



INTISARI

Kelahiran prematur didefinisikan sebagai kelahiran sebelum usia kehamilan 37 minggu, dan hal ini dapat mengakibatkan bayi lahir dengan berat lahir rendah (berat saat lahir kurang dari 2500 gram). Kelahiran prematur dan berat badan lahir rendah terkait erat dengan kematian neonatal, risiko morbiditas yang lebih besar, pertumbuhan terhambat, gangguan perkembangan, dan penyakit kronis di kemudian hari pada bayi yang dapat bertahan hidup. Komplikasi prematuritas organ menjadi alasan yang mendasari tingginya angka kematian neonataus. Risiko komplikasi akan meningkat dengan makin meningkatnya pematuritas.

Kami melaporkan kasus seorang bayi perempuan berusia 6 bulan dengan riwayat lahir prematur atau kurang bulan, berat lahir rendah, displasia bronkopulmoner, periventrikuler leukomalasia dan laringomalaria. Kami melakukan pengamatan selama 18 bulan untuk mengetahui luaran pasien. Selama observasi, pasien memiliki pertumbuhan normal, laju pertumbuhan yang baik, serta status gizi baik hingga akhir pengamatan. Pasien dapat mencapai tumbuh kejar saat usia 6 bulan dengan adanya intervensi nutrisi dan fisioterapi oral akibat riwayat gagal tumbuh saat usia 5 bulan. Pasien mengalami keterlambatan perkembangan dan palsi serebri *gross motor function classification system* (GMFCS) derajat 1 sejak usia 9 bulan. Intervensi dini berupa stimulasi dan fisioterapi berkelanjutan diberikan pada pasien selama observasi, dan didapatkan hasil perbaikan perkembangan pada aspek motorik dan sosial, serta tidak terjadinya perburukan tingkat motorik palsi serebri. Hasil skrining dan evaluasi fungsi pendengaran dan penglihatan pasien dinyatakan normal. Pasien menjalani 8 kali kunjungan poli akibat *common cold* dan pneumonia serta 1 periode rawat inap ulang akibat *community acquired pneumonia*. Tindakan identifikasi awal, pencegahan dengan edukasi dan imunisasi, serta intervensi dini dengan pemberian terapi yang tepat dan stimulasi serta fisioterapi berkelanjutan pada pasien kasus ini memberikan hasil kualitas hidup pasien yang lebih baik dan dapat mencegah perburukan akibat komplikasi pasien kurang bulan dan berat lahir rendah.



ABSTRACT

Preterm birth is defined as a birth before 37 completed weeks gestation, and it is also resulted low birth weight baby (weight at birth of less than 2500 grams). Preterm birth and low birth weight are closely associated with neonatal mortality, greater risk of morbidity, inhibited growth, impairment of developmental, and chronic diseases later in life in survivor baby. The complications of the organ prematurity are the underlying reasons for the higher rate of neonatal mortality. The risk of complications increases with increasing immaturity.

We reported the case of a 6-month-old baby girl with a history of preterm, low birth weight, dysplasia bronchopulmonary, periventricular leucomalasia and laryngomalaria. We conducted 18 months observation to evaluate patient's outcomes. During observation, the patient had normal growth, good growth velocity, and good nutritional status until the end of the observation. Patients could achieve catch-up growth at 6 months of age with nutritional interventions and oral physiotherapy due to a history of failure to thrive at 5 months. Patients has suffered from global developmental delay and cerebral palsy gross motor function classification system (GMFCS) grade 1 since the age of 9 months. Early intervention, include continuous stimulation and physiotherapy have been given to the patient during observation, and the results of improvement in the development of motor and social aspects, as well as the occurrence of worsening cerebral palsy motor level. The results of screening and evaluation of the hearing and vision function of the patient were declared normal. The patient underwent 8 times visited outpatient clinic due to common cold and pneumonia and 1 period of rehospitalization due to community acquired pneumonia. Early identification, prevention by education and immunization, as well as early intervention by providing appropriate therapy and stimulation and ongoing physiotherapy in patients in this case provided better patient's quality of life and could prevent worsening due to complications of patients with preterm and low birth weight.