RESULTS

The results of this study is presented in tables (2) to (16) & figures (34) to (45)

Table (2): Comparison between group I (Indomethacin) and group II (Ibuprofen) as regards some quantitative data.

	No	Group I n =20	No	Group II n =20	t	P-value	Sign
GA(wks)	20	30.7±2.5	20	30.4±1.7	0.44	> 0.05	NS
BW(gm)	20	1049±128	20	1146±260	1.4	> 0.05	NS
HC(cm)	20	27.3±0.8	20	27.6±0.9	0.41	> 0.05	NS
Length(cm)	20	38.2±1.3	20	39.3±1.4	2.11	> 0.05	NS
Age of the mother (yr)	20	26±3.3	20	26.8±3.4	0.75	> 0.05	NS
Heart rate	20	158.1±17.6	20	158.6±12.5	0.1	> 0.05	NS
Respiratory rate	20	65.9±9.1	20	64.3±9.8	0.29	> 0.05	NS

GA: gestational age, BW: body weight, HC: head circumference

This table shows no statistically significant differences between two groups as regards gestational age, body weight, head circumference, length, age of the mother, heart rate and respiratory rate.

P-value

> 0.05: Non significant

< 0.05: Significant

< 0.01: High significant

< 0.001: High significant

Table (3): Comparison between group I (Indomethacin) and group II (Ibuprofen) as regards some qualitative data.

			roup I N=20 %		oup II N=20 0 %		Γotal No %	Z	P- value	Significance
Multiple	Single	14	70%	13	65%	27	67.5%	0.34	> 0.05	NS
pregnancy	Multiple	6	30%	7	35%	13	32.5%	0.28	> 0.05	NS
Sex	Female	12	60%	14	70%	26	65%	0.66	> 0.05	NS
	Male	8	40%	6	30%	14	35%	0.53	> 0.05	NS
Mode of	CS	13	65%	12	60%	25	62.5%	0.2	> 0.05	NS
delivery	Vaginal	7	35%	8	40%	15	37.5%	0.32	> 0.05	NS

CS: cesarean section

This table shows no statistically significant differences between group (I, II) as regards multiple pregnancy, sex and mode of delivery.

Group I (Indomethacin)

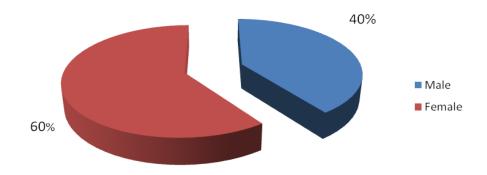


Figure (34): Sex distribution in group 1

GroupII (Ibuprofen)

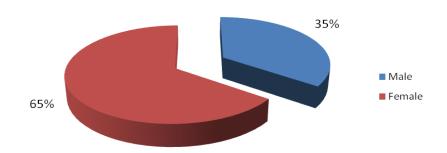


Figure (35): Sex distribution in group II

Group I (Indomethacin)

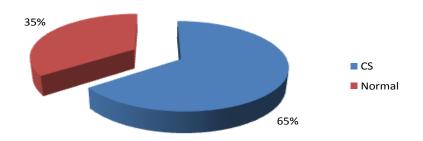


Figure (36): Mode of delivery in group I

GroupII (Ibuprofen)

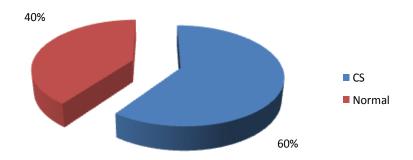


Figure (37): Mode of delivery in group II

Table (4): Comparison between group I (Indomethacin) and group II (Ibuprofen) as regards risk factors for prematurity.

			Group I N=20 No %		roup II N=20 o %	z	P-value	Significance
Maternal diabetes mellitus	No Yes	17 3	85% 15%	18	90%	0.45	> 0.05	NS
PROM	No Yes	12 8	60% 40%	14 6	70% 30%	0.34	> 0.05	NS
Prenatal asphyxia	No Yes	18 2	80% 20%	19 1	95% 5%	0.53	> 0.05	NS
Maternal hypertension or	No Yes	15 5	75% 25%	17 3	85% 15%	0.53	> 0.05	NS
Preeclampsia	103		25 / 0		15 /0			

PROM: premature rupture of membrane

This table shows no statistically significant difference between the two groups regarding risk factors for prematurity as "maternal diabetes, prenatal asphyxia, premature rupture of membranes, and preeclampsia".

