

light in the bathrooms. This prospective longitudinal study was conducted in two large hospitals in Taiwan, with 2,460 participants in one hospital (intervention) and 2,451 participants in the other hospital (control). Results: In the intervention group, the incidence of postpartum falls within six months before intervention was 14.24 per 1000 patient-days, and dropped to 6.02 per 1000 patient-days within six months after intervention. The control group showed no marked decline in incidence with a rate of 13.72 and 14.05 per 1000 patient-days within six months, respectively. Using the Mantel-Haenszel test to compare the incident rate, there were significant differences ($p < 0.001$) between the incidence of the intervention group before and after intervention; and between the latter and each incidence of the control group. Conclusions: This study provides direct evidence that root cause analysis can be adopted in analyzing causes, and in formulating interventions to reduce the incidence of postpartum falls and improve patient safety.

SP-083

Low Birth Weight: Is Maternal Nutrition Is Associated with It?

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Low birth weight is one of the main factors for most of the childhood morbidity and mortality as well as for chronic illnesses in latter part of life. Major determinants for low birth weight in developing countries are poor maternal Nutritional status at conception and low gestational weight gain. A descriptive cross sectional study was done to identify the relationship between maternal nutrition, and low birth weight by using interviewer administered questionnaire with 524 mothers who delivered in maternity wards at teaching hospital Jaffna, during the period of 1st September to 30th September 2008. Interviewer administered questionnaire was used to collect data. Recordings were also made from clinic books, registers of labor rooms and bed head tickets. In this study low birth weight rate was 16.5%. Factors such low BMI of mother, number of parity, folic acid use prior to pregnancy, living in cemented house and house without proper chimney were statistically significant at p value 0.05 level. Food supplementation and home visits by PHM did not significant at same significant level. Low birth weight is still a significant problem. Problem needs early interventions before pregnancy rather than after getting pregnancy. ds over 250 will be cut off automatically.

SP-084

Factors Associated with Adolescent Pregnancy among Adolescent Primigravida Attending Antenatal Care Clinic at Samutsakorn Hospital, Samutsakorn Province, Thailand

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Adolescent pregnancy has been a critical public health problem since most adolescent confront various changes and development in term of physical, emotional, social and intelligent aspects. When they reach sexual maturity, sexual hormones will stimulate their sentiment. When adolescent getting pregnant, the effects are child health, adolescent development and family socio-economic development including national human resource development. The study was retrospective and case-control research with the objective of examining factors associated with adolescent pregnancy among adolescent primigravida attending the antenatal care clinic at Samutsakorn Hospital. Totally 203 adolescent primigravidas were selected as a study group and 203 non pregnant adolescents as a control group. Chi-square test and Odds ratio were used for data analysis. Data collection was conducted by self-administered questionnaires from June to August 2006. The factors which were significantly associated with adolescent pregnancy were occupation, educational level, experience of substance abuse, experience of smoking, sexual risk behavior, knowledge about sexuality, attitude towards premarital sex and peer's sexual risk behavior ($p < .05$). The factors which were the risk of getting adolescent pregnancy were not working/studying, low education, ever substance abuse, ever smoking, sexual risk behavior, and low knowledge about sexuality; agree with premarital sex and peer's sexual risk behavior. In conclusion, appropriate sexuality education in all level of school should be promoted. The safety environment for both school and residence could prevent children and adolescent from risk behavior.

SP-085

Risk Factor of Mortality Rate in Bantaeng District Indonesia 2005-2008

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According to Indonesian health demography survey in 2007, Maternal Mortality Rate (MMR) in Indonesia was 248/100.000 of live birth. This Study aimed to know the risk level of maternal age, maternal parity, birth attendants, and K4 Coverage of antenatal care to maternal mortality incident. Method of study was observational with case control design This study compared case groups of all mother undergoing maternal mortality incident in Bantaeng during 2005 to 2008 and control groups which didn't undergo maternal mortality

