MORTALITY RATES AND RISK FACTORS IN NEONATES WITH ESOPHAGEAL ATRESIA AND TRACHEOESOPHAGEAL FISTULA : A SINGLE CENTER ANALYSIS

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Objective**:**

The objective of the study was to investigate the mortality rates and the types of operations performed in neonates with oesophageal atresia and tracheoesophageal fistula (EA/TEF) in different classifications, as well as to identify the factors that affect the mortality rates.

Methods:

The study was conducted at Hospital Raja Perempuan Zainab II (HRPZII) and used prospectively collected data from the past six years from 2016 to 2021. The primary outcome of mortality in HRPZII was analysed including the factors that affected it. We also evaluated the different types of EA/TEF and the risk factors that affected them.

Results:

The study found that an average of 3-4 patients per year were diagnosed with EA/TEF. The mortality rate in HRPZII was 9.5%, which was comparable to other current studies an written literature. Type C was the most common type of EA/TEF, accounting for 85.7% of cases, while long gap EA/TEF accounted for 9.5%. The mortality rate was higher in patients with long gap TEF and those with associated congenital anomalies, with cardiac anomalies being the most notable.

Conclusion:

The study concluded that mortality rates in HRPZII were comparable to those in other studies and were strongly associated with the presence of concomitant congenital anomalies. We also found that the most common type of EA/TEF was type C, and that long gap TEF had a higher mortality rate. The study's findings suggest that identifying and managing associated congenital anomalies is crucial in reducing mortality rates in neonates with EA/TEF.