Table (5): Comparison between group I (Indomethacin) and group II (Ibuprofen) as regards respiratory distress syndrome, respiratory aids and any medical problems.

		Gr	oup I	Gro	up II			
		N	=20	N	=20	z	P-value	Significance
		No	%	No	%			
Respiratory	No	2	10%	3	15%			
distress syndrome	Yes	18	90%	17	85%	0.05	> 0.05	NS
Oxygen only	No	2	10%	1	5%	0.04	> 0.05	NS
0 - 1, g - 1 - 1 - 1	Yes	18	90%	19	95%			
	No	10	50%	12	60%	0.47	> 0.05	NS
NCPAP	Yes	10	50%	8	40%			2 1.0
MV	No	10	50%	14	70%	1.01	> 0.05	NS
141 4	Yes	10	50%	6	30%			2
Other medical	No	18	90%	18	90%	_	_	-
problems*	Yes	2	10%	2	10%			

MV: mechanical ventilation, NCPAP: Nasal continuous positive airway pressure.

This table shows no statistically significant differences between the two groups as regards respiratory distress syndrome, intermittent mandatory ventilation, nasal continuous positive airway pressure, oxygen supplementation and other medical problems.

^{*}Other medical problems: hypoglycemia, sepsis,...etc.

Table (6): Comparison between group I (Indomethacin) and group II (Ibuprofen) as regards duration of respiratory aids in days.

Item	Group I	Group II	t	P-value	significance
IMV	3.7±4.6	2.4±4.7	0.87	> 0.05	NS
NCPAP	1.4±2.2	0.85±1.2	0.98	> 0.05	NS
Oxygen*	1.65±2.1	1.05±1.4	1.06	> 0.05	NS

^{*} Total duration of oxygen treatment

This table shows no statistically significant differences between group I and group II as regards duration of respiratory aids.

Although there was no significant difference regarding MV in both groups, the first group received MV for longer duration 3.7±4.6 versus 2.4±4.7 in the 2nd group. Also the first group received NCPAP for longer duration 1.4±2.2 versus 0.85±1.2 in the 2nd group.

Table (7): Comparison between group I (Indomethacin) and group II (Ibuprofen) as regards clinical presentation of PDA and degree of shunting according to ECHO.

			roup I N=20 %		oup II N=20 %	Z	P- value	significance	
Murmur '' Systolic or Continuous''	Yes	20	100%	20	100%	1		-	
Tachycardia	No	8	40%	9	45%	0.102	> 0.05	NS	
Tacifycardia	Yes	12	60%	11	55%	0.102	/ 0.03	113	
Hyperdynamic	No	3	15%	2	10%	0.18	> 0.05	NS	
Precordium	Yes	17	85%	18	90%	0.10	<i>></i> 0.05	146	
Cardiomegaly	No	16	80%	17	85%	0.45	> 0.05	NS	
Cardiomegaly	Yes	4	20%	3	15%	0.43	> 0.05		
	Mild	6	30%	5	25%	0.3 > 0.05			
Degree of ductal shunt	Moderate	13	65%	15	75%	0.38	> 0.05	NS	
	severe	1	5%	0	0%	1.01	> 0.05		
Pulmonary	No	11	55%	15	75%	1.07	> 0.05	NIC	
hypertension	Yes	9	45%	5	25%	1.07	> 0.05	NS	
Desaturation or	No	5	25%	4	20%			NS	
increase ventilatory support.	Yes	15	75%	16	80%	0.28	> 0.05	NS	

This table shows no statistically significant differences between the two groups as regards systolic murmur, hyperdynamic precordium, tachycardia, cardiomegaly degree of ductal shunt and pulmonary hypertension. Ductal shunting could be suspected in small preterm infant with respiratory distress when there is deterioration of respiratory functions and /or increase ventilatory setting after day 3or 4 of life.

Table (8): Comparison between the two groups (I,II) as regard some echocardiographic findings

Item	Group 1	Group 2	Т	P-value	significance
PDA size (cm)	1.55±0.7	1.43±0.3	0.65	> 0.05	NS
LA-AO ratio	1.17±0.2	1.2±0.2	0.55	> 0.05	NS
Pressure gradient (mm Hg)	11.13±4.2	12.76±6.52	0.6	> 0.05	NS

PDA: patent ductus arteriosus, LA-AO: left atrium to aortic root

This table shows no statistically significant difference between the two groups as regards patent ductus arteriosus size and left atrium to aortic root ratio.

