

ABSTRACT 11

KANGAROO BABIES BREAST-TUBE FEEDING AT HOME IN COMPARISON WITH BREAST SUCKING FEEDING DIRECTLY

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Objectives: Low birth weight (LBW) is a serious health problem: 7.306% of all newborn infants weighted less than 2500g and 3.797% of all live newborn infants are under ≤ 2000 g at birth (1999) at the Tu Du Maternity Hospital in HCM city. This study compares effectiveness of breast-tube feeding at home and breast-feeding with sucking directly.

Design: Open Randomized Controlled Trial.

Setting: At the Tu Du Maternity Hospital in Hochiminh City, Vietnam.

Patients: Newborn infants ≤ 2000 g, surviving the neonatal period and eligible for an in-patient Kangaroo care unit. 550 consecutive deliveries ≤ 2000 g were followed and 203 were randomized, 103 to breast-feeding with oral-gastric tube at home and 100 breast-feeding with sucking directly.

Interventions: With exclusive or nearly exclusive breast-feeding. Breast-tube feeding at home group fed with oral-gastric tube and early discharge after consecutive weight increasing for three days. Breast sucking feeding group fed with sucking directly and discharge with sucking-swallowing capacity and consecutive weight increasing for three days. Both of groups were followed periodically up to 41 weeks of gestational age.

Main outcomes: mortality, bronchial inhalation, body weight, hospital stay. Measurement were made at 41 weeks of gestational age.

Results: Baseline variable were recently distributed equally at recruitment. Mortality of breast-tube feeding group is 1 and breast-feeding's sucking group is 1 for sudden dead. Frequency of injection and digestive disorder was similar (4.926% (10/203) for breast sucking feeding and 3.94% (8/203) for breast-tube feeding). The body weight at 41 weeks of gestation age were statistically significant differences (t. Breast-tube-feeding spent less time in hospital were statistically significant differences ($t_{(111.741)} = 9.672$ $P = 0.0005$; mean of breast sucking feeding is 7.1200, breast-tube feeding is 4.1068; 95% CI (2.3959, 3.6350)) especially those with body weight at new-born ≤ 1200 g ($t_{(20.169)} = 3.807$ $p = 0.01$, mean of breast sucking feeding is 7.8, breast tube feeding is 4.625; 95% CI (1.6909, 5.7841)). The gestational age at discharge for each group were statistically significant differences ($t_{(193.087)} = 3.262$ $p = 0.01$; mean of breast sucking-feeding is 33.5271, breast tube feeding is 32.6953; 95% CI (0.2221, 0.9016)).

Conclusions: Results support earlier the hospitalization and the time findings regarding beneficial effects, of breast-tube-feeding. There is shortest of take care babies in breast-tube feeding. So the mothers have many times to take a rest. We hope that the method of breast-tube feeding will continue performing and using widely.