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Most Frequent Pathologies in a Neonatal ICU in Northern Santa Catarina

Most Frequent Pathologies In A Neonatal Icu In Northern Catarina

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Summary

The neonatal intensive care unit is a service that cares for newborns in critical or potentially serious condition. Understanding the profiles of hospitalized neonates through data analysis can help reduce morbidity and mortality. The objective of this research was to analyze the pathologies recorded as diagnoses of newborns hospitalized in the neonatal intensive care unit (NICU) at a maternity hospital in Northern Santa Catarina from January 2020 to July 2022, based on a comparative study with Brazilian scientific literature. Therefore, a retrospective study was conducted using simple sampling, through data collected from the maternity hospital's database, with inclusion criteria including all neonates hospitalized in the NICU. Thus, the sample consisted of 307 neonates, divided between term and preterm neonates. Among term neonates, 37% were diagnosed with acute respiratory distress syndrome and 11% with meconium aspiration, indicated as the most relevant. Among premature infants, it was found that 56% were hospitalized with a diagnosis of prematurity alone, and 35% with acute respiratory syndrome associated with prematurity. Thus, a similarity is observed when comparing maternity wards in some Brazilian regions, which indicate prematurity and related diseases as the leading cause of hospitalization. Given this scenario, the analysis of these pathologies becomes paramount in order to gain knowledge and potentially resolve the problem, as studies of this magnitude can enable the transformation of neonatal and maternal healthcare realities.

Keywords: Prematurity. Neonatal hospitalization. Neonatal pathologies.

Abstract

The neonatal intensive care unit is a service that takes care of newborns in critical or potentially serious conditions. Understanding the profiles of hospitalized newborns based on data analysis can help reduce morbidity and mortality. The objective of this research was to analyze the registered pathologies, such as diagnoses of newborns admitted to the Neonatal Intensive Care Unit (NICU), in a maternity hospital in the North of Santa Catarina from January 2020 to July 2022, based on a comparative study with the Brazilian scientific literature. Thus, a retrospective survey was carried out, by simple sampling, through the collection obtained from the maternity hospital's database, having as inclusion criteria all neonates admitted to the NICU. Thus, the sample consisted of 307 neonates, divided between full-term and premature neonates. Among those born at term, we have 37% of hospitalized patients diagnosed with acute respiratory syndrome and 11% with meconium aspiration, being indicated as the most relevant; among preterm infants, 56% were hospitalized with a diagnosis of prematurity only and 35% were diagnosed with acute respiratory syndrome associated with prematurity. Thereby, there is a similarity, when compared to maternity hospitals in some Brazilian regions, which point to prematurity and related diseases as the leading cause of hospitalization. Given the scenario described, it is extremely important to analyze these pathologies, so that there is knowledge and potentially a resolution of the problem, as studies of this magnitude can enable the transformation of care realities, as neonatal and maternal health.

Keywords: Prematurity. Neonatal hospital stay. Neonatal Pathologies.

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1. Introduction

Neonatal pathologies are closely linked to factors related to pregnancy, childbirth, and birth, which directly influences the neonatal period, thus becomes of utmost importance. It is important to understand the profiles of hospitalized newborns in order to help reduce the... morbidity and mortality, which in most cases could be prevented with strategies of essential health care.

Studies describe the profile of newborns admitted to Intensive Care Units. Neonatal Intensive Care Units (NICUs), and identify risk factors for outcomes such as death, neonatal infections, Delayed neurological development, as well as care practices during pregnancy and at the time of birth. childbirth. Other studies highlight maternal biological characteristics, such as age, obesity, Hypertension and infections were also listed. Neonatal characteristics were also identified, especially prematurity, low birth weight, congenital malformations, and lower APGAR score at five minutes. that seven - an examination performed on the newborn immediately after birth, which assesses general condition and vitality, which aids in responding to care within the delivery room, as determinants of morbidity. of these newborns who were hospitalized.

In the assessment of gestational complications, it is observed that they are caused by various factors. factors, which most often lead to premature birth. These factors can be related to genetics, psychosocial factors, obstetric problems, and/or some disability. nutritional issues, as well as the absence of prenatal checkups.

Given the above, pregnancy and socioeconomic conditions are important factors for good embryonic development, however, there is a lack of information about care. adequate care during pregnancy, poor health care conditions, and prenatal monitoring. An inadequate Christmas presents a potentially harmful scenario, fitting into the reality of many pregnant women.

