KEYNOTE PRESENTATION

Optimization of Nutrition in Preterm Infants - research and practices

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ABSTRACT

The hospitalisation in a Neonatal Unit (NU) is a traumatic event, in which the preterm infant lives through traumatic experiences like invasive procedures and non-satisfaction of their individual needs, like feeding, in as adequate manner to age and developmental stage (1). These experiences may promote non adaptive behaviours, affecting the ability for the preterm infant to feed (2; 3). As such, it is important to promote a positive environment that minimizes the impact of these experiences, and nurses have a fundamental part in this process (4).

In the last few years, we have been witnesses to a growing concern about the nutritional management in the preterm, for its influence in their growth and development (5). However, about 30% of the preterm in NU show difficulties in oral feeding which should be a source of worry to nurses.

Feeding, as a nursing intervention, demands that the nurses have the skills and scientific knowledge for responsible and justified decision making, namely, in the choosing of the most effective oral feeding technique to an adequate nutrition. In this context, since 2018 the scientific evidence shows the importance of *The Neonatal Integrative Developmental Care Model* and the 7th core measure Optimizing Nutrition. Research studies are in the scope of the project Neonatal Integrative Developmental Care (NIDCare), integrated in Nursing Research, Innovation and Development Centre of Lisbon (CIDNUR) and have as objectives to

contribute to the improvement of the quality of care in neonatology, promote change and innovation in the oromotor and oral feeding interventions of the preterm.

Keywords: “nursing care”, “neonatal unit”, “preterm infant”, “oral feeding”

Bibliography:

1. Coughlin, M. E. (2017). Trauma-informed care in the NICU – evidence-based practice guidelines for neonatal clinicians. New York: Springer Publishing Company.
2. Dalgleish, S. R., Kostecky, L. L. & Blachly, N. (2016). Eating in "SINC": Safe Individualized Nipple-feeding Competence, a Quality Improvement Project to Explore Infant-Driven Oral Feeding for Very Premature Infants Requiring Noninvasive Respiratory Support. Neonatal Network, 35 (4), 217-227.
3. Shaker, C. S. (2017). Infant-Guided, Co-Regulated Feeding in the Neonatal Intensive Care Unit. Part I: Theoretical Underpinnings for Neuroprotetction and Safety. Seminaris in Speech and Language, 38(2), 96-105.
4. Altimier, L. B. & Phillips, R. (2016). The Neonatal Integrative Developmental Care Model: Advanced Clinical Applications of the Seven Core Measures for Neuroprotective Family-centered Developmental Care. Newborn & Infant Nursing Reviews, 16(2016), 230-244.
5. Sankar, M. J.; Mishra, S.; Deorari, A. & Paul, V. (2008). Feeding of Low Birth Weight Infants. AIMS-NICU Protocols. All India Institure of Medical Sciences: Division of Neonatology, Department of Pediatrics.