Early versus late nutrition support in premature

neonates with respiratory distress syndrome

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Abstract

OBJECTIVE: This retrospective study evaluated two different modes of nutrition supplementation in premature neonates with respiratory distress syndrome. METHODS: Data were collected from the medical records of premature infants treated from January 1, 1997 to July 31, 2000. Seventeen infants were given peripheral amino acids and gradual advanced minimal hypocaloric enteral feeding within the first 48 h (early nutrition group), and 19 infants received nutrition supplementation more than 48 h after birth (late nutrition group). Groups were similar with regard to gestational age, birth weight, Apgar score, mode of delivery, and diagnosis. RESULTS: Compared with infants in the late nutrition group, those in the early nutrition group required fewer days of parenteral nutrition, fewer days to reach full enteral feeding, fewer days of mechanical ventilation, fewer days of aminophylline use, fewer days to regain birth weight, and had a lower percentage of maximal weight loss. Other physiologic parameters such as age at maximal weight loss, weight gain after day 10, and hospital days required favored the use of early nutrition. CONCLUSIONS: Early nutrition to maintain a positive energy balance in premature neonates with respiratory distress syndrome is beneficial.