NB. LA/AO ratio used as indicator for severity and degree of shunting as it detects the size of the left atrium which increases according to the severity of the shunting.

Pressure gradient across the ductus also is an indicator for size of the ductus as it increases with closure of the ductus and vice versa.

Table (9): Comparison between the two subgroups during 2-7 days of life of groups (I&II) as regards effect of treatment on the of PDA size.

Item		Before treatement	After treatment	z	P-value	Significan ce
GI a	Closed	0 0%	8 80%	3.65	<0.001	HS
"Indomethacin" "2-7 days"	open	10 100%	2 20%	2.3	< 0.05	S
GII a	Closed	0 0%	8 80%	3.28	<0.001	HS
"Ibuprofen" "2-7 days"	Open	10 100%	2 20%	1.94	< 0.05	S

This table shows high statistically significant difference between both subgroups (a) of both main groups before and after treatment, meaning that the Ibuprofen has the same efficacy of IV indomethacin during first 2-7 days of life.

NB. closed ductus means completely closure or restrictive ductus which can be detected as following:

Clinically: through improvement of symptoms and signs of PDA as "disappearance or decrease of tachypnea, tachycardia, pericardial pulsation and decrease ventilatory setting"

ECHO:

- Increase pressure gradient through the ductus.
- Appearance of systolic flow inspite of continous flow through the ductus.
- Decrease diameter of both ampullary and pulmonary ends of the ductus.
- Decrease left side diameter" left atrium and left ventricle".
- Decrease degree of mitral regurge murmur if it is present.

Table (10):Comparison between the two subgroups during 8-35 days of life of groups (I&II) as regards size of PDA before and after treatment.

Item		Before treatment			After treatment		P-value	Significance
GI b	Closed	0	0%	7	70%	3.65	<0.001	HS
"Indomethacin" "8-35 days"	open	10	100%	3	30%	2.3	< 0.05	S
GII b	Closed	0	0%	2	20%	1.49	> 0.05	NS
"Ibuprofen" "8-35 days"	Open	10	100%	8	80%	0.47	> 0.05	NS

This table shows high statistically significant in G I b before and after treatment, meaning that the Indomethacin retain its efficacy after 7 days of birth. While G II b shows no significant difference before and after treatment, meaning that the Ibuprofen has limited efficacy after 7 days of birth.

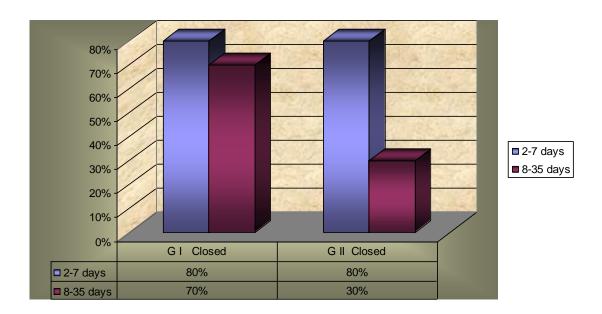


Figure (38): Effect of the treatment on closure of PDA during 2-7 days and 8-35 days.

Table (11): Comparison between urine output & laboratory values before treatment in group I (Indomethacin) and group II (Ibuprofen).

Item	Group I	Group II	t	P- value	significance
Urine output (cc/kg/hr)	2.26±.696	2.120±.518	0.722	> 0.05	NS
Hgb	13.8±2.1	14.6±1.8	0.66	> 0.05	NS
RBCs (×10 ⁶ /mm ³)	4.41±0.6	4.28±0.7	0.63	> 0.05	NS
НСТ	44.3±8.2	42.2±6.1	0.92	> 0.05	NS
Total leucocytic count (×10³/mm³)	7.93±3.032	8.17±4.795	0.185	> 0.05	NS
Platelet count(×10³/mm³)	194.3±32.092	172.3±55.816	1.147	> 0.05	NS
Creatinine level (mg/dl)	0.580±.176	0.472±.179	1.913	> 0.05	NS
BUN (mg/dl)	16.75±2.099	15.80±2.567	1.281	> 0.05	NS
Prothrombin time (sec)	13.27±1.662	13.22±1.951	0.087	> 0.05	NS
Partial thromboplastin time (sec)	40.98±3.071	39.15±7.191	1.047	> 0.05	NS
CRP	2.4±4	4.2±7.8	0.91	> 0.05	NS

BUN: blood urea nitrogen Hgb: Haemoglobin HCT: Haematocrite

This table shows no statistically significant differences between the two groups before treatment regarding urine output, haemoglobin, RBCs, haematocrite, total leucocytic count, platelet count, blood urea nitrogen, creatinine, prothrombin time, partial thromboplastin time, and CRP.

