

Basic definitions

Apgar score

Mors praenatalis

Mors neonatalis

Pneumopathology  
of the newborn

# Pathology of the newborn

# Basic definitions

- ▶ Abortion
- ▶ Delivery
- ▶ Fetus immaturus non vitalis
- ▶ Fetus immaturus vitalis
- ▶ Fetus maturus
- ▶ Fetus permaturus

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- 
- ▶ dead born fetus < 1000 g
  - ▶ alive born fetus < 500 g, if survives no longer than 24 hours

# Basic definitions

- ▶ Abortion
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- ▶ Fetus immaturus non vitalis
- ▶ Fetus immaturus vitalis
- ▶ Fetus maturus
- ▶ Fetus permaturus

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- 
- ▶ alive born fetus over 500 g
  - ▶ alive born fetus under 500 g, surviving more than 24 hours

# Basic definitions

- ▶ Abortion
- ▶ Delivery
- ▶ **Fetus immaturus non vitalis**
- ▶ Fetus immaturus vitalis
- ▶ Fetus maturus
- ▶ Fetus permaturus

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- 
- ▶ weight less than 1000 g
  - ▶ usual length under 38 cm
  - ▶ born before 28 week of gestation

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- ▶ Abortion
- ▶ Delivery
- ▶ Fetus immaturus non vitalis
- ▶ **Fetus immaturus vitalis**
- ▶ Fetus maturus
- ▶ Fetus permaturus

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- 
- ▶ weight 1000 – 2500
  - ▶ 29 – 38 week

# Basic definitions

- ▶ Abortion
  - ▶ Delivery
  - ▶ Fetus immaturus non vitalis
  - ▶ Fetus immaturus vitalis
  - ▶ **Fetus matus**
  - ▶ Fetus permaturus
- 

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# Basic definitions

- ▶ Abortion
- ▶ Delivery
- ▶ Fetus immaturus non vitalis
- ▶ Fetus immaturus vitalis
- ▶ Fetus maturus
- ▶ **Fetus permaturus**

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- 
- ▶ weight over 4000 g
  - ▶ length over 52 cm
  - ▶ born after 41 week of gestation

# Hypotrophy of the fetus

- ▶ Small for date
  - ▶ Multiple pregnancy
- 

- ▶ placental insufficiency
- ▶ metabolic diseases
- ▶ alcohol
- ▶ ...

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# Hypotrophy of the fetus

- ▶ Small for date
  - ▶ **Multiple pregnancy**
- 

- ▶ physiological
- ▶ child is small, but usually quickly catches up

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# Apgar score

- ▶ Heart rate
  - ▶ Respiration
  - ▶ Muscular tone
  - ▶ Reaction to nasal catether
  - ▶ Color
- 

- ▶ not present (0 points)
- ▶ under 100 (1 point)
- ▶ over 100 (2 points)

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# Apgar score

- ▶ Heart rate
  - ▶ **Respiration**
  - ▶ Muscular tone
  - ▶ Reaction to nasal catether
  - ▶ Color
- 

- ▶ not present (0 points)
- ▶ slow, irregular (1 point)
- ▶ good, cry (2 points)

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# Apgar score

- ▶ Heart rate
  - ▶ Respiration
  - ▶ **Muscular tone**
  - ▶ Reaction to nasal catether
  - ▶ Color
- 

- ▶ week (0 points)
- ▶ extremities flexed (1 point)
- ▶ active movements (2 points)

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# Apgar score

- ▶ Heart rate
  - ▶ Respiration
  - ▶ Muscular tone
  - ▶ Reaction to nasal catether
  - ▶ Color
- 

- ▶ no response (0 points)
- ▶ grimase (1 point)
- ▶ cry (2 points)

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# Apgar score

- ▶ Heart rate
  - ▶ Respiration
  - ▶ Muscular tone
  - ▶ Reaction to nasal catether
  - ▶ Color
- 

- ▶ general cyanosis (0 points)
- ▶ body pink, extremities cyanotic (1 point)
- ▶ whole newborn is pink (2 points)

