

LETTER TO THE EDITOR

Special Problems in Surgery of New Born Infants

Dear Sir,

As a field of special interest, Infant surgery is not new. As early as 1563, Felix Wartz, a Swiss Surgeon published a book dealing with "the informities and defects of new born children". Prior to 1930 however, few surgeons made truly concentrated efforts to improve the smallest of our patients. Today fortunately there appears to be a smouldering interest in preventing unnecessary deaths due to correctable congenital defects involving all organs — an interest generated by need and kindled with success.

The day one is born is probably the most dangerous day of one's life, and approximately 3/4 of all infant deaths occur during the ensuing 28 days. Immaturity & prematurity, respiratory distress syndromes and major congenital malformations are the first, second and third major causes not only of mortality but also of morbidity during this crucial period.

A very careful and immediate evaluation of the newly born child, including Apgar scores and complete physical examination at the time of birth instead of 12 or 24 hours later is essential with particular concern for the danger signals that may be readily recognised and represent the warning buzzers of impending disaster. They are : Rapid respiration (over 40/minutes), difficult respiration, cyanosis (a single episode), excess salivation, abdominal distension, abdominal mass, vomiting of bile, failure to evacuate meconium (within 24 hrs.), inability to void, convulsion, lethargy and jaundice (first 24 hrs).

Communication & Transportation, including the safe conduct pass from where one is born to where one is to be treated, are next in importance. Normothermia & nasogastric suction for an infant with omphalocele or diaphragmatic hernia may be life saving.

Skilled nursing, better respiratory support, improved monitoring, and an appreciation of the possibilities of prolonged parental alimentation have extended the armamentarium of all Paediatric Surgeons.

We must also have a sufficient number of persons continuing to work in the field of neonatal surgery, so that we can enjoy the luxury of diving more deeply into the fundamental responses of newly born infants to adverse circumstances affecting one or all organ systems remembering that these efforts will not be measured in years, but in life times.

REFERENCES

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Dr. Kadhim Zaher,
Senior Resident,
Department of Surgery,
Salmaniya Medical Centre,
Bahrain.