Table (12): Comparison between urine output & laboratory markers before and after treatment in Indomethacin group.

Item	Before treatment No = 20 Mean±SD	After treatment No = 20 Mean±SD	Paired t	P-value	significance
Urine output (ml /kg/hr)	2.260±0.696	1.400±0.565	7.931	< 0.001	HS
Hgb	13.8±2.1	13.96±2.2	0.2	> 0.05	NS
RBCs (×10 ⁶ /mm ³)	4.41±0.6	4.19±0.6	0.77	> 0.05	NS
НСТ	44.3±8.2	40.9±7.9	1.12	> 0.05	NS
Total leucocytic count (×10³/mm³)	19.6±12.1	20.47±10.4	0.21	> 0.05	NS
Platelet count (×10 ³ /mm ³)	194.30±32.092	125.45±19.972	2.95	< 0.05	S
Creatinine level (mg/dl)	0.58±0.176	0.945±0.463	3.974	< 0.001	HS
BUN (mg/dl)	16.75±2.099	20.35±2.943	6.55	< 0.001	HS
Prothrombin time (sec)	13.27±1.662	15.44±2.383	1.85	> 0.05	NS
Partial thromboplastin time (sec)	40.98±3.071	45.98±3.071	1.65	> 0.05	NS
CRP	2.4±4	6.9±10.9	0.98	> 0.05	NS

BUN: Blood urea nitrogen

NB, after treatment means that results were obtained at 0-24 hours after administration of last dose.

This table shows no statistically significant differences in Indomethacin group after treatment regarding haemoglobin, RBCs, haematocrite, total leucocytic count, , PT, PTT and CRP " although there's no significant difference in CRP but it changed from negative "< 6" to the positive "> 6".

But there's significant difference in platelet count and urine output synchronized with increase in serum creatinine level and blood urea nitrogen.

Table (13): Comparison between urine output & laboratory values before and after treatment in Ibuprofen group.

Item	Before treatment No = 20 Mean±SD			P- value	significance
Urine output (ml/kg/hr)	2.120±0.517	1.915±0.563	2.04	> 0.05	NS
Hgb	14.6±1.8	13.7±1.9	0.9	> 0.05	NS
RBCs (×10 ⁶ /mm ³)	4.28±0.7	4.37±0.6	0.32	> 0.05	NS
НСТ	42.2±6.1	44.1±7.8	0.48	> 0.05	NS
Total leucocytic count(×10³/mm³)	16.6±7.6	18.24±10.4	0.42	> 0.05	NS
Platelet count(×10³/mm³)	172.3±55.816	168.1±39.754	1.122	> 0.05	NS
Creatinine level (mg/dl)	0.57±0.1	0.64±0.2	0.68	> 0.05	NS
BUN (mg/dl)	15.83±2.567	17.35±3.249	0.95	> 0.05	NS
Prothrombin time (sec)	13.22±1.951	14.43±2.843	1.01	> 0.05	NS
Partial thromboplastin time (sec)	39.15±7.191	40.98±3.071	0.92	> 0.05	NS
CRP	4.2±7.8	2.7±5.99	0.39	> 0.05	NS

BUN: Blood urea nitrogen

This table shows no statistically significant differences in Ibuprofen group after treatment regarding urine output, haemoglobin, RBCs, haematocrite, total leucocytic count, platelet count, blood urea nitrogen, creatinine, prothrombin time, partial thromboplastin time, and CRP.

Results —

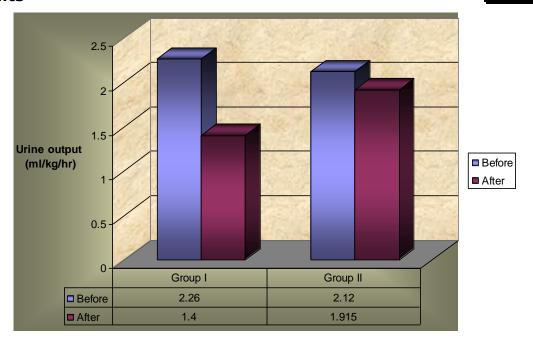


Figure (39): Urine output before and after treatment in both Indomethacin and Ibuprofen group