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# Results of Apgar score

- ▶ AS < 2
  - ▶ AS 4 – 6
  - ▶ AS > 7
- 
- ▶ mortality 50 %

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# Results of Apgar score

- ▶ AS < 2
  - ▶ AS 4 – 6
  - ▶ AS > 7
- 
- ▶ mortality 20 %

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# Results of Apgar score

- ▶ AS < 2
  - ▶ AS 4 – 6
  - ▶ AS > 7
- 
- ▶ almost all newborns survive

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# Mors praenatalis

- ▶ No signs of life
  - ▶ Maceration (I. – III. grade)
  - ▶ Intrauterine asphyxia
- 
- ▶ no respiration, heart action, movement

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# Mors praenatalis

- ▶ No signs of life
  - ▶ Maceration (I. – III. grade)
  - ▶ Intrauterine asphyxia
- 

- ▶ I.: skin
- ▶ II.: organs, brain
- ▶ III.: softening of ligaments and joints

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# Mors praenatalis

- ▶ No signs of life
  - ▶ Maceration (I. – III. grade)
  - ▶ **Intrauterine asphyxia**
- 

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- ▶ alteration of the heart rate
- ▶ petechiae, ecchymoses
- ▶ release of meconium into the amniotic fluid
- ▶ premature activation of respiration
- ▶ aspiration of amniotic fluid (lanugo, meconium bodies)

# Macerace, gr. III.

Pathology of the newborn



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# Macerace, gr. III.

Pathology of the newborn



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**Mors neonatalis**

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# Mors neonatalis

- ▶ Before the 28th day
- ▶ Mechanical trauma during the delivery
- ▶ Ischemia during the delivery
- ▶ Morbus haemorrhagicus neonatorum
- ▶ Sepsis neonatorum
- ▶ Congenital malformations, genetic diseases
- ▶ Congenital tumors

- 
- ▶ early newborns: up to 7th day

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# Mors neonatalis

- ▶ Before the 28th day
  - ▶ Mechanical trauma during the delivery
  - ▶ Ischemia during the delivery
  - ▶ Morbus haemorrhagicus neonatorum
  - ▶ Sepsis neonatorum
  - ▶ Congenital malformations, genetic diseases
  - ▶ Congenital tumors
- 

- ▶ CNS hemorrhage
- ▶ rupture of the tentorium
- ▶ spinal column trauma
- ▶ bone fractures
- ▶ hematomas

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# Mors neonatalis

- ▶ Before the 28th day
- ▶ Mechanical trauma during the delivery
- ▶ Ischemia during the delivery
- ▶ Morbus haemorrhagicus neonatorum
- ▶ Sepsis neonatorum
- ▶ Congenital malformations, genetic diseases
- ▶ Congenital tumors

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- ▶ damage and bleeding into the CNS (especially in immature newborns)

# Mors neonatalis

- ▶ Before the 28th day
- ▶ Mechanical trauma during the delivery
- ▶ Ischemia during the delivery
- ▶ **Morbus haemorrhagicus neonatorum**
- ▶ Sepsis neonatorum
- ▶ Congenital malformations, genetic diseases
- ▶ Congenital tumors

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- ▶ hemorrhagic diathesis (lack of vitamin K)
- ▶ multiple organ bleedings

# Mors neonatalis

- ▶ Before the 28th day
  - ▶ Mechanical trauma during the delivery
  - ▶ Ischemia during the delivery
  - ▶ Morbus haemorrhagicus neonatorum
  - ▶ **Sepsis neonatorum**
  - ▶ Congenital malformations, genetic diseases
  - ▶ Congenital tumors
- 

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of the newborn

- ▶ abruptio of the placenta
- ▶ chorioamnionitis
- ▶ generalized infection of the mother
- ▶ respirators, cateters (umbilical cateters)

# Mors neonatalis

- ▶ Before the 28th day
- ▶ Mechanical trauma during the delivery
- ▶ Ischemia during the delivery
- ▶ Morbus haemorrhagicus neonatorum
- ▶ Sepsis neonatorum
- ▶ **Congenital malformations, genetic diseases**
- ▶ Congenital tumors

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of the newborn

- 
- ▶ organ malformations (CNS, the heard and blood vessels, urogenital tract)

