Intraventricular hemorrhage- is access to care a risk factor?

FACULTY MENTOR
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RESEARCH PROJECT DESCRIPTION

BACKGROUND AND SIGNIFICANCE- Germinal matrix hemorrhage (GM) is a debilitating entity that affects neonates. The germinal matrix involutes at 35 weeks; hence GMHs are only seen with preterm births. Although the risk factors for preterm births are multifactorial, poor prenatal care has been thought to play a significant role. Severe GMH results in intraventricular hemorrhage (IVH) that can evolve into hydrocephalus, eventually resulting in cerebrospinal fluid shunting. Current neurodevelopmental outcomes show cognitive and/or motor abnormalities in GMH survivors. Therefore there is a role to identify modifiable maternal risk factors (access to prenatal care, education) to decrease the risk of intraventricular hemorrhage and improve the outcomes of these neonates.

HYPOTHESIS- Poor access to prenatal care results in more preterm births and thus more neonates with intraventricular hemorrhage.

METHODS- Retrospectively review the past 15 year data on neonates discharged with a diagnosis of GMH/IVH and identify maternal risk factors for intraventricular hemorrhage.

ROLE OF MEDICAL STUDENT- The student will assist with data collection, analysis and manuscript publication.

FUNDING- Dean’s Fund Grant

RELEVANT PUBLICATIONS
