Of Pediatrics, University Of Szeged, Szeged, Hungary<sup>(2)</sup>

During the past few decades, the rapid improvement of neonatal intensive care has resulted in

dramatic decreases in neonatal mortality, but the incidence of iatrogenic events has increased simultaneously The aim of our present study was to assess factors of possible relevance as concerns the development of skin disorders resulting from the immaturity of the skin and various iatrogenic complications in neonates requiring intensive care.

A prospective cohort study was conducted in the NICU at the Department of Pediatrics at the University of Szeged between January 2012 and January 2014. Dermatologic disorders with the gestational age, sex, birth weight, area of involvement, etiology of the disorder, causative factors, diagnosis at admission and comorbidities were recorded, together with the nature of the management.

During the 2-year study period, a total of 460 neonates of Caucasian origin were admitted to the NICU, 87 of them exhibited some kind of iatrogenic skin disorder. The mean gestational age of the newborn infants with any of the iatrogenic skin injuries was significantly lower than that of the infants without any skin trauma. The length of NICU stay was significantly longer in newborns with iatrogenic skin injuries. The following factors, interventions and conditions proved to be associated significantly with the development of iatrogenic skin injuries: use of the INSURE technique, mechanical ventilation, insertion of an umbilical arterial catheter, circulatory/cardiac support, pulmonary hemorrhage, intracranial hemorrhage, patent ductus arteriosus, bronchopulmonary dysplasia and positive microbiology culture results.

latrogenic dermatologic disorders are frequent in neonates requiring intensive care, may result in important physiological consequences and may lead to prolonged hospitalization. Prevention, early detection, and optimal treatment of these disorders with modern, standardized skin care management strategies can result in significant improvements in barrier function of the skin, increasing the overall efficacy of neonatal intensive care.





International League of Dermatological Societies Skin Health for the World