# Mors neonatalis

- ▶ Before the 28th day
  - ▶ Mechanical trauma during the delivery
  - ▶ Ischemia during the delivery
  - ▶ Morbus haemorrhagicus neonatorum
  - ▶ Sepsis neonatorum
  - ▶ Congenital malformations, genetic diseases
  - ▶ **Congenital tumors**
- 

- ▶ teratomas
- ▶ Willms tumor
- ▶ nephroblastoma
- ▶ retinoblastoma
- ▶ hepatoblastoma

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# Immaturity

- ▶ Lungs
- ▶ CNS
- ▶ Kidney
- ▶ Intestine

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of the newborn

- 
- ▶ to 24. week: tubuloalveolar
  - ▶ to 28. week: transformation to alveolar lung
  - ▶ to 29. week: the lungs are fully alveolar
  - ▶ further development, pneumocytes of the 1st and 2nd type, surfactant production

# Immaturity

- ▶ Lungs
- ▶ CNS
- ▶ Kidney
- ▶ Intestine

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of the newborn

- 
- ▶ gyration of the brain: after 6th month
  - ▶ persistency of the germinative periventricular layer

# Immaturity

- ▶ Lungs
- ▶ CNS
- ▶ Kidney
- ▶ Intestine

- 
- ▶ immature glomeruli

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# Immaturity

- ▶ Lungs
- ▶ CNS
- ▶ Kidney
- ▶ **Intestine**

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Pneumopathology  
of the newborn

# Pneumopathology of the newborn

- ▶ Hyaline membranes
- ▶ Bronchopulmonary dysplasia
- ▶ Interstitial emphysema
- ▶ Aspiration of amniotic fluid
- ▶ Adnate bronchopneumonia
- ▶ Atelectasis

Basic definitions

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Pneumopathology  
of the newborn

- 
- ▶ immaturity of pulmonary parenchyma
  - ▶ affects immature newborns

# Pneumopathology of the newborn

- ▶ Hyaline membranes
- ▶ **Bronchopulmonary dysplasia**
- ▶ Interstitial emphysema
- ▶ Aspiration of amniotic fluid
- ▶ Adnate bronchopneumonia
- ▶ Atelectasis

---

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Pneumopathology  
of the newborn

- ▶ affects newborns, who survived the RDS with hyaline membranes
- ▶ corresponds to reparation of pulmonary tissue

# Pneumopathology of the newborn

- ▶ Hyaline membranes
- ▶ Bronchopulmonary dysplasia
- ▶ **Interstitial emphysema**
- ▶ Aspiration of amniotic fluid
- ▶ Adnate bronchopneumonia
- ▶ Atelectasis

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Pneumopathology  
of the newborn

- 
- ▶ caused by artificial ventilation of the newborns with atelectasis
  - ▶ gas bubbles enter the interstitium
  - ▶ may get as far as soft tissues of the mediastinum

# Pneumopathology of the newborn

- ▶ Hyaline membranes
- ▶ Bronchopulmonary dysplasia
- ▶ Interstitial emphysema
- ▶ **Aspiration of amniotic fluid**
- ▶ Adnate bronchopneumonia
- ▶ Atelectasis

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Pneumopathology  
of the newborn

- 
- ▶ fetal asphyxia
  - ▶ premature activation of the respiratory reflex

# Pneumopathology of the newborn

- ▶ Hyaline membranes
- ▶ Bronchopulmonary dysplasia
- ▶ Interstitial emphysema
- ▶ Aspiration of amniotic fluid
- ▶ **Adnate bronchopneumonia**
- ▶ Atelectasis

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Pneumopathology  
of the newborn

- 
- ▶ infection of the mother
  - ▶ amniotic fluid infection

# Pneumopathology of the newborn

- ▶ Hyaline membranes
- ▶ Bronchopulmonary dysplasia
- ▶ Interstitial emphysema
- ▶ Aspiration of amniotic fluid
- ▶ Adnate bronchopneumonia
- ▶ Atelectasis

