Publications Working Group

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Section on Neonatal-Perinatal Medicine

ARTICLES OF INTEREST – September 2020

Increased peak end-expiratory pressure in ventilated preterm lambs changes cerebral microvascular perfusion: direct synchrotron microangiography assessment
Inocencio IM, Tran NT, Nakamura S, et al. J Appl Physiol.

Because the precise effects of high PEEP on cerebral hemodynamics in the preterm brain is unknown, the authors sought to assess the effect of PEEP on brain microvessels in the preterm lambs using synchrotron radiation microangiography. They found that increasing PEEP from 5 to 10 increased the diameter of small cerebral vessels, but decreased diameter of larger cerebral vessels. Higher PEEP also increased the cerebral contrast transit time and carotid blood flow in at least half the animals. These results show that higher PEEP alter cerebral hemodynamics by prolonging blood flow transit and engorging small microvessels, effects which may be due to the increased intrathoracic pressure.

Association of routine infant vaccinations with antibody levels among preterm infants D M Rouers E, Bruijning-Verhagen P, van Gageldonk P, et al. *JAMA*.

The authors sought to evaluate the immunogenicity of routine vaccinations in preterm infants. 296 preterm infants from 8 hospitals in the Netherlands were compared with 66 healthy term infants who had been enrolled in a previous study. The Dutch vaccine schedule includes a DTaP-IPV-Hib-HepB combo at 2, 3, 4, and 11 months and PCV10 at 2, 4, and 11 months. IgG antibody concentrations were measured before the 1st vaccine, after the 4-month dose, and after the 11-month booster. Protective IgG levels varied among the vaccines after the 4-month dose, but 95% of preterm infants had protective IgG levels after the booster dose for all vaccines except HIB at 88%. Most antibody levels among the preterm infants were lower than those in the term group. The authors conclude that while vaccine response is lower in preterm infants than in term infants, preterm infants achieve protective levels of antibodies for all routine vaccines except HIB.

<u>Hydrocortisone and bronchopulmonary dysplasia: variables associated with response in premature infants</u>

Clauss C, Thomas S, Khodak I, et al. J Perinatol.

This study is a retrospective review to determine the efficacy of hydrocortisone to facilitate improvement in respiratory status in 48 preterm infants born ≤32 weeks. Patients older than 10 days of age received hydrocortisone 5mg/kg divided q8hrs x5 days (25mg/kg/course, glucocorticoid equivalent to dexamethasone 0.89mg/kg) followed by a variable taper at the discretion of the physician. Among the 40 patients on mechanical ventilation, 20 were successfully extubated and remained extubated >10 days. Among 8 patients on non-invasive ventilation, 1 was weaned to room air. 67% of patients had a reduction in FiO2 ≥10% and/or successful extubation. There were no bowel perforations, and the

serious bacterial infection rate was similar to the unit baseline rate. The authors conclude that hydrocortisone effectively improves respiratory status for preterm infants with developing BPD without major short-term complications.

<u>Introduction of less invasive surfactant administration (LISA), impact on diagnostic and therapeutic procedures in early life: a historical cohort study</u>

Bugter IAL, Janssen LCE, Dieleman J, et al. BMC Pediatr.

This is a pre-post study comparing NICU care practices after starting LISA. Infants (<32week GA) who received LISA (n=169; 2014-2017) were compared to infants who received surfactant after intubation (n=155; controls; 2012-2014). LISA patients received a higher total surfactant dose (208 vs. 160 mg/kg; p <0.001), required more frequent redosing (32.5% vs. 21.3%; p =0.023), but needed less mechanical ventilation (35.5% vs. 76.8%; p <0.001) compared to control group. LISA patients also received fewer x-rays, blood gases, less inotropic drugs, blood transfusions and shorter duration of early antibiotics. The authors conclude that this study emphasizes the beneficial effects of LISA.

<u>Outcomes of neonates with tracheostomy secondary to bronchopulmonary dysplasia</u> Upadhyay K, Vallarino DA and Talati AJ. *BMC Pediatr*.