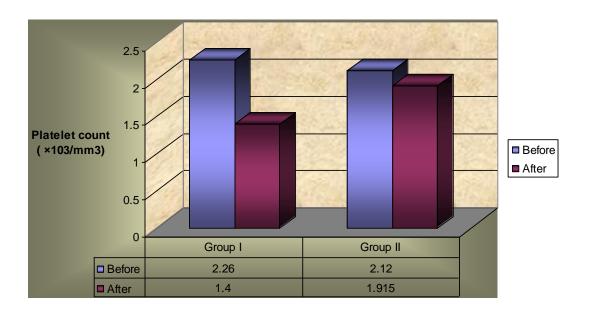


Figure (40): Platelet count before and after treatment in both iIndomethacin and Ibuprofen group

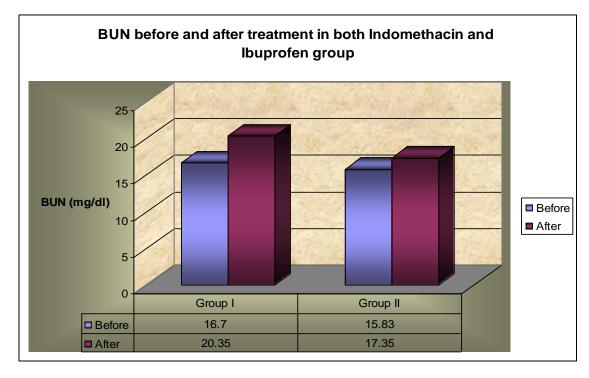


Figure (41): BUN before and after treatment in both Indomethacin and Ibuprofen group.

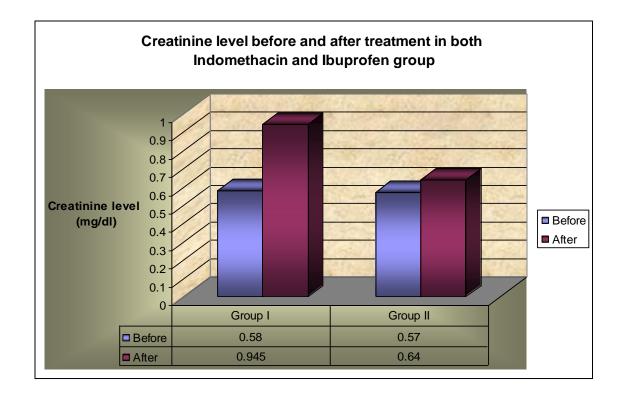


Figure (42): Creatinine level before and after treatment in both Indomethacin and Ibuprofen group

Table (14): Comparison between group I (Indomethacin) and group II (Ibuprofen) after treatment

Item	Group I No = 20 Mean±SD	Group II No = 20 Mean±SD	t	P-value	significance
Urine output (ml/kg/hr)	1.40±.566	1.915±.563	2.885	< 0.01	HS
Hgb	13.96±2.2	13.7±1.9	0.31	> 0.05	NS
RBCs (×10 ⁶ /mm ³)	4.19±0.6	4.37±0.6	0.95	> 0.05	NS
HCT	40.9±7.9	44.1±7.8	1.29	> 0.05	NS
Total leucocytic count (×10³/mm³)	20.47±10.4	18.24±10.4	1.01	> 0.05	NS
Platelet count (×10 ³ /mm ³)	125.45±19.972	168.1±39.754	2.9	< 0.05	S
Creatinine level (mg/dl)	0.945±.463	0.64±0.2	2.96	< 0.05	S
BUN (mg/dl)	20.35±2.943	17.35±3.249	3.01	< 0.05	S
Prothrombin time (sec)	15.43±2.383	14.43±2.843	0.004	> 0.05	NS
Partial thromboplastin time (sec)	45.98±3.071	40.98±3.071	0.38	> 0.05	NS
CRP	6.9±10.9	2.7±5.99	1.03	> 0.05	NS

BUN: blood urea nitrogen

This table shows no statistically significant differences between the two groups after treatment regarding haemoglobin, RBCs, haematocrite, total leucocytic count, prothrombin time and partial thromboplastin time, and CRP.

But there's high significant difference in urine output with significant difference in creatinine level and blood urea nitrogen.

Also there's significant difference in platelet count which decreases in Indomethacin group more than Ibuprofen group.