Based on this premise, obtaining obstetric history is extremely important. which can be listed as: history of premature birth; history of one or more miscarriages. Spontaneous conceptions in the second trimester, maternal age less than 15 years or greater than 40 years, which would be extremes of age; multiple pregnancy, lack of prenatal care, genetic and physiological factors. of heredity or hereditary susceptibility to diseases; the environment and conditions of the area in which life, as well as lifestyle. In a general context, all these factors are viewed in a... negative, and classified as a risk to the pregnant woman.

Thus, the importance of knowing these risk factors before or even... is highlighted. during pregnancy so that its exposures are understood and consequently found alternatives to mitigate the risks of complications during and after childbirth.

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Thus, although external factors influence the gestational period, there are morbidities.
which can occur during any pregnancy, making it high-risk, and include:
uterine growth restriction; number of fetuses and amniotic fluid volume; weight gain
Insufficient blood pressure; premature birth; prolonged pregnancy; pre-eclampsia and eclampsia; gestational diabetes.
Among other things, this has consequences for the fetus, and is generally recommended after birth.
Admission to the Neonatal Intensive Care Unit.

According to SILVA (2022), the use of antenatal corticosteroids in preterm labor
imminent, neonatal pediatrics, support equipment, clinical cardiopulmonary monitoring and
electronics, nutrition, management of perinatal complications (premature birth, asphyxia, infections), such as
pharmacological methods (surfactants, nitric oxide, xanthine, prostaglandins) and deformities of
Surgical approaches would reduce the risk of death. In arguing the results regarding...
In cases of gestational complications, the quality of perinatal, obstetric, and neonatal care is highlighted.
especially with regard to the management of adverse conditions during pregnancy (infections, syndromes
hypertensive disorders, diabetes, hemorrhagic syndromes) that can contribute to good development.
During pregnancy, approximately 75% of premature infant deaths can be prevented without preventative care.
Intensive care is provided, ensuring essential care, namely: assistance during childbirth, monitoring
Thermal support, basic ventilatory support, nutritional practices with breast milk, and infection control.

> According to the World Health Organization (WHO), neonatal mortality has been increasing in all regions over the past 20 years. At least two million newborns could be saved each year if preventable neonatal mortality were eliminated. (DAMIAN; WATERKEMPER; PALUDO, 2016, p.101).

Thus, the fragility of healthcare from pregnancy to birth are causes
observable deaths to date necessitate a critical analysis of prenatal counseling if
Performed correctly, with up-to-date knowledge and quality, and with safe assistance.
(DAMIAN; WATERKEMPER; PALUDO, 2016).

The goal of prenatal consultations and good care for pregnant women is of paramount importance.
importance for detecting infections and pathologies during this period, aiding in prevention.
premature birth of these children. In this way, to identify any alteration in the
pregnancy and possible complications arising from prolonged stays in the NICU.

Therefore, external factors that influence premature birth are still present.
as a difficult mission to solve, due to the fact that it is not just a matter of order.
Not just medical, but social, economic, and educational.
However, for good maternal-fetal quality and to minimize the risks of a complicated pregnancy, the
Pregnant women should be advised and instructed to attend prenatal appointments, which can be characterized as
Comprehensive care, with a team that gets to know the pregnant woman throughout the process.
Understanding their needs and demands, the patient is able to determine, together with the patient, the best course of action.

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prenatal and postnatal care, addressing any questions that may arise during this process. In this regard, it will occur future benefits for both mother and newborn.

Therefore, there must be quality and humane prenatal care, with access to... health services with a minimum of six consultations during pregnancy to facilitate the detection of complications that can prolong or expedite the birth of the newborn.

2. Material and Method

This research was characterized as quantitative and qualitative, retrospective, and of a basic nature. with exploratory and descriptive objectives, based on an analysis of the most frequent pathologies in a Neonatal Intensive Care Unit (NICU).

Data collection was carried out at the Dona Catarina Kuss Maternity Hospital in the city of Mafra, Santa Catarina, Brazil. Under the guidance of physician and professor Dr. Sarah Bernadette de Carvalho Alcântara. The research began after approval from the Research Ethics Committee (CEP) and after the head of the Maternity Hospital... Ms. Catarina Kuss signs the Cooperation Agreement on behalf of the Institution.

The sample obtained originated from the maternity hospital's database, where it was analyzed. newborns who were admitted to the intensive care unit during the period of January 2020 July 2022.

This study considered as inclusion criteria all neonates admitted to the NICU and The exclusion criteria included newborns who were not admitted to the neonatal ICU.

