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Advances in NICU Health Care

Guest Editor:

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Message from the Guest Editor

Dear Colleagues,

We know that approximately 5–10% of newborns will require support upon delivery and later on. The same number of newborns will be treated for some time in the Neonatal Intensive Care Unit—NICU. Since the first NICUs emerged in USA in the 1960s, our abilities to treat extremely preterm newborns or those with complicated illnesses, such as hypoxic-ischemic encephalopathy, organ failure, or congenital anomalies, are still growing. Many conditions became rare due to preventive measures (e.g., Rh isoimmunization), but our methodology and the appearance of a new modalities (such as iNO) reduced mortality, morbidity, and long-term consequences in large number of sick newborns. As well as new methods, changes in daily practice, including minimal manipulation and nurturing, family centered care, the discovery of breast milk benefits, the reduction of blood sampling, and others.

We welcome the authors contact the editor at boris.filipovic-grcic@kbc-zagreb.hr directly with any further questions.

Dr. Boris Filipović-Grčić
Guest Editor



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Special Issue



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Editor-in-Chief

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Message from the Editor-in-Chief

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