Mortality in Paediatric Medical Services over a Two-Year Period at the Georgetown Public Hospital Corporation

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ABSTRACT

Objectives: To identify common causes and patterns of mortality and associated modifiable factors in Paediatric medical services, GPHC for 2016 and 2017.

Design and Methods: Descriptive, Cross-sectional retrospective study of all Paediatrics deaths for 2016 and 2017 from the Paediatrics Medical Ward and ICU at GPHC. Data were analysed using IBM SPSS version 23 for descriptive statistics.

Results: The Paediatrics Medical Ward saw 2419 admissions in 2016 and 2168 in 2017. There were 86 deaths recorded in the death registry during the two years, of which 57 deceased patient charts were reviewed, 29 charts (33.7%) were missing.

Of the 57 charts reviewed, 42.1% were males and 57.9% were females. The most common final diagnosis was bronchopneumonia/pneumonia (n=1 (22.8%), followed by sepsis (n= 12 (21.0%). This pattern was seen in both the general sample population and the patients ≤ 5 years. Some of the modifiable factors which showed clinical significance when compared with length of hospitalization were; lack of routine reviews on the ward (p value 0.016), poor documentation of consultation information on referral notes (p value 0.032) and poor or no pre-hospital treatment before transfer (p value 0.017).

Conclusions: Factors associated with mortality are mainly hospital-related and should, therefore, be given urgent attention for resolution which may reduce childhood mortality. In addition, the common causes of death are preventable and treatable respiratory and infectious diseases.

Recommendations: Develop referral, transfer and management protocols for critical patients. Sensitization of staff on modifiable factors to effect positive behavioural change.
Keywords: Mortality; paediatric medical services; public hospital.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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