- 
- ▶ not enough air within the lungs

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of the newborn

# Hyaline membrane syndrome

- ▶ Affects immature newborns
- ▶ RDS, immature lung
- ▶ Oxygen administration is necessary
- ▶ Toxic oxygen damages alveolar lining

- 
- ▶ under 2000 g

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of the newborn

# Hyaline membrane syndrome

- ▶ Affects immature newborns
  - ▶ **RDS, immature lung**
  - ▶ Oxygen administration is necessary
  - ▶ Toxic oxygen damages alveolar lining
- 

- ▶ no surfactant (pneumocytes of the 2nd type)
- ▶ the lung collapses during the expirium
- ▶ inspiration requires increased effort

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of the newborn

# Hyaline membrane syndrome

- ▶ Affects immature newborns
  - ▶ RDS, immature lung
  - ▶ **Oxygen administration is necessary**
  - ▶ Toxic oxygen damages alveolar lining
- 

- ▶ increased concentration of oxygen is inevitable (incubator)
- ▶ it is necessary to keep oxygen levels as low as possible
- ▶ lung damage
- ▶ retinal damage (retrolental fibroplasia)

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# Hyaline membrane syndrome

- ▶ Affects immature newborns
  - ▶ RDS, immature lung
  - ▶ Oxygen administration is necessary
  - ▶ **Toxic oxygen damages alveolar lining**
- 

- ▶ necrotic alveolar lining and exsudate forms hyaline membranes
- ▶ especially ventilated alveoli are damaged
- ▶ the condition improves in surviving patients

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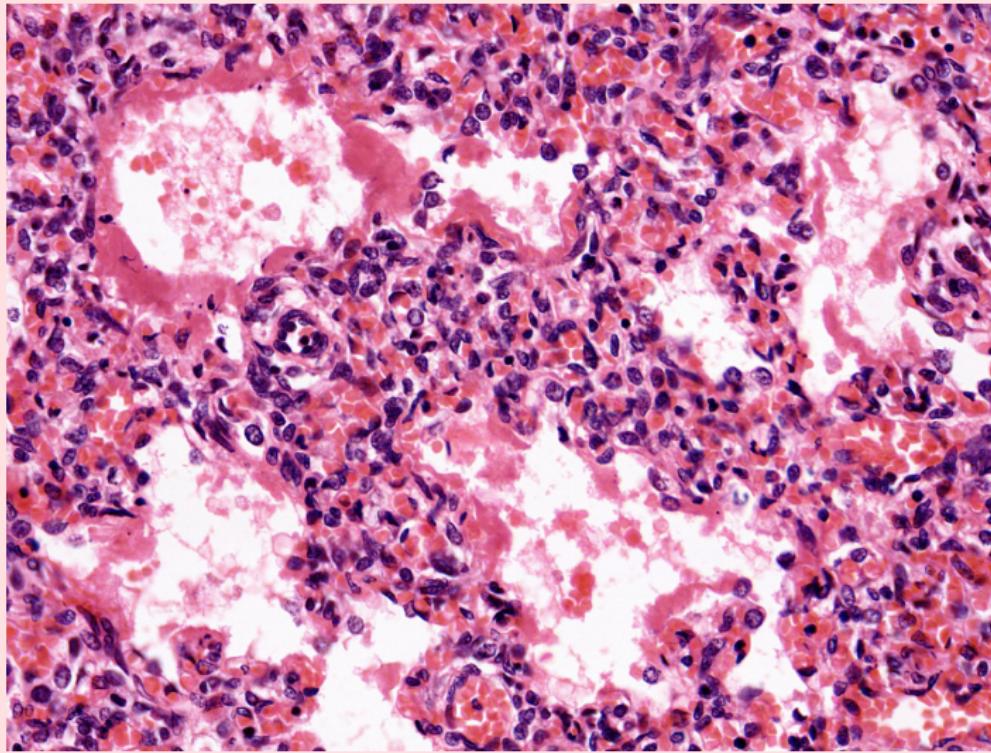
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# Hyaline membranes



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# Bronchopulmonary dysplasia