This single center retrospective study describes 24-month survival and outcomes of infants requiring tracheostomy secondary to BPD. The study included 41 babies from 2011 to 2016 with a median gestational age of 26wks (25–27 IQR), mean birthweight of 731 g (±245 SD). Median age of tracheostomy placement was 168 days (108–197 IQR), and median PMA 48 wks (40–56 IQR). The results showed that about 80% of infants with severe BPD and tracheostomy survived to discharge and 66% (27/41) had a composite outcome of death, ventilator dependency and/or poor neurodevelopmental outcome at 2 years. Later postmenstrual age at admission to level 4 NICU was associated with a worse outcome

<u>Drainage, irrigation and fibrinolytic therapy (DRIFT) for posthaemorrhagic ventricular dilatation: 10-year follow-up of a randomized controlled trial</u>

Luyt K, Jary SL, Lea CL, et al. Arch Dis Child Fetal Neonatal Ed.

This 4 center-study evaluated 52 infants who were available to follow-up at 10 years of age and were randomized to receive drainage, irrigation, and fibrinolytic therapy (DRIFT) for post-hemorrhagic hydrocephalus (n=28) versus standard treatment (n=24). The authors found that the mean cognitive quotient score was 69.3 (SD=30.1) in the DRIFT group and 53.7 (SD=35.7) in the standard treatment group (adjusted p=0.01) and survival without severe cognitive disability was 66% in the DRIFT group and 35% in the standard treatment group (unadjusted p=0.019; adjusted p=0.003).

Prophylactic hydrocortisone in extremely preterm infants and brain MRI abnormality Alison M, Tilea B, Toumazi A, et al. *Arch Dis Child Fetal Neonatal Ed.*

This study included 229 infants who received either placebo or hydrocortisone in the PREMILOC trial and had MRIs suitable for Kidokoro scoring completed at term equivalent. The authors found that the distribution of the Kidokoro white matter subscore and moderate-to-severe brain lesions was not significantly different between the two groups. Bronchopulmonary dysplasia at 36 weeks postmenstrual age, however, significantly predicted white matter damage (adjusted OR (95% CI) 2.70 (1.03 to 7.14), p=0.04) and global brain damage (adjusted OR (95% CI) 2.18 (1.19 to 3.99), p=0.01).

Cerebral oxygenation in preterm infants with necrotizing enterocolitis

Howarth C, Banerjee J, Leung T, et al. Pediatrics.

The authors examined whether cerebral oxygenation differs in infants who develop NEC compared to those who do not. Weekly cerebral oximetry measurements were performed on 48 infants <30 weeks' gestation, allowing measurement of cerebral tissue oxygenation index from the first week of life to 36 weeks postconceptional age. Seven infants who developed NEC had significantly lower cerebral tissue oxygenation index than those who did not even when adjusted for confounders, including gestational age, birth weight, patent ductus arteriosus, enteral feeds, sex, ethnicity, and hemoglobin. Infants with NEC had significantly lower cerebral tissue oxygenation in comparison with those who did not develop NEC, a novel finding which could explain their worse neurodevelopmental outcome.

<u>Higher- or usual-volume feedings in infants born very preterm: a randomized clinical trial</u> Travers CP, Wang T, Salas AA, et al. *J Pediatr*.

This was a randomized clinical trial in 224 infants with a birth weight 1001-2500 g and <32 weeks of gestation, where the authors whether higher volume feeds would increase their growth velocity. Infants were randomized to either higher-volume (180-200 mL/kg/d) or usual-volume (140-160 mL/kg/d) feedings once they reached a volume of ≥120 mL/kg/d. At study completion the authors noted significantly increased growth velocity, increase in all measurements-weight, length, arm and head circumference in the higher volume feeing group, without any increase in common NICU morbidities such as BPD,PDA and NEC.

Neonatal hypoglycemia after initiation of late preterm antenatal corticosteroids

Uquillas KR, Lee RH, Sardesai S, et al. J Perinatol.

