



Dr. Brown's Medical Webinar Q and A

2.23.22 Infant Feeding Journey Part II

Q: Can you discuss feeding with infants with congenital heart disease?

A: I would recommend the Dr. Brown's Webinar:

[*The Heart of the Matter: Feeding Challenges in Infants with Congenital Heart Defects*](#)

Q: Any thoughts as we are getting younger 22 weeks babies surviving and thriving? Will feedings and discharge look later?

A: I think knowing that many centers are supporting younger 22-week babies we have to focus on those earlier phases of care to optimize neuroprotection and neurodevelopment. If we support their developing nervous system, they have a better chance of being successful. I think time will tell if it would be more beneficial so let them mature a few days to week prior to starting oral feedings, especially as these infants will most like have difficulty with endurance due to CLD.

Q: Following up from the research highlighting sucking progression between 32-36 weeks – has there been recent research on this topic? If so, are there any changes?

A: I find that in my experience of providing IDF™ for the past 15 years, the more we let these infants mature, the trajectory of their oral feedings moves more quickly. Waiting for their consistency is readiness is vital. We have all seen that 1-2 day honeymoon of scores and then the next 3-5 days they drop off. Their suck swallow is not as in need of maturation, right as they have been sucking since in utero. It's the breathing aspect and overcoming their lung disease, etc. that needs the patience. Here are some articles I thought might be helpful to read.

RESEARCH ARTICLE:

Mayerl, Christopher J et al. "Sucking versus swallowing coordination, integration, and performance in preterm and term infants." *Journal of Applied Physiology*. (1985). 2020 Dec 1;129(6):1383-1392. doi: 10.1152/jappphysiol.00668.2020. Epub 2020 Oct 15.

McGrath, Jacqueline M et al. "Correlates and Trajectories of Preterm Infant Sucking Patterns and Sucking Organization at Term Age." *Advances in neonatal care: Official Journal of the National Association of Neonatal Nurses* vol. 21,2 (2021): 152-159. doi:10.1097/ANC.0000000000000810

Pineda R, Prince D, Reynolds J, Grabill M, Smith J. Preterm infant feeding performance at term equivalent age differs from that of full-term infants. *J Perinatol*. 2020 Apr;40(4):646-654. doi: 10.1038/s41372-020-0616-2. Epub 2020 Feb 17. PMID: 32066844; PMCID: PMC7117861

Calk P. Best Practices for Oral Motor Stimulation to Improve Oral Feeding in Preterm Infants: A Systematic Review. *Ann Physiother Occup Ther* 2019, 2(4): 000143.

Q: How do you get all team members on board (eg different disciplines)?

A: It begins with NICU leadership and having a priority of teamwork. Team members have to believe that the infant and family needs the expertise of all disciplines involved. A shared mental model has to be the vision and priority for all those involved. Engaging families early will empower them to expect the team to communicate and collaborate. It's not easy and takes time. It's especially vital that nursing, therapists and LC's create plans together with the parents. These roles absolutely have to complement each other and not compete with each other. Mutual respect.

Q: Any advice you would give to medical professionals on working with families and feeding?

A: Providing medical professionals with opportunities to participate in webinars that bedside providers are also learning from will help everyone hear the same information and understand the importance of all our roles. Medical professionals also need to hear parent perspectives. Encouraging parents that your NICUs cared for can make a great impact as they are familiar with MD/NNP/Fellows. Scheduling lunch time webinars for NICU teams periodically can be a start. Part 1 of this series has the evidence on brain development and Part 2 can share the practical and parent perspective and application. I like to think we can not only think outside the box...but also think as if there is no box. I encourage us to be creative to bring us all together.