- ▶ Clinical signs
  - ▶ Pathogenesis
  - ▶ Histology
- 

- ▶ immature newborns
- ▶ survived RDS, who were treated with oxygen therapy and artificial ventilation
- ▶ changes develop gradually during months
- ▶ death often within 6 months, surviving have pulmonary disease

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# Bronchopulmonary dysplasia

- ▶ Clinical signs
  - ▶ Pathogenesis
  - ▶ Histology
- 

- ▶ ventilated alveoli damaged by oxygen disappear (fibrosis)
- ▶ perialveolar fibrosis develops in partially damaged alveoli
- ▶ previously unventilated (atelectatic) alveoli develop normally (or get hyperexpanded)

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# Bronchopulmonary dysplasia

- ▶ Clinical signs
  - ▶ Pathogenesis
  - ▶ Histology
- 

- ▶ the surface of the lungs is uneven
- ▶ fibrosis, irregular dilatation of alveoli (compensatory emphysema)

Basic definitions

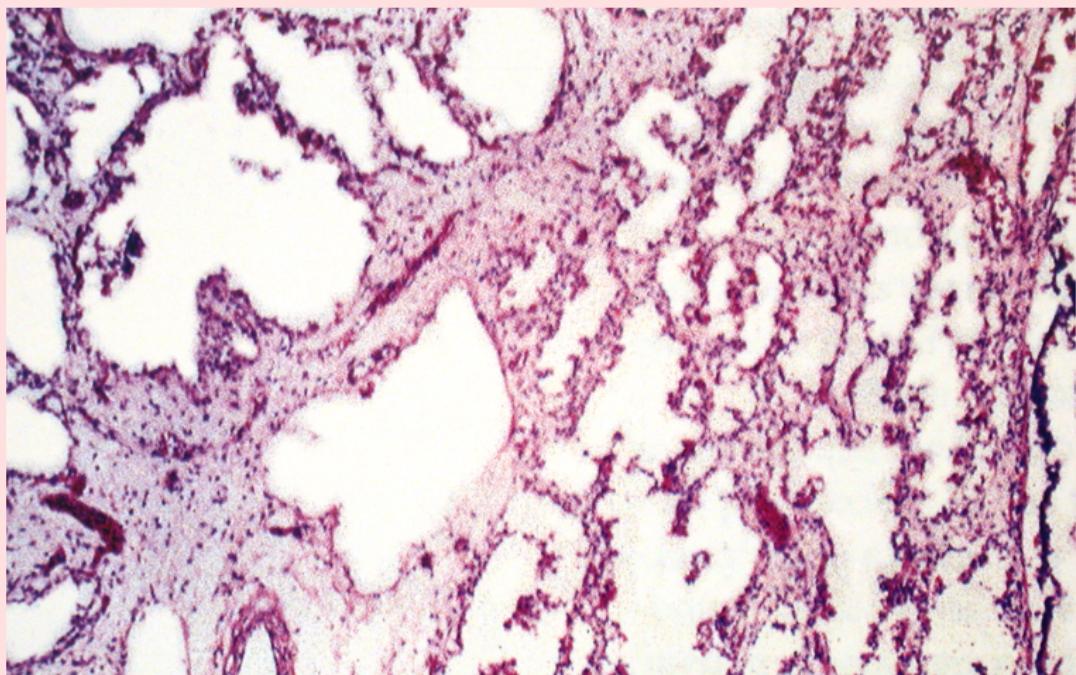
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# Bronchopulmonary dysplasia



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# Aspiration of the amniotic fluid

- ▶ Problem with blood supply of the fetus
  - ▶ Clinical picture
  - ▶ Histology
  - ▶ Prognosis
- 

- ▶ insufficiency of the placenta
- ▶ strangulation of the umbilical cord
- ▶ large infarctions of the placenta and other placental pathology

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# Aspiration of the amniotic fluid

- ▶ Problem with blood supply of the fetus
  - ▶ Clinical picture
  - ▶ Histology
  - ▶ Prognosis
- 

- ▶ alteration of fetal sounds
- ▶ stress of the fetus leads to meconium release
- ▶ activation of the respiratory reflex

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# Aspiration of the amniotic fluid