The data found were analyzed based on the diagnoses identified in hospitalization. After this stage, a comparison was made of the most frequent pathologies in the maternity ward. from Mafra - SC, with data found from some Brazilian regions.

Therefore, the sample was compiled into Microsoft Office Excel spreadsheets, and then... Graphs were created for analysis and interpretation. The research preserved the identification of the patients, eliminating the need for the Informed Consent Form (ICF). She It was based on secondary data, using only information contained in the database. from the institution under study, without direct contact with the patients.

The research project was approved by the research ethics committee through the opinion... number 5,730,702.

3. Results and Discussion

Based on the research conducted at the Maternity Hospital in Northern Santa Catarina, it is worth highlighting that... The neonatal period studied comprises from 0 (zero) to 28 (twenty-eight) days of life and is characterized

Year VI, v.1 2026 | Submission: 03/01/2026 | Accepted: 05/01/2026 | Publication: 07/01/2026

as the period of greatest vulnerability for the newborn. Thus, the research was divided between newborns born at term between 38 (thirty-eight) and 42 (forty-two) weeks of gestational age and newborns premature infants born before 37 (thirty-seven) weeks. Diagnoses obtained from newborns Hospitalizations were recorded according to the patients' admission to the Intensive Care Unit. by the nursing staff, and attached to the database.

3.1 RESULTS OF THE RESEARCH CONDUCTED AT THE MATERNITY HOSPITAL IN THE NORTH CATARINENSE

Table 1: Total number of live births, listing the quantity and percentage of admissions to the intensive care unit. neonatal intensive care unit (NICU)

Year	Live births :	Admission to the NICU	Percentage corresponding to NICU admissions
2020	1,468	45	3.06%
2021	1,523	213	13.98%
JAN to JUL/2022	900	113	12.55%
TOTAL	3,891	371	9.53%

Source: Borges (2022).

A total of 3,891 diagnoses of NICU admissions after delivery were collected. Among them Of the 1,468 newborns, 45 were admitted to the NICU in 2020 (3.06%). In 2021 There were 213 hospitalizations, out of a total of 1,523 live births (13.98%). From January to July 2022 there were 113 admissions to the NICU, out of a total of 900 live births (12.55%). Thus, it is observed that of the 3,891 Of the live births, 371 were admitted to the NICU (9.53%).

Of these 371 admissions to the NICU, 277 were premature births (74.66%) and 94 were full-term births (25.33%). Thus, more prevalent pathologies were observed in each category.

Given the results found regarding the total number of admissions to the NICU, it is noted that... There was an increase in the number of hospitalizations after 2020, with the highest rate in 2021. corresponding to a total of 13%, there was a slight reduction in 2022. Therefore, the The figures for the year 2020 are somewhat discrepant when compared to other years and... other Brazilian regions, due to the low rate of hospitalizations compared to the number of live births.

Some of the hospitalizations in 2021 are justified by the consequences of the coronavirus (COVID-19). 19), during which a total of 5 newborns were admitted, 1 at term and 4 premature.

Pregnant women, breastfeeding women, and postpartum women are groups that share the severity of the classification of risk of COVID-19. Although most pregnant women infected with the virus that causes COVID-19 If the condition remains asymptomatic, studies show increased rates of pre-eclampsia and high blood pressure. Gestational diabetes and premature rupture of the placenta. The explanation found is that their systems Immunological systems are immature, so fetuses and newborns are almost entirely dependent on them.

