Letters to the Editor

Early Hemorrhagic Disease of Newborn

The recent case report entitled "Hemoperitoneum-a rare manifestation of early hemorrhagic disease of newborn"(1) was interesting. However, there are certain terminologies which require clarification. Three clinical patterns of vitamin K deficiency hemorrhage occur in infancy: early hamorrhagic disease of newborn (HDN), classic HDN and late hemorrhagic disease (Table 1)(2,3). Early HDN occurs within the first 24 hours of life, and is usually associated with maternal drug intake. Rare cases of idiopathic early HDN have also been reported(3,4). Though this hemorrhage responds well to vitamin K administration it is not possible, in all instances, to prevent it by vitamin K administration at birth. The neonate presented in the article(1) should

be classified as a case of classic HDN and not early HDN.

Banani Poddar.

Senior Lecturer, Department of Pediatrics, Government Medical College and Hospital, Chandigarh.

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Reply

We agree that the terminology used for our reported case should have been Classic HDN rather than Early HDN(1). We had used the term, Early HDN since only two terms, Early and Late HDN are in common use(2). However, now the entity has certainly been classified as Early, Classic and Late HDN(3).

B.D. Gupta, Manish Parakh,

Department of Pediatrics, Regional Institute of Maternal and Child Health Dr. S.N. Medical College, Jodhpur

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 TABLE I—Vitamin K Deficiency Hemorrhagic Syndromes in Infancy

Туре	Age	Common bleeding sites	Cause	Prevention by vitaminK administration at birth	Comments
	Scalp monitor Intracranial Intrathoracic Intra-abdominal	Warfarin Anticonvulsants An ti tuberculous Chemotherapy Idiopathic	instances	threatening, guidlines for safe management of high-risk pregnancies needed	
Classic HDN	1-7 days	Gastrointestinal	Idiopathic	Yes	Incidence increased in
	•	Skin Nasal Circumcision	Maternal drugs		breasted neonates and reduced by early formula feedings
Late	1-3 months	Intracranial	Idiopathic	Probably yes	Common causes of
hemorrhagic disease		Skin Gastrointestinal	Secondary Diarrhea Malabsorption (cystic fibrosis, alpha-I antitrypsin deficiency, biliary atresia) Prolonged warfarin exposure	No	intracranial hemorrhage in breastfed infants 1- 3 months of age; may be aggravated by antibiotic administration