- ▶ Problem with blood supply of the fetus
  - ▶ Clinical picture
  - ▶ Histology
  - ▶ Prognosis
- 

- ▶ tiny keratotic squames, lanugo, meconium bodies, amnial cells are aspirated to bronchi and alveoli
- ▶ variable extent

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# Aspiration of the amniotic fluid

- ▶ Problem with blood supply of the fetus
- ▶ Clinical picture
- ▶ Histology
- ▶ **Prognosis**

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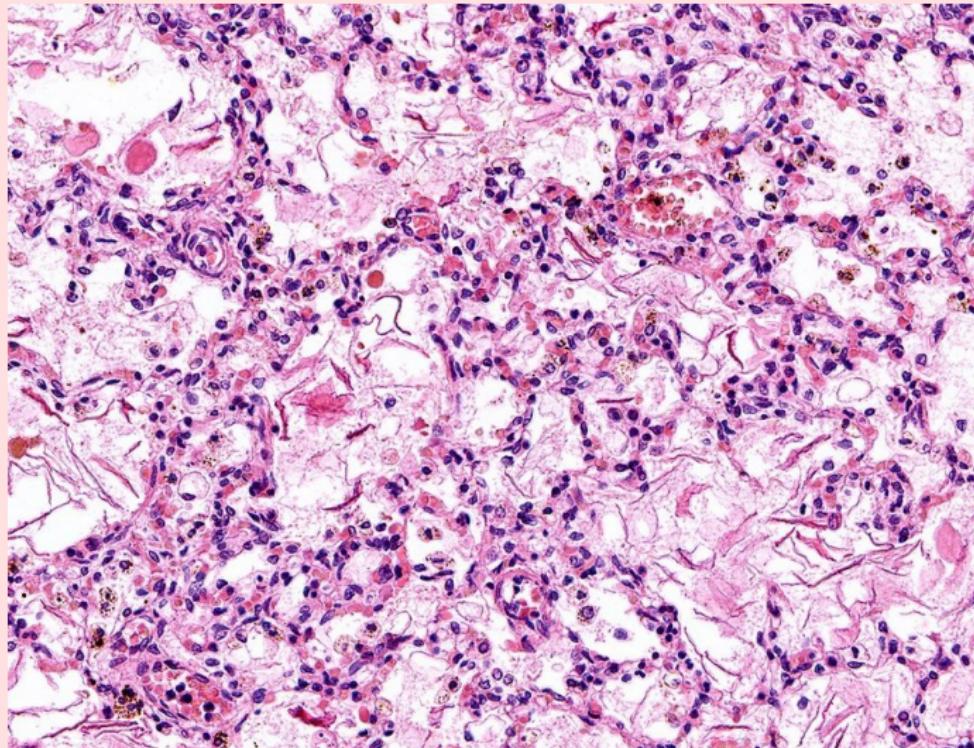
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- ▶ massive aspiration is lethal
- ▶ condition may be complicated by bronchopneumonia,  
especially in infected amniotic fluid

