

Webinar 1

Slide no.1: In this webinar, we will discuss about the course of Retinopathy of prematurity

Slide No. 2: The objectives would be

- Magnitude
- Risk factors for ROP
- Clinical course of ROP

Slide No. 3:

- ROP is one of the leading causes of severe visual impairment in childhood. About 16 to 48% of ELBW, 27 to 35% of VLBW infants and 32% of LBW infants more than 1500 gram are affected by some degree of ROP.
- It is important to understand the need for timely screening for ROP to prevent irreversible loss of vision.

Slide No. 4: Risk factors

- Prematurity and Low birth weight are the most important risk factors for the development of ROP.
- Injudicious use of oxygen is also an another important risk.
- Other risk factors include blood transfusions and sepsis

Therefore, the sick and LBW babies have higher chance of developing ROP

Slide No. 5: Clinical course

- ROP is characterized by development of new abnormal blood vessels in the eyes of preterm infants
- Begins at 31- 32 weeks of postmenstrual age (PMA) and progresses over the next 2 to 5 weeks into severe forms
- However, ROP does not manifest before 2-3 weeks of postnatal age.

Slide No-6: Course of ROP

ROP can either spontaneously regress or progress to retinal detachment, leading to blindness. Therefore, timely screening will detect ROP requiring treatment earlier and avoid progression to severe forms at which time treatment will produce favourable outcomes

Slide no. 7: Key messages

- Prematurity and Low birth weight (LBW) are the most important risk factors
- Sick LBW child has higher chance of developing ROP
- Oxygen and blood should be used judiciously
- Untreated ROP can lead to retinal detachment and blindness
- Timely screening and treatment are mandatory