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Ibuprofen for the treatment of patent ductus arteriosus in preterm and/or low birth weight infants-our experience

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BACKGROUND: Ibuprofen is cyclo-oxygenase inhibitor, is use in closer of patern ductus arteriosus in preterm end/or low birth weight neonates.

OBJECTIVES: To determine the efficacy and safety of ibuprofen for closing a PDA in preterm and/or low birth weight infants in our hospital.

RESULTS: We use ibuprofen intravenous for closure of PDA in 8 preterm and low birth neonates. Three of them had hyperglycemia during administration period of ibuprofen, in 5 neonates PDA was succeed closed, one neonates had surgical closure of PDA because of failed closure by ibuprofen and one baby die because of intracranial hemorrhagia.

CONCLUSIONS: Ibuprofen is as effective in closing a PDA and reduces the risk of NEC and transient renal insufficiency. Given the reduction in NEC ibuprofen currently appears to be the drug of choice. . Studies are needed to evaluate the hyperglycemia as side effect during administration of ibuprofen.