# Aspiration of the amniotic fluid

Pathology of the newborn



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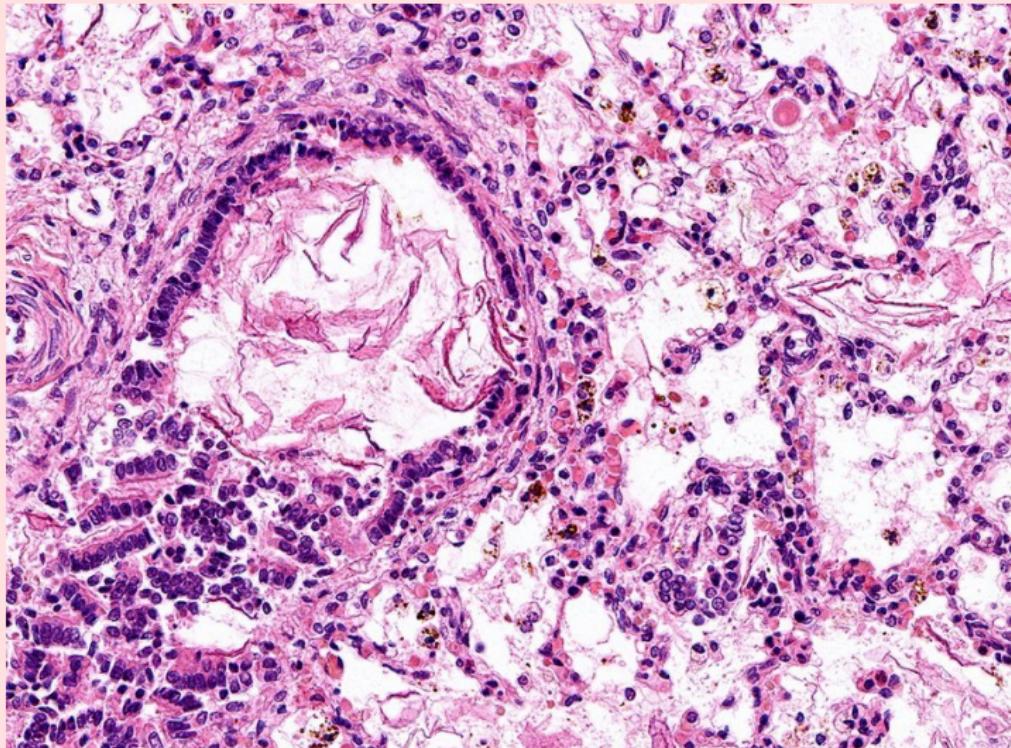
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# Aspiration of the amniotic fluid

Pathology of the newborn



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# Adnate pneumonia

- ▶ Inflammation of the lung before, during and short after the delivery
- ▶ Etiology
- ▶ Prognosis

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# Adnate pneumonia

- ▶ Inflammation of the lung before, during and short after the delivery
  - ▶ Etiology
  - ▶ Prognosis
- 

- ▶ disease of mother (virosis...)
- ▶ aspiration of infected amniotic fluid
- ▶ incubator

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# Adnate pneumonia

- ▶ Inflammation of the lung before, during and short after the delivery
- ▶ Etiology
- ▶ Prognosis

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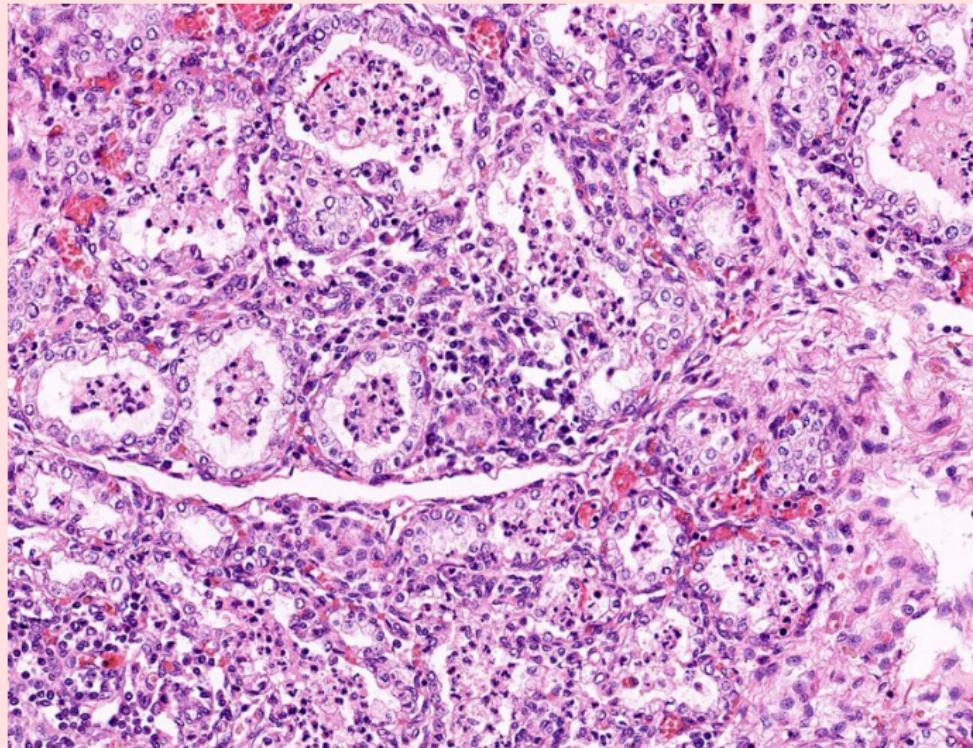
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- 
- ▶ serious complication of overall condition of the child