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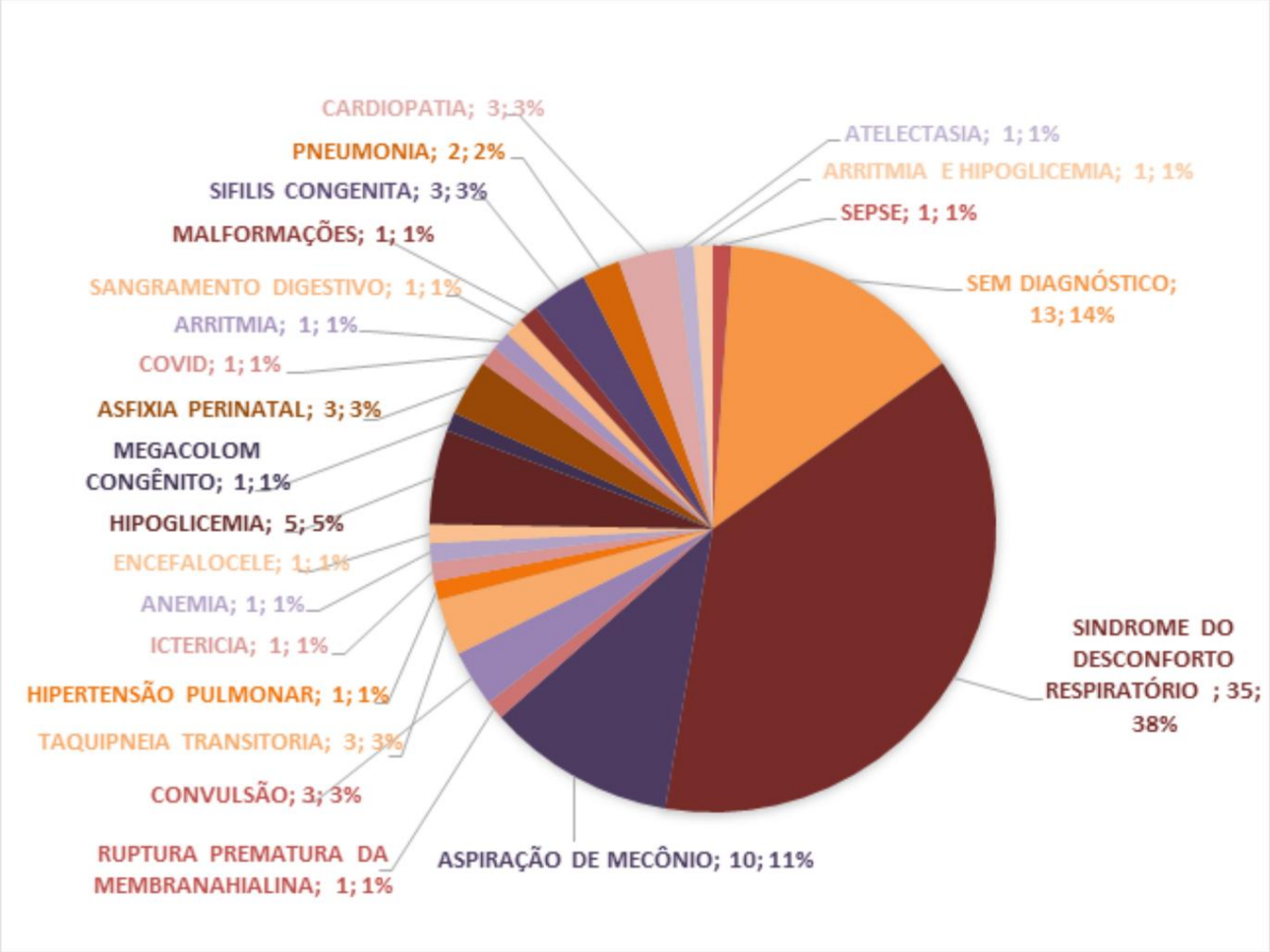
Maternal immunity. Regarding contact with and contamination by the virus, the following can be highlighted:
Vertical transmission (mother-to-fetus) of the virus or antibodies, which is still being studied in all its aspects.
complications, not yet presenting a definitive conclusion. (VIEIRA, *et al* 2021).

Chart 1: Diagnosis of full-term newborns, PERIOD 2020, 2021, Jul/2022



Source: Borges (2022).

Among the samples from the 371 hospitalizations, 94 newborns were born at term.
(25.33%). Of these, the main reasons for hospitalization are respiratory distress syndrome and
meconium aspiration. Of these full-term infants, 13 hospitalized patients (14%) were admitted without meconium aspiration.
diagnosis.

In cases of acute respiratory distress syndrome, 35 hospitalizations were recorded, including 4 hospitalizations.
in 2020, 27 hospitalizations in 2021, and 4 hospitalizations up to July 2022, which represent
38% of the sample collected from hospitalizations. Meconium aspiration was the second most common cause.
The most frequent pathology among full-term infants, with 1 hospitalization in 2020 and 6 hospitalizations in [year missing].
2022 and 3 hospitalizations up to July 2022, representing a total of 11% over the 3 years.