This retrospective cohort study of >200 late preterm deliveries evaluated neonatal outcomes between pregnancies treated with and without corticosteroids. The major finding was an increase in incidence of neonatal hypoglycemia, with a significantly lower mean initial glucose level as well as glucose nadir in late preterm neonates born to women given corticosteroids. Neonates admitted to the NICU due to hypoglycemia were more likely to be exposed to antenatal corticosteroids.

COVID-19

Severe acute respiratory syndrome coronavirus 2 (sars-cov-2) vertical transmission in neonates born to mothers with coronavirus disease 2019 (covid-19) pneumonia

 $\underline{https://www.ncbi.nlm.nih.gov/pmc/articles/pmc7219851/pdf/ong-publish-ahead-of-print-pr$

10.1097.aog.000000000003926.pdf

Infant with SARS-COV-2 infection causing severe lung disease treated with remdesivir

https://pubmed.ncbi.nlm.nih.gov/32554811

Novel coronavirus infection in febrile infants aged 60 days and younger

https://pubmed.ncbi.nlm.nih.gov/32527752

The changing landscape of SARS-CoV-2: Implications for the maternal-infant dyad

https://pubmed.ncbi.nlm.nih.gov/32417802

Management of the mother-infant dyad with suspected or confirmed SARS-CoV-2 infection in a highly epidemic context

https://pubmed.ncbi.nlm.nih.gov/32444569

Urgent cesarean delivery following nonstress test in a patient with COVID-19 and pregestational diabetes

https://pubmed.ncbi.nlm.nih.gov/32873658

SARS-CoV-2 infection in infants less than 90 days old

Clinical Implications of SARS-CoV-2 Infection in the viable preterm period

https://pubmed.ncbi.nlm.nih.gov/32615621

Universal SARS-Cov-2 screening in women admitted for delivery in a large managed care organization https://pubmed.ncbi.nlm.nih.gov/32620022

Pediatrics

Cerebral oxygenation in preterm infants with necrotizing enterocolitis

https://pubmed.ncbi.nlm.nih.gov/32848028

Diagnosis codes and case definitions for neonatal abstinence syndrome

https://pubmed.ncbi.nlm.nih.gov/32848030

Machine learning to predict serious bacterial infections in young febrile infants

https://pubmed.ncbi.nlm.nih.gov/32855349

Neonatal adiposity and childhood obesity

https://pubmed.ncbi.nlm.nih.gov/32796097

Severe maternal morbidity and infant mortality in Canada

https://pubmed.ncbi.nlm.nih.gov/32817396

Telehealth home monitoring and postcardiac surgery for congenital heart disease

https://pubmed.ncbi.nlm.nih.gov/32817266

Trends in mortality and costs of pediatric extracorporeal life support

https://pubmed.ncbi.nlm.nih.gov/32801159

Can use of cerebral oxygenation predict developmental outcomes in preterm infants with NEC?

https://pubmed.ncbi.nlm.nih.gov/32848029

Helping babies breathe: from implementation to impact

https://pubmed.ncbi.nlm.nih.gov/32778538

Early postnatal discharge for infants: a meta-analysis

https://pubmed.ncbi.nlm.nih.gov/32826340

Implementation of the helping babies breathe training program: a systematic review

https://pubmed.ncbi.nlm.nih.gov/32778541

Duration of resuscitation at birth, mortality, and neurodevelopment: a systematic review

https://pubmed.ncbi.nlm.nih.gov/32788267

Clinical management of staphylococcus aureus bacteremia in neonates, children, and adolescents

https://pubmed.ncbi.nlm.nih.gov/32759380

Enterovirus and Parechovirus coinfection in a sudden unexpected infant death

https://pubmed.ncbi.nlm.nih.gov/32817397

Journal of Pediatrics

The harms of carrier status identification: a cautionary warning against newborn sequencing https://pubmed.ncbi.nlm.nih.gov/32417254

Experience with parent follow-up for communication outcomes after newborn screening identifies carrier status

https://pubmed.ncbi.nlm.nih.gov/32386871

Vulnerable child syndrome and newborn screening carrier results for cystic fibrosis or sickle cell https://pubmed.ncbi.nlm.nih.gov/32826027