Table (15): Comparison between group I (Indomethacin) and group II (Ibuprofen) regarding early complications (within 7 days)

Grou		oup I	Group II				_	
		N=20		N=20		Z	P-value	significance
		No	%	No	%			
Necrotizing enterocolitis	No	18	90%	20	100%	1.13	> 0.05	NS
	Yes	2	10%	0	0%			
GIT bleeding	No	17	85%	19	95%	1.9	< 0.05	S
	Yes	3	15%	1	5%			
	No	18	90%	20	100%			
Bowel perforation	Yes	2	10 %	0	0 %	1.01	> 0.05	NS
Intracranial Hemorrhage	No	18	90%	20	100%	2.11	< 0.05	S
	Yes	2	10%	0	0 %			
*Oliguria	No	16	80%	19	95%	1.89	< 0.05	S
	Yes	4	20%	1	5%			

GIT: gastrointestinal tract

*Oliguria: urine output <1 cc/kg/hr

This table shows statistically significant increased frequency of gastrointestinal bleeding, intracranial hemorrhage and oliguria in group I when compared to group II.

Other early complications show no statistically significant difference between the two groups.

Results —

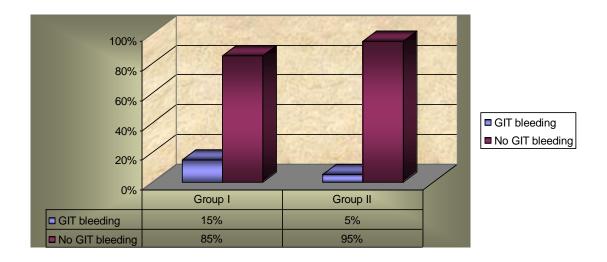


Figure (43): GIT bleeding after treatment in both groups

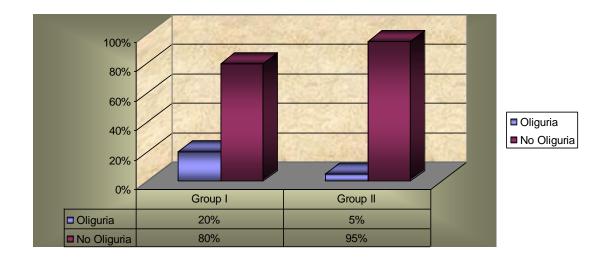


Figure (44): Oliguria after treatment in both groups.

Table (16): Comparison between the two groups regarding late complications (from the 8th day to 2 months).

		Group I N=20 No %	Group II N=20 No %	X ²	P-value	significance
Bronchopulmonary dysplasia	No Yes	16 0%	16 80% 4 20%	0.00	> 0.05	NS
Mortality	live dead	14 70% 6 30%	15 75% 5 25%	0.102	> 0.05	NS

This table shows non-significant statistical difference between the two groups as regards late outcome (8 days to 60 days) as bronchopulmonary dysplasia and the mortality rate.

Causes of death in group (1):

- 3 patients died due to complications of neonatal sepsis.
- 1 patient died due to pneumothorax as a complication of mechanical ventilation.
- 1 patient died due to hypoxic ischemic encephalopathy and intraventricular hemorrhage grade IV.
- 1 patient died due to heart failure.

Causes of death in group (II):

- 3 patients died due to complications of neonatal sepsis.
- 1 patient died due to pneumothorax as a complication of mechanical ventilation.
- 1 patient died due pulmonary hemorrhage.

Results —

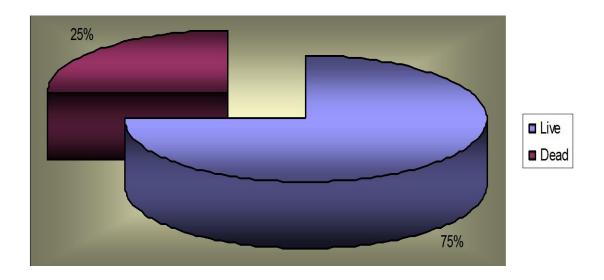


Figure (45): Mortality among Ibuprofen group

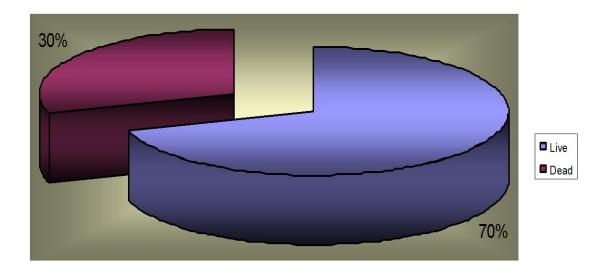


Figure (46): Mortality among Indomethacin group