

PREVALENCE OF LABIOPALATUM-SCHISI. RETROSPECTIVE DESCRIPTIVE STUDY IN THE NEONATE WARD IN VLOR HOSPITAL FOR TIME PERIOD OF 2005-2011.

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Abstract

Background. Labium leporinum (CL), palatum schisi (CP) or both called Labiopalatoschisi (CLP) is a orofacial malformation characterized from an opening between the nasal and oral cavity, lying from the upper lip to the palatum accompanied with or without other malformations. This is one of the most frequent malformations with a world incidence of 1.7/1000 of live births¹. Methods: This descriptive retrospective study is realized to identify the cases with born abnormalities with LCP, with data from the charts of the newborns. We used the data of the gestational age, family inheritance, mother's age, place of living, the gender of the baby, other abnormalities and the kinds of abnormalities as CL, CP, CLP. Results: We studied all the data for a time period of 7 years. There were all in all 9944 births for this time period, 52 total abnormalities born alive and from these 11 cases with malformations of CLP. Discussions: Prevalence of CLP in our study is 1.1 for 1000 live births. CLP takes 21.15% of all abnormalities born for this time period. The ratio of CLP according to the gender M/F is higher in males with 82% and in females with 18% of the cases. CLP accompanied with other abnormalities resulted in 9% of the cases and in 91% of the cases is not accompanied with other abnormalities, being an isolated CLP. The frequency according to the type classified in CL, CP or CLP resulted in CL dominated in 72.7% and 27.3% of the cases it was labiopalatoschisum. The mothers had their first birth and only one had her second birth. According to the age group the distribution was: 20-25 years old 36%, 26-30 years old 9%, 31-35 years old 36%, and 36-42 years old 18%. 54% of the mothers were born in Vloricity, 27% come from the suburbs of Vlor and 18% are not born in Vlor. The charts did not show any data to show that the abnormality was inherited or other factors might have influenced during the gestation time, in the charts it was written not applicable. We could not evaluate any of the predisposing factors based on the data collected. (not enough information in the charts). Recommendations: In order to have all the predisposing factors of this abnormality we need to work in more details. We need to know more about the accompanied abnormalities of labioschisi with /without palatum schisi. These elements will able us to know better the causes and to treat these patients better. It is necessary to collect the data about the history of the disease and inheritance of the family of both parents of the child. The total anamneses of the gestation age and the factors affecting it are very important also.

Key words: *labioschisi, palatoschisi, labiopalatoschisi, prevalence, screening.*