Chart 2: Diagnosis of premature newborns, period 2020, 2021, Jul/2022

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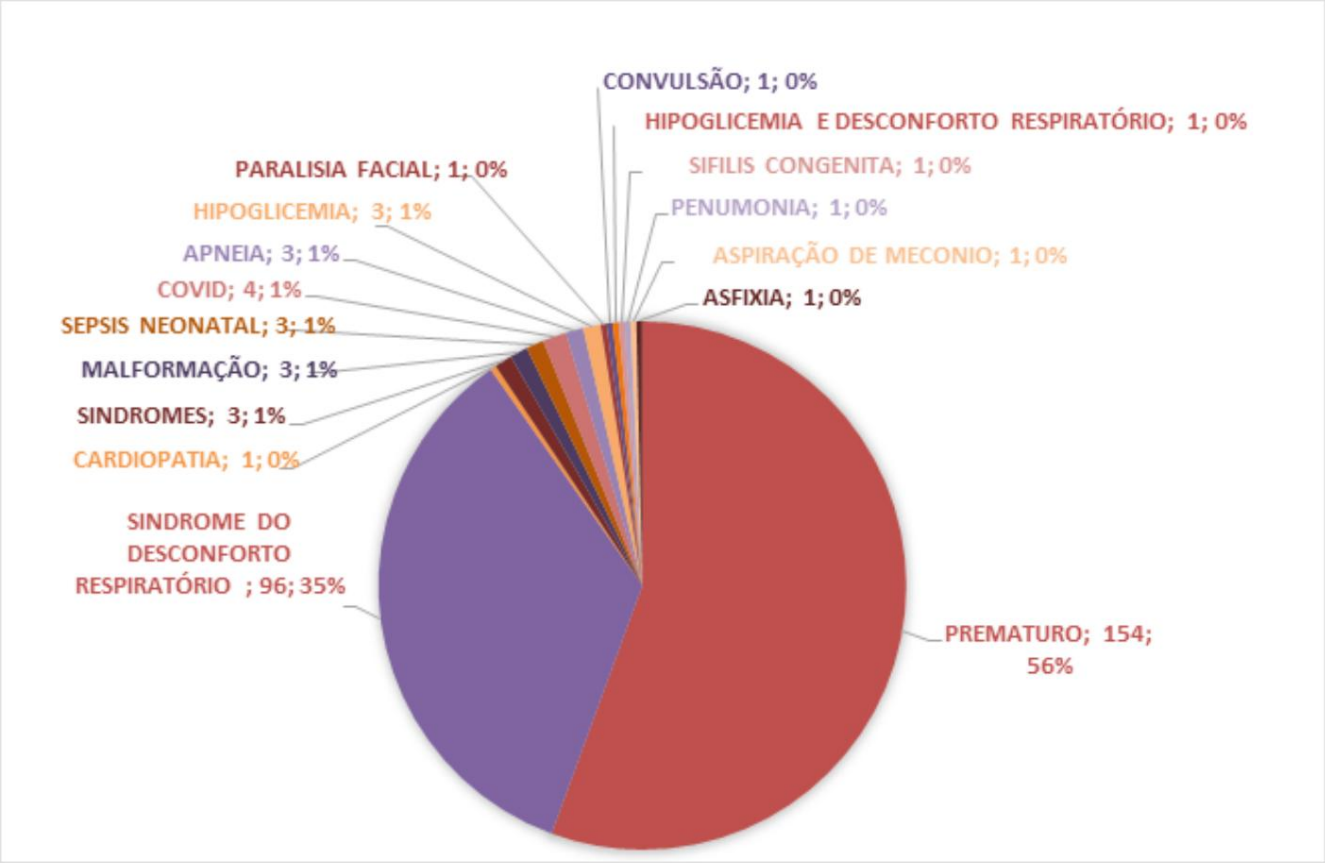

Source: Borges (2022).

In the sampling of premature newborns, 56% of the neonates were admitted.
with a diagnosis of prematurity only, which corresponds to 12 hospitalizations in 2020, 94
hospitalizations in 2021 and 48 hospitalizations up to July 2022. Another significant diagnosis was...
Respiratory Distress Syndrome in prematurity accounts for 35% of hospitalizations,
in which 13 patients were hospitalized in 2020, 44 in 2021, and 39 from January to July 2022.

Regarding prematurity, the main cause is respiratory distress syndrome.
also called surfactant deficiency disease, because surfactant is produced only when
starting from the end of the second trimester or the beginning of the third trimester of pregnancy. This incidence
It progresses as the degree of prematurity increases. (SILVA, 2022).

Respiratory Distress Syndrome in premature newborns can present challenges,
complications and even death. Among the factors that represent a risk of fetal death, problems
Respiratory problems are the most prominent, due to immature alveoli and low surfactant production.
Due to endogenous factors and the immaturity of the accessory muscles and airways, the fetus presents serious problems.
Respiratory difficulties in the extrauterine environment, often requiring the use of methods.
associated with mechanical ventilation (MV). Administration of exogenous surfactants to relieve pain and
to prevent further complications.

