ABSTRACT
This study was carried out to assess the maternal, neonatal and health facility related factors contributing to neonatal sepsis at China Uganda friendship hospital, Naguru.

Aim: To study the factors contributing to neonatal sepsis at China Uganda friendship hospital-Naguru.

Methods: A cross sectional study was conducted. A total of 39 files of sick new-born children and 4 health workers were interviewed. Main outcome was new-born sepsis confirmed by complete blood count test and blood culture. Independent variables included; maternal factors, new-born factors and healthcare related factors. Relevant data of neonates born during the study period were obtained from their case records. A documented information about the diagnosis of neonatal sepsis and positive laboratory results were obtained. Statistical analysis was done using frequency tables, a pie chat and Chi-squares as applicable. 95 % confidence intervals and P values were determined

Results: Among 39 live births, a total of 17 documented episodes of sepsis occurred among neonates (43.6%). Among the risk factors assessed, a significant association of with Age, HIV status, Health status and mode of delivery was observed.

Conclusions: The study findings revealed that the proportion of neonatal sepsis among new-borns at China Uganda Friendship hospital Naguru was 43.6%. Irrespective of the presence of neonatal factors such as prematurity, asphyxia or very low birth weight, screening for neonatal sepsis is warranted in the presence of maternal risk factors like age, HIV status and mode of delivery as the former are more likely to be associated with neonatal sepsis.

Lack of antenatal care or access to it at health facilities was likely to later result in more sick new-borns with sepsis. Poor breastfeeding by sick new-borns was a marker for serious bacterial infection. Therefore, health sensitization programs should encourage women to attend health facility antenatal care where they will receive health education about alternative feeding practices, screening and treatment for infections to prevent spread of infections to new-borns. Supply of antibiotics and sundries should be improved to sufficiently control sepsis within the health facility.