

The Prevalence of Neurocognitive Disorders and Their Association with Mode of Delivery Amongst 12 to 24 months Old Children At MRRH, South-Western Uganda

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Abstract:

To determine the prevalence of neurocognitive disorders and their association with the mode of delivery amongst children at 12 to 24 months age who were delivered at MRRH in South Western Uganda. This cross sectional study included 439 children born between January, 2017 and January, 2018 by either caesarean section delivery (CSD) or vaginal delivery (VD) at MRRH. Bayley Scales of Infant and Toddler Development (3) was used for assessing the incidences of cognitive, language, or motor functional disorders. Composite scores below 85 were considered for delayed neurological development or disorder. A structured questionnaire was used to collect maternal socio-demographic, obstetric and medical information, as well as the child demographic and health information. Data was entered in database designed with MS- excel version 7.2 and analysed with STATA-13. Scores were compared in univariate and multivariable analyses for children in the two mode of delivery groups. Of 439 included children, 102 (23%) and 337 (77%) were delivered by CSD and VD respectively. Overall, 52 (12.4%) had composite scores (<85) for neurological disorders involving cognitive, language and motor function. 12(12.4%) and 40 (12.5%) of the CSD and VD respectively had neurological disorders. However, there was no significant difference (p>0.05) between CSD and VD modes in respect to the incidences of cognitive, language or motor disorders as outcomes. Delayed start and



short-lived breast feeding were both significantly (p<0.05) associated with NCD. Under multivariable analyses higher child age (21 to 24 months) and low maternal education (<primary) were associated with increased odds of neurocognitive disorders (NCD) (OR,CI): 2.7 (1.2-6.4), 4.7 (1.14-5.6) respectively. Neurocognitive disorders were high. The mode of delivery was one of the probable causes although no adequate evidence could be established between CSD and VD as to which of the two was a higher risk contributor.

Biography:

Kintu Mugagga has completed her BVM, MVM, PhD-fellowship under Department of Anatomy, Faculty of Medicine, Mbarara University of Science And Technology, Uganda.

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