

ABSTRACT

Background: Small for Gestational Age (SGA) is defined as birth weight of a baby below the 10th percentile for a given gestational age. A baby is born SGA if they are constitutionally small or if they had intrauterine growth restriction and this is associated with neonatal morbidity and mortality. Whereas measuring birth weight alone is used as a predictor of bad outcomes, babies born with a normal birth weight and are SGA go unnoticed yet they are at risk of morbidity and mortality

Objective: To determine the prevalence and factors associated with SGA births among women delivering at Mbarara Regional Referral Hospital (MRRH).

Methods: A cross sectional study was conducted on mother-baby pairs at MRRH from May to August 2023. A semi structured questionnaire was used to obtain data on maternal, medical, socio-demographic and obstetric characteristics. Babies whose weight was below the <10th percentile for gestational age were classified as SGA using a WHO birth weight gestational age chart. The prevalence of SGA was proportion of babies whose weights were less than 10th percentile expressed as a percentage of the total participants. A modified Poisson multivariable regression analysis was used to determine the factors associated with SGA births.

Result: The total number of enrolled participants was 427 and their mean age of participants was 26.6 (\pm 5.58) years. The prevalence of SGA was 21.8% (n=93) ((95%CI; 18.1, 26.0). The proportion of SGA babies among babies born with a normal birth weight was 16% (n=59). Factors that were independently associated with SGA included; maternal >34 years [aPR: 2.29; 95% CI (1.15-4.53)], maternal height <150cm [aPR: 2.18; 95% CI (1.26– 3.91)], history of a hypertensive disorder in current pregnancy [aPR: 2.18 (1.12-5.09)].

Conclusions and recommendations: At MRRH, the prevalence of SGA is high. Factors that are associated with SGA include; advanced maternal age, short stature and a history of any hypertensive disorder in current the pregnancy. We recommend routine use of birth weight gestational age charts to screen for SGA especially among women of advanced age, short stature and those who are hypertensive.