

Feeding the Late and Moderately Preterm Infant

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Standards and Guidelines

Paediatrics

Small Intestine & Nutrition

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The ESPGHAN Committee on Nutrition reviewed feeding guidance for late or moderately preterm infants, a large but understudied population with notable nutritional vulnerabilities and limited evidence from controlled trials.

KEY POINTS

- Late or moderately preterm infants have unique vulnerabilities that predispose them to high rates of nutritionally related morbidity, hospital readmissions, feeding difficulties delaying discharge, and poorer breastfeeding rates compared with term infants, while moderately preterm infants frequently exhibit postnatal growth restriction
- ESPGHAN strongly endorses breast milk as the preferred feeding method and emphasizes that mothers should receive qualified, extended lactation support and frequent follow-up with individualized feeding plans promoted
- The need for active nutritional support increases with lower gestational ages, with potential roles for human milk fortifier, enriched formula, parenteral nutrition, or supplements depending on gestational age, birth weight, and comorbidities
- Hospital discharge should be delayed until a safe discharge plan is established that accounts for local situation and resources
- Further research is needed to assess benefits of improved nutrient intakes versus risks of interrupting breastfeeding when providing nutrient-enrichment to this population

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