

# Study finds 'rescue course' of antenatal steroids improves outcome in premature babies

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In a study to be presented today at the Society for Maternal-Fetal Medicine's (SMFM) annual meeting, researchers will unveil findings that show that premature babies born before 34 weeks have a 31 percent reduction in serious complications when given a "rescue course" of Antenatal Corticosteroids (ACS) steroids with no adverse side effects noted.

"Premature babies are very susceptible to respiratory problems which may lead to additional severe complications," said Dr. James Kurtzman, M.D. (Associate Professor, UC Irvine Medical Center). "Antenatal steroids clearly reduce the risk of these respiratory complications."

Years ago doctors gave multiple courses of antenatal steroids to mothers who were at risk for delivering prematurely. However, certain studies found that there were possible adverse affects to multiple ACS courses because babies were found to have slightly smaller head circumferences and lower birth weights. As a result the National Institutes of Health (NIH) recommended further study.

"The effect (of the NIH recommendation) was that doctors were only giving one ACS course, and they were nervous about when to give it for the best effect. They often waited until the last minute, and some women didn't get a complete treatment or didn't get it at all," said Dr. Kurtzman. "What this study has found is that we can give women who threaten to

deliver prematurely an initial ACS course, and if they remain pregnant, we can give one 'rescue course' closer to delivery. By doing so, the babies' complications are reduced by about a third with no adverse side effects found."

In this study, which took place over five years in 18 different medical centers and was supported by the Pediatrix Medical Group, 437 patients were randomized (233 in the study group, and 214 in the placebo group). The results showed a significant reduction in composite neonatal morbidity for babies born prior to 34 weeks in the "rescue steroid" group vs. placebo (43.9% vs. 63.6%) as well as significant decrease in respiratory distress syndrome, ventilator support, and surfactant use. When all neonates were included in the analysis (regardless of the gestational age at delivery), a significant reduction in composite morbidity in the "rescue steroid" group was still demonstrated (32.1% vs. 42.6%).

The study will be published in the March 2009 issue of the *American Journal of Obstetrics and Gynecology*.

Source: Society for Maternal-Fetal Medicine

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