

A Decade of Improvement in Neonatal Intensive Care

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INTRODUCTION: The work by Horbar et al looks into the progress of neonatal care in the United States between 2005 and 2014. Using the data set from the Vermont Oxford Network, the study found that among 756 US neonatal intensive care units (NICUs) in 2014, more than 98% had achieved the risk-adjusted rate of mortality of the best 10% of units in 2005; more than 90% had achieved this rate of late infection; and 40% to 60% had achieved the rate of the best 10% of units in 2005 for necrotizing enterocolitis, severe intraventricular hemorrhage, or severe retinopathy of prematurity. Such longitudinal improvement in outcomes from this group of hospitals provides reassurance for our ability to meaningfully improve outcomes. However, the study also emphasizes the barriers—persistent variation between hospitals, volatility of rare outcomes, and the need to explore population-based outcomes of perinatal care—to continue the highlighted improvements.

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