C2.4: The Effect of Early Versus Late Start of Minimal Enteral Nutrition on Selected Clinical Outcome Measures of the Parenterally Fed Preterm/Very Low Birth Weight Infants

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Abstract:
Introduction: It was hypothesized that early start of minimal enteral nutrition (MEN) would not increase and may lessen the incidence of necrotizing enterocolitis, and length of hospital stay among preterm infants. Despite suggestion of the literature, yet many NICUs in Egypt implement the approach of early start of MEN as a feeding strategy for very low birth weight infants. The purpose was to determine the effect of early versus late start of MEN on selected clinical outcome measures of the parenterally fed preterm infants.

Method(s): A quasi-experimental with A-B design was used for this study. Sixty preterm infants of 28 - 36 weeks gestation and 1000 - 1499 gram birth weight were observed. Intervention infants received 0.5 - 1ml/kg/hr of full strength milk given at the same rate after the first 24 hours for ≥ 5 days. The two groups were assessed for measures indicating feed-intolerant, time to reach full enteral feeding, weight gain, glucose metabolism, exposure to phototherapy, and length of hospital stay.

Results: T-test analyzed the data of infants. Intervention infants showed a significant decrease in abdominal girth, aspirated gastric residue, days feeding withheld, and to reach full enteral feeding than the control group. Infants who received MEN displayed no episodes of hypo or hyperglycemia throughout the observation period; they also showed a significant increase in weight gain, and shorter hospital stay than the control group.
Discussion & Conclusions: Minimal enteral feedings result in better outcomes than withholding feedings among preterm/very low birth weight infants. MEN as a feeding strategy required documentation of its safety through wider application on a larger sample of very low birth weight infants.

Abstract History:
This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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