incident. The samples were 130 respondents with ratio 1 : 4, 26 cases and 104 controls. Data analyzed by using odds ratio (OR) statistic test 95% CI. The result showed that maternal parity, birth attendants, K4 coverage of antenatal care had a significant association as risk factors of maternal mortality incident with the value of each variables namely : maternal parity (OR 2,728 ; 95%CI 2,124-4,503). birth attendants (OR 3,080 ; 95%CI 2,124-4,503), K4 coverage of antenatal care (OR 3,600; 95% CI 1,446-8,964). While maternal age variable with value (OR 1,456 ; 95% CI 0,541-3,919) didn't have a significant association to maternal mortality incident. Maternal parity, birth attendants, and K4 coverage of antenatal care are risk factors for maternal mortality incident, while maternal age didn't have a significant association to maternal mortality incident.

SP-086

Identification of Causes of Neonatal Deaths in Resource Poor Settings: Validation of a Verbal Autopsy Tool in Orissa, India

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Background: Health planners need evidence-based mortality and morbidity pattern for prioritizing health needs and resource allocation, particularly in settings with weaker vital registration system. Verbal autopsy is the only alternative mean fulfilling the gap. Objective of the study was to validate a VA tool identifying the causes of neonatal deaths (CODs) in resource poor settings.

Methodology: This population based cross sectional study was conducted in two randomly selected districts with 223 Anganwadi centers. Trained non-health personnel administered the semi-structured, pre-tested VA tool to caregivers and ascertained CODs with help of expert algorithm. Medical records (MR) were taken as "Reference Standard" for validation.

Results and Discussion: The mean age at death was 6.2 days. The cause specific mortality fraction was calculated and adjusted for each assigned COD and found no significant difference among VA and MR diagnosis. The average recall period was 38 days with no significant relationship with accuracy of diagnosis ($p=0.127$). Majority CODs had good sensitivity and specificity except LBW, Sepsis, Tetanus and congenital anomalies. Combining LBW and prematurity to TETS (too-early-too-small) and sepsis related CODs into 'all sepsis' resulted better sensitivity and specificity. **Conclusion:** The tool proves to be good for diagnosing birth asphyxia, prematurity, pneumonia, jaundice and diarrhea; and provides room for improvement in identifying deaths due to other CODs. The need of the

hour is to improve and implement a VA tool in health system to identify the causes of neonatal deaths with no extra resources.

SP-087

Triage Scoring in Severity of Illness

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The prospective cross-sectional study was undertaken to study the utility of triage scoring for severity of illness based on clinical variables related to Systemic Inflammatory Response syndrome and Advanced Pediatric Life Support in predicting the outcome of sick children and to find an association of final outcome with abnormal clinical signs, to study the utility of triage for need of intensive care management and the utility of triage scoring system for predicting mortality among children between 2 months to 14 years. A total of 570 children requiring hospital admission through the emergency department in Kanti Children's Hospital, Nepal were randomly selected. Chi square test and fisher's exact test was used for data analysis. About three-fifth was above 5 years of age with acute respiratory tract infections, meningitis/meningoencephalitis, fever under evaluation were the most common diagnosis. Abnormal respiratory rate and temperature were the most commonly associated variables. The mortality was 23.9% in children having more than two abnormal clinical variables whereas the mortality was 2% in children having 2 or less abnormal variables. Systolic blood pressure, capillary refill time, oxygen saturation, and assessment of neurological status based upon AVPU classification showed was significantly associated ($p<0.001$) with the final outcome of the sick children.

Therefore, a severity illness score based on clinical signs alone can predict severity of illness and outcome and can be easily applied in emergency department in order to improve the management of sick children and for counseling with the attendants.

SP-088

Comparison of the Effect of Alcohol Application Versus Natural Drying in Umbilical Cord Care

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Background and Aims: The umbilical cord infection may contribute neonatal mortality and morbidity risk. The rigorous and proper regimen of umbilical cord care, therefore, has become a matter of great concern for prevention of infection. The aims of this study were to compare time to cord separation, parental satisfaction, and infection rate among newborns whose cords were treated with alcohol versus natural drying.

Methodology: The quasi-experimental, comparative study was conducted at a medical center in northern