

Thrombocytopenia Vs Thrombocytosis as a Predictor of Outcome in Neonatal Sepsis

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ABSTRACT

The objective of this study is to determine the incidence of thrombocytopenia and thrombocytosis in neonatal sepsis in NICU and to study them as a predictor of outcome in neonatal sepsis. This study was carried out in Neonatal Intensive Care Unit (NICU), Department of Pediatrics, M.L.B Medical College, Jhansi on 70 newborns admitted as neonatal sepsis in SNCU. The study showed that normal platelet count is observed in 26(37.1%) patients. Thrombocytopenia was found in 41(58.5%) cases out of total 70 cases of sepsis. Mild thrombocytopenia was seen in 8 (11.4%) cases, moderate in 18(25.7%) and severe thrombocytopenia in 15 (21.4%) cases in the study group. It is also observed that the neonatal sepsis is more common in babies having birth weight <2500gms (74.2%) as compared to babies with a birth weight \geq 2500gms. Thrombocytosis was seen in only 3(4.28%) patients. The thrombocytopenia was more commonly seen in culture proven cases of neonatal sepsis. Also thrombocytopenia is more common in preterm neonates and in low birth weight babies. It can be concluded that the neonatal sepsis is more common in preterm babies (<37wks) than the term babies (\geq 37wks) and more commonly occurs in babies having birth weight <2500gms as compared to babies with a birth weight \geq 2500gms. Thrombocytopenia was more in culture proven cases of neonatal sepsis and in low birth babies and with gestational age <37 wks. Also Thrombocytopenia was more commonly observed than thrombocytosis in cases of neonatal sepsis with complications.