

## ABSTRACT

### Background

The neonatal period is critical time for the neonate as they transit to extrauterine life. Greater proportion of neonatal admission and mortality was found to occur due to neonatal sepsis, and was on the rise and accounting for 19% of neonatal mortality rate (Gulu regional referral hospital annual neonatal report, 2013/2014). This study assessed the factors associated with neonatal sepsis in Gulu regional referral hospital, northern Uganda.

### Methods

Descriptive cross-sectional study design employing quantitative data collection methods were used. All neonates admitted in neonatal care unit in Gulu regional Referral Hospital with signs and symptoms suggestive of neonatal sepsis were included in the study. Descriptive statistics was used to summarize data; continuous variables were summarized into mean, median and standard deviation while categorical variables were summarized and presented as proportion, pie-chart and bar-graphs.

### Results

Most of the mothers of the neonates with neonatal sepsis had normal delivery delivery (62.79%). Few mothers completed the required minimum of four antenatal visits (30.23%). Most of the mothers experienced premature rupture of membranes (51.16%), maternal infections (53.49) and foul smelling liquor (53.49), however, there was minimal Meconium staining amniotic fluid (38.37%).

### Conclusion

Not completing at least four visits of antenatal care, maternal infections and premature ruptures of the membranes were more associated with neonates having sepsis. Therefore, concerted efforts including health education and comprehensive ANC should be designed and implemented to scale up full

attendance of antenatal care by the district health stakeholders and the health facilities. Public education programs to encourage pregnant women to seek full antenatal care to save life of the neonates.