To the Editor: A study was done to determine the characteristics of mothers with premature babies admitted during July 2001 till August 2001 in the neonatal unit of Livingstone Hospital (Eastern Cape Province). The unit has a capacity for 35 babies with an average of 60 to 65 new admissions per month. (SA Fam Pract 2003;45(8):6)

The study included all mothers whose premature babies were admitted to the unit, irrespective of the mode or place of delivery. Mothers who gave birth to stillborn or of whom babies died before arriving at the unit were excluded from the study. The Ethics Committee of the University of the Free State approved the research and the Pediatric and Obstetric departmental Heads of Livingstone Hospital granted permission for the study.

Mothers included in the study gave their consent and confidentiality was ensured. A structured questionnaire with 20 questions was asked in English. Nursing staff interpreted for those who spoke Xhosa or Afrikaans. Hospital records were used for the questions that could not be answered during the interview.

The sample consisted of 110 mothers whose ages ranged from 15 years to 42 years (median age: 26 years). Most mothers were single (71.8%). Of the 54 mothers who commented on their last confinement, only 29.6%o had been pregnant during the last three years. Fifty-six mothers responded to the question 'duration of last pregnancy' as follows: 23.2% had pre-term births, 60.7% had full term deliveries and 16.1% had abortions.

A quarter (25.4%) of the mothers claimed never to have used any form of contraception. Of the mothers who had used contraceptives, 10% had used only condoms, while 3.6% had used condoms in combination with injectables (i.e. De Provera, Nurestareate). The injectables were the most popular contraceptive (41.8%). Most mothers had completed their matric education (74.6%) and only 4.6% had a tertiary education. A fifth of the mothers (20.9%) were employed. All mothers denied using narcotics (cocaine, heroin, etc), 22.7% smoked and 5.5% smoked and drank alcohol.

Most of the mothers had singleton deliveries (91.8%). The majority were normal vertex deliveries, 16.4% Caesarian section and 10% were delivered at home or on their way to the hospital.

A third (33.6%) of the mothers developed pregnancy induced hypertension. One mother had pre-gestational hypertension. Pre-term membrane rupture was developed by 10.9% and 6.4% developed placental abruption. Only 6.4% tested positive for syphilis. Few (6.4%) were tested for HIV, of which 3.6% were positive.

One hundred and nineteen babies were admitted to the neonatal unit and included nine sets of twin deliveries. The weights of the babies ranged between 690g and 3950g (median: 1580g). The baby weighing 3950g was from a diabetic mother. The gestational ages of the babies ranged between 28 weeks to 39 weeks (median: 34 weeks). The Ballard scoring system, which assess both physical and neuromuscular maturity in newborns, was used for assessing their ages.

The majority of the low birth weights were due to preterm births. By making clinics more accessible in disadvantaged areas, pregnant mothers are able to attend the clinics more often and complications would be detected earlier. A significant proportion of sexually active females, especially teenagers, use no contraceptives. Female sex education must be made a priority in high schools and primary health care clinics.

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