



EDITORIAL

Retinopathy of Prematurity (ROP): Easy Abstain.

Mohamed Hashim*

*Correspondence:

Mohamed Hashim, Lecturer of Pediatrics, Department of Pediatrics, Faculty of Medicine, Minia University, Minia, Egypt. Email: hashimmoto@gmail.com

Retinopathy of prematurity (ROP) is one of the major problems affecting preterm infants admitted to NICUs. ROP now is spreading and more cases were recorded every year. This spreading may be due to several factors like the advanced services for sick neonates especially NICU services, respiratory support using high advanced ventilators and emerging economies which has led to greater survival of preterm infants.[1] ROP can affect both of preterm and full term infants and this is reflected in variation in the criteria for ROP screening in national guidelines for each country. Most of the guidelines depend on screening of preterm infants for ROP after discharge from NICUs using a gestational age (GA) of less than 32 weeks or a birth weight (BW) less than 1500 g as criteria for screening of preterm infants during the first 30 days of life after discharge. [2] Infants born with a GA of more than 28 weeks or with a BW of more than 1200g are more liable for thight threatening ROP so they should be screened earlier during the first two weeks of life. [3] Non-compliance of many families after discharge is one of the most obstacles facing ROP screening which may be due to financial or ignorance. [4] Screening before discharge is highly recommended in these situations to ensure that all infants at risk have at laest one examination. [5] In India this first examination of all eligible infants before discharge significantly increased compliance with screening after discharge from NICU. [6] Unfortunately up till now, all guidelines used for the detection and treatment of ROP have not reduced the spreading of it all over the world. This may be due to the variability in health systems and health financing between countries as well as variation in the socioeconomic status of families of preterm infants reflected on the follow-up visits for

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ROP. [7] Lastly, Screening for ROP using new and emerging technologies will bring new opportunities in screening for ROP. Key words: Retinopathy; Prematurity; Screening.

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