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Prefeeding interventions improve oral feeding in preterm infants

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Objective: To assess whether oral stimulation (OS), nonnutritive sucking (NNS) and combined tactile/kinesthetic (T/K) interventions can improve the effects of oral feeding in preterm infants. Methods: A retrospective review was performed from 2014 to 2016, in which one hundred thirty preterm infants were separated into two intervention groups (the OS + NNS group and the OS + NNS + T/K group) and one control group. Infants in the two intervention groups received 30 min of interventions a day. All interventions started 48 h after stopping nasal continuous positive airway pressure until participants reached complete oral feeding.

Results: The transition times of the OS + NNS, OS + NNS + T/K, and control groups from the introduction of oral feeding to independent oral feeding were 9.03 ± 0.58 , 7.20 ± 0.28 , and 12.17 ± 0.64 days, respectively ($P < 0.05$). The infants'

weights at full oral feeding in the OS + NNS, OS + NNS + T/K, and control groups were 1834.58 ± 47.96 , 1999.17 ± 92.62 , and 1725.87 ± 40.34 g, respectively ($P = 0.007$). Further post hoc analyses indicated that the weight gain at full oral feeding in the OS + NNS and OS + NNS + T/K groups were more significant than the control group ($P = 0.012$ and $P = 0.036$, respectively).

Conclusion: OS + NNS and OS + NNS + T/K interventions could shorten the transition time from tube feeding to independent oral feeding; OS + NNS and OS + NNS + T/K interventions improved weight gain compared to the control group. Furthermore, the OS + NNS + T/K group was superior to the OS + NNS group regarding transition time and weight gain.

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