

## **CAUSES OF INFANT MORTALITY AUTOPSIED FROM 2000 TO 2005 IN THE SERVICE OF DEATH VERIFICATION OF RIBEIRÃO PRETO, SÃO PAULO STATE, BRAZIL.**

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**INTRODUCTION:** Infant mortality (IM), usually higher in poorer communities, is an important indicator of public health conditions. IM is classified as neonatal death (0 – 28 days) (ND), and post-neonatal death (29 days - 1 y-o) (PND). ND is further subclassified as *early ND* (0 – 6 days) and *late ND* (7 – 28 days). Analysis of IM data from Ribeirão Preto, São Paulo State, has shown that socioeconomic inequalities and differences in access to and quality of medical care affect IM rates. **AIM:** To identify the causes of IM diagnosed by autopsy examination at the Serviço de Verificação de Óbitos do Interior (SVOI) during a 6-year period. **METHODS:** Data were collected from January 2000 to December 2005 and analyzed in the Epi Info<sup>®</sup> software, version 3.3.2 (CDC, Atlanta). Only natural deaths, those without medical intervention, were studied. **RESULTS:** In total, 384 children were autopsied in the period, with 1.3:1 male-to-female ratio. There were 51% NDs (40.6% early and 10.4% late), and 49% PNDs. The main cause of death in both sexes was infectious disease (varying from 26% to 42,7% in the late ND and PND groups, for each sex), except in the 0 – 6 days group, in which perinatal (obstetric) causes precipitated 41% of deaths (e.g., intra-uterine anoxia, prematurity). **CONCLUSIONS:** The overwhelming predominance of death due to infectious disease and the increased incidence of perinatal (obstetric) causes of death in the early neonatal period suggest that there is much to be improved in terms of public health status since infectious diseases and early perinatal disease are avoidable causes of IM. These figures indicate that socioeconomic inequalities, deficient access to medical care, and poor primary care provided by the health services are common problems observed in the world's poorest communities.

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