Meconium aspiration syndrome (MAS) is a major cause of morbidity and mortality.

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neonatal respiratory distress syndrome is characterized by varying degrees of respiratory failure. It is based on the blockage of the

Airway obstruction due to meconium inhalation, hindering ventilation and gas exchange. This condition

This results in surfactant dysfunction, reduced lung compliance, and inflammation of the pulmonary mucosa.

Respiratory tree. Meconium in the amniotic fluid is more common in older neonates.

gestational age and also in small for gestational age.

3.2 RESULTS OF THE RESEARCH CONDUCTED IN ARTICLES FROM SOME REGIONS BRAZILIAN WOMEN

Based on data found in Brazilian articles, information was compiled about

The main pathologies of some Brazilian regions are listed in the following tables:

Table 2: NICU of the Mário Covas State Hospital in Santo André - São Paulo.

Pathology	Percentage
Respiratory problems	93.8%
Neurological pathologies	9.87%

Source: OLIVEIRA; *et al.* (2015).

Table 3: Intensive care unit (ICU) of a hospital in the southern region of Santa Catarina.

Pathology	Percentage
Respiratory problems	72.2%
Vascular conditions	5.6%
Sepsis	22%

Source: SÁVIO; SANTOS; *et al.* (2016).

Table 4: NICU in the municipality of Joinville, Santa Catarina.

Pathology	Percentage
Congenital malformation	44.7%
Prematurity	39.1%

Source: MUCHA; FRANK; SILVA. (2015).

Table 5: NICU at the Children's Hospital in Campo Largo, Paraná.

Pathology	Percentage
Respiratory problems	6.83%
Neonatal jaundice	6.53%
Other septicemias	5.82%

Source: PECHEPIURA *et al.* (2019).

Table 6: NICU at the reference hospital in the northeastern region of Rio Grande do Sul.

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Pathology Percentage	
Prematurity	69.6%
Respiratory problems	41.3%
Transient Tachypnea of the Newborn	10.4%

Source: DAMIAN; WATERKEMPER; PALUDO. (2016).

Table 7: NICU at Santa Maria Hospital - Rio Grande do Sul.

Pathology	Percentage
Prematurity	57%
Respiratory problems	57%
Low weight	10%

Source: ARRUÉ *et al.* (2013).

This study reveals similarities between the scientific evidence found. Having The relationship between the main pathology evidenced in the research, which is prematurity, has Prevalence confirmed in the studied sample.

Other consistent findings include high rates of respiratory problems. However, the other diseases varied according to the epidemiology of the region analyzed.

Final Considerations

In light of the present research study, a total of 3,891 diagnoses were collected. admissions to the NICU after childbirth, of which 371 were admitted to the NICU, totaling 9.53%. Thus, prematurity is highlighted as having a high prevalence, both in the maternity ward studied. when in the articles analyzed. However, it is necessary to contextualize that the results of the present Studies may not reflect the reality of other regions of the country, because although prematurity is Listed as a leading cause, each region has factors contributing to the hospitalization of prematurity for various reasons. distinct. In which it is mentioned that premature babies had large numbers of hospitalizations, followed by respiratory distress, due to the fact that the maternal-fetal relationship is closely linked to these predispositions.

By analyzing the pathologies that led to the hospitalization of newborns in the NICU, one can... emphasize that most are due to preventable causes, such as Urinary Tract Infection (UTI), Infections Sexually Transmitted Infections (STIs) as well as syphilis, which could be resolved through prenatal consultations and appropriate and recurring treatment with effective follow-up, because This could prevent hospitalization, or even, with early investigation of the pathology found, seek treatment. Alternatives and/or solutions to the problems, which would improve the prognosis and reduce the time. for hospitalization.

According to the results of this study, even if difficult to control, causes based on

Year VI, v.1 2026 | Submission: 03/01/2026 | Accepted: 05/01/2026 | Publication: 07/01/2026

These problems can be prevented with proper monitoring, from prenatal care to the first appointment.

Newborn care after birth. Early diagnosis is crucial to prevent

Childhood complications, related to premature newborns and population health.

Therefore, this research is fundamental to understanding and possibly addressing the issues that

They emphasize the importance of quality prenatal planning to prevent premature birth and encourage...

Early monitoring of pregnancy can reduce the risk of complications during childbirth.

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