

Feeding the moderate-late preterm baby: the DIAMOND trial

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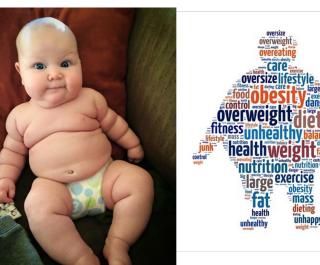
























Recommendations







- The American Academy of Pediatrics (AAP), the National Perinatal Association and the Academy of Breastfeeding Medicine
 - Importance of nutritional support and feeding
 - Emphasis on breastmilk feeding
 - No recommendations or guidelines for feeding moderately preterm infants
- ESPGHAN Position Paper 2019
 - Strongly endorses breast milk
 - Enhanced nutritional support may be required
- National Institute for Health Care and Excellence (UK)
 - Intravenous nutrition > 31 weeks' if 'sufficient' progress in enteral feeds not made
- AAP and ESPGHAN
 - Research gaps and align with research priorities





DIfferent Approaches to Moderate- & late-preterm Nutrition:
Determinants of feed tolerance, body composition and development¹

- Inclusion criteria
 - 32⁺⁰ 35⁺⁶ weeks' gestation
 - Mother intends to breastfeed
 - Admitted to neonatal unit
 - IV inserted for clinical reasons
- 8 conditions
- Consent within 24 hours of birth
- Five neonatal care units in NZ

Factor 1	Factor 1 Factor 2	
Parenteral	Mothers own	Taste/smell
nutrition (PN)	milk only (MOM)	
Dextrose	Milk supplement	No taste/smell



Primary Outcome



- Factors 1 (IV fluids) and 2 (Enteral nutrition)
 - Body composition at 4 months' corrected age measured by air displacement plethysmography (APD) using the PEA
 - POD or skinfold measurements

- Factor 3 (Taste and smell)
 - Time to full enteral feeds

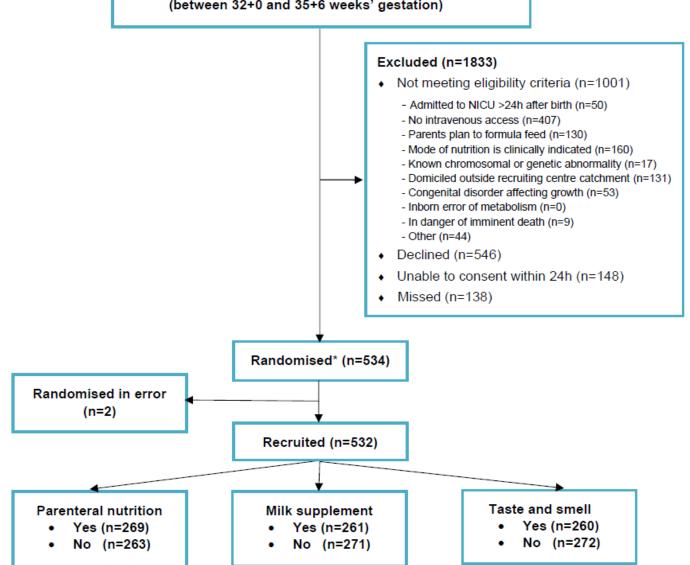
DIAMOND Consort







Potentially eligible babies assessed for eligibility (n=2367) (between 32+0 and 35+6 weeks' gestation)



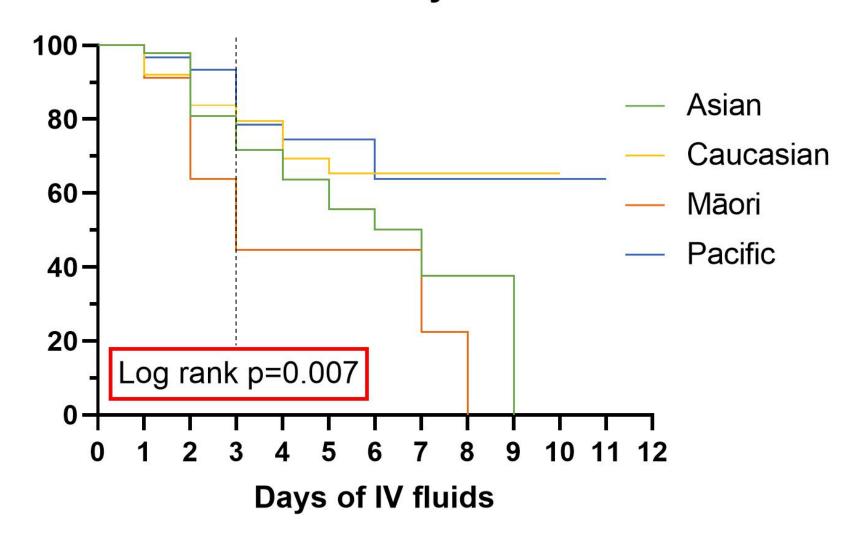


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Days to alternative nutrition: ethnicity

% of babies on IV fluids receiving only mothers own milk as enteral feeds



Breastmilk feeding at discharge by ethnicity



			Breastmilk feeding at discharge N (%)	
		No	Yes	
Ethnicity	Māori [#]	11 (48)	12 (52)	
	Pacific	8 (26)	23 (74)	0.04
	Asian	14 (30)	33 (70)	0.04
	Caucasian#	8 (16)	42 (84)	

Māori significantly less likely to receive breastmilk at discharge compared with Caucasian (p<0.01)

Conclusions



- Māori babies least likely to receive breastmilk
 - Social?
 - Unconscious bias and systemic racism?
- Quality initiatives to support and encourage mothers to provide breastmilk
 - Specific focus on Māori mothers
- Limited research on the nutritional management of moderate to late preterm babies







Future directions

- DIAMOND primary outcome paper end of 2022
- Qualitative research study
 - Explore mothers views and experiences
 - Health professionals to assess drivers behind variation
- Investigate nutritional intake in hospital and growth/body composition at discharge
- DIAMOND 2 year follow-up ongoing
- DIAMOND 7 year follow-up planned to commence 2024

Acknowledgements





- DIAMOND Research team
- Research nurses
- Hospitals and staff
- Whānau and pēpi















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Thank you