# Adnate pneumonia



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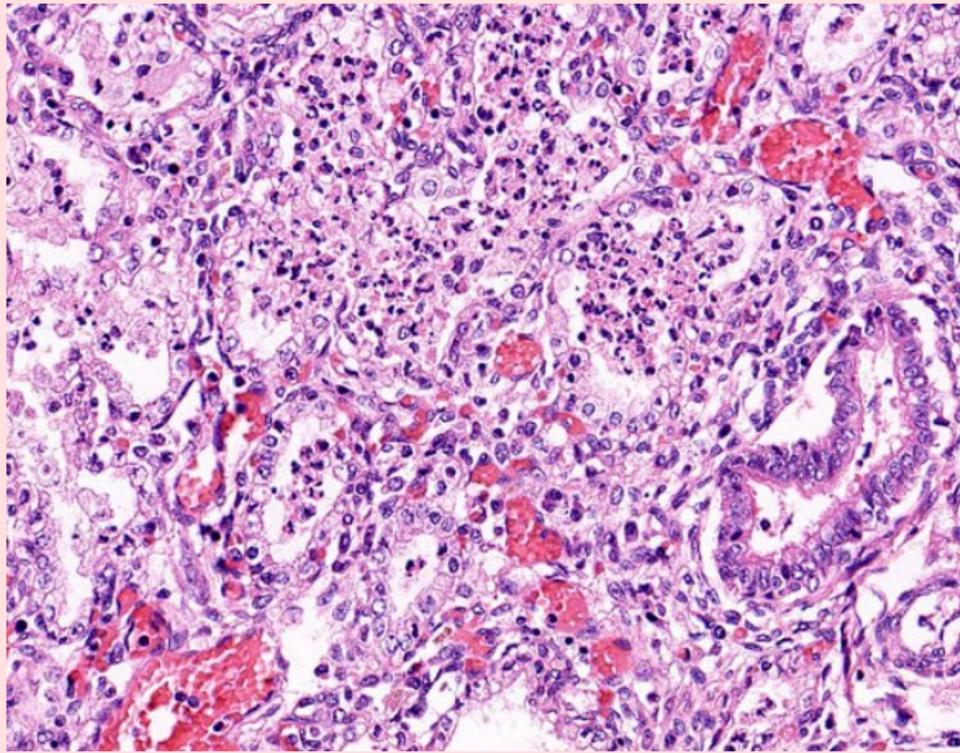
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# Adnate pneumonia



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# Atelectasis

- ▶ Areas of unventilated lung in a newborn
  - ▶ Usually alteration with areas ventilated normally
  - ▶ Etiology
  - ▶ Prognosis
- 

- ▶ firm, dark areas of consolidated tissue
- ▶ alveoli contain no air (therefore protected against toxic oxygen)
- ▶ (collapse: not ventilated pulmonary tissue, which was ventilated previously)

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# Atelectasis

- ▶ Areas of unventilated lung in a newborn
  - ▶ Usually alteration with areas ventilated normally
  - ▶ Etiology
  - ▶ Prognosis
- 

- ▶ surrounding tissue is hyperventilated
- ▶ prominent especially in artificially ventilated babies  
(emphysema)

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# Atelectasis

- ▶ Areas of unventilated lung in a newborn
  - ▶ Usually alteration with areas ventilated normally
  - ▶ Etiology
  - ▶ Prognosis
- 

- ▶ immaturity of pulmonary tissue
- ▶ aspiration

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# Atelectasis

- ▶ Areas of unventilated lung in a newborn
- ▶ Usually alteration with areas ventilated normally
- ▶ Etiology
- ▶ **Prognosis**

- 
- ▶ tendency to spontaneous healing

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# Atelectases, tetralogy of Fallot

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