



## Media Release

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### Preterm babies' appearance no guide to survival

**The ability of doctors to accurately predict the survival of extremely premature babies, based on their appearance at birth, is little better than chance, according to a study by the Royal Women's Hospital.**

Neonatal clinicians watched videos of delivery room resuscitations of 10 babies, all born at less than 26 weeks gestation, and then predicted each baby's chances of survival, based on how they looked.

They estimated each newborn's viability at three time points – at 20 seconds, two minutes and five minutes after birth.

Dr Brett Manley of the Women's was the chief investigator of the research, published in the Journal of the American Academy of Paediatrics. "Our research shows that neonatal clinicians are not able to accurately predict survival based on the appearance of these infants, in the first five minutes of life.

"For instance, the infant given the overall equal best prognosis for survival of the 10 infants in the study actually died before discharge, and the infant ranked as the second worst prognosis overall survived," Dr Manley said.

"The research reveals that doctors should not rely on early clinical signs alone when considering whether to resuscitate infants born at under 26 weeks gestation," Dr Manley said.

"The more appropriate practice, and the one we follow at the Women's, is to consult with the parents before the birth, presenting them with known survival and outcome data, and then agree on a clear management plan for the baby after birth."

This research was performed in response to a previous paper that suggested many US neonatologists would "see what the baby looks like" at birth when assessing whether to commence or continue resuscitation and instigate intensive care for premature infants born in the 'grey zone' of viability of between 23 and 24 weeks gestation with a birth weight of 500 to 600 grams.

"Some doctors will counsel parents to wait and see how the baby looks when they are born, before a decision is made to resuscitate," Dr Manley said. "Our study shows that approach may not be the best."

*For more information please call:*

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