

P 7. ESTABLISHING A CENTER OF EXCELLENCE FOR KMC IN RWANDA: MUHIMA DISTRICT HOSPITAL

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Background: Rwanda has one of the highest neonatal mortality rates in the world, estimated at 51 per 1000 live births. Low birth weight (LBW) contributes to over 23% of all newborn deaths. A KMC unit was established in Muhima district hospital in 2007. **Aim:** Describe evidence of improved outcomes of low birth weight and preterm babies in Muhima hospital

Materials and method: Retrospective study comparing the outcomes of LBW babies before and after the introduction of KMC based on a record review.

Results: Overall results include mortality (27% versus 26%) among all LBW babies, average daily weight gain (9 g versus 28.5g) and length of stay (26 days versus 19 days) before and after the introduction of KMC. In KMC unit mortality is 3%. **Conclusion:** KMC has improved the survival of LBW babies at Muhima

Hospital and has set the stage for scale up of KMC to other facilities within the country

Key words: KMC, Rwanda, newborn, survival .