Association between transport risk index of physiologic stability in extremely premature infants and mortality or neurodevelopmental impairment at 18 to 24 months

https://pubmed.ncbi.nlm.nih.gov/32442448

The economic impact of donor milk in the neonatal intensive care unit

https://pubmed.ncbi.nlm.nih.gov/32682581

Higher- or usual-volume feedings in infants born very preterm: a randomized clinical trial

https://pubmed.ncbi.nlm.nih.gov/32464224

Evaluation of a vaccine-communication tool for physicians

Fetal growth restriction and hypertension in the offspring: mechanistic links and therapeutic directions https://pubmed.ncbi.nlm.nih.gov/32450071

Randomized study of delayed cord clamping of 30 to 60 seconds in the larger infant born preterm https://pubmed.ncbi.nlm.nih.gov/32651013

Report on birth settings in the US: maternal and neonatal outcomes

https://pubmed.ncbi.nlm.nih.gov/32826023

Pediatric Research

Confounding biases in studies on early- versus late-caffeine in preterm infants: a systematic review https://pubmed.ncbi.nlm.nih.gov/31931506

Review: How to introduce MSC-based therapy for the developing lung safely into clinical care?

https://pubmed.ncbi.nlm.nih.gov/31931507

Pediatric subspecialty workforce: undersupply or over-demand?

https://pubmed.ncbi.nlm.nih.gov/31958801

Commentary on the Don Ostrow Trieste Yellow Retreat 2019: a successful biennium, what next?

https://pubmed.ncbi.nlm.nih.gov/31954375

Probiotic from human breast milk, Lactobacillus fermentum, promotes growth in animal model of chronic malnutrition

https://pubmed.ncbi.nlm.nih.gov/32023624

Increased rates of vesicoureteral reflux in mice from deletion of Dicer in the peri-Wolffian duct stroma https://pubmed.ncbi.nlm.nih.gov/32015493

Transcriptome analysis reveals dysregulation of genes involved in oxidative phosphorylation in a murine model of retinopathy of prematurity

https://pubmed.ncbi.nlm.nih.gov/32053824

A pilot study exploring interventions for physician distress in pediatric subspecialists

https://pubmed.ncbi.nlm.nih.gov/32054989

ELBW infants receive inadvertent sodium load above the recommended intake

https://pubmed.ncbi.nlm.nih.gov/32272484

Close Collaboration with Parents intervention improves family-centered care in different neonatal unit contexts: a pre–post study

https://pubmed.ncbi.nlm.nih.gov/32380505

Antibiotics in early life associate with specific gut microbiota signatures in a prospective longitudinal infant cohort

https://pubmed.ncbi.nlm.nih.gov/31954376

An experience with a bubble CPAP bundle: is chronic lung disease preventable?

https://pubmed.ncbi.nlm.nih.gov/31952073

Enquiring beneath the surface: can a gene expression assay shed light into the heterogeneity among newborns with neonatal encephalopathy?

https://pubmed.ncbi.nlm.nih.gov/31952072

Body composition and neuromotor development in the year after NICU discharge in premature infants https://pubmed.ncbi.nlm.nih.gov/31926484

Preterm birth and the future risk of orthopedic fracture

https://pubmed.ncbi.nlm.nih.gov/31968355

Evaluating preterm care across Europe using the eNewborn European Network database https://pubmed.ncbi.nlm.nih.gov/31972855

Archives of Disease in Childhood - Fetal & Neonatal Edition

Early cortical maturation predicts neurodevelopment in very preterm infants (PDF)

https://fn.bmj.com/content/fetalneonatal/105/5/460.full.pdf

Drainage, irrigation and fibrinolytic therapy (DRIFT) for posthaemorrhagic ventricular dilatation: 10-year follow-up of a randomized controlled trial

https://pubmed.ncbi.nlm.nih.gov/32623370

Faecal volatile organic compounds in preterm babies at risk of necrotizing enterocolitis: the DOVE study

https://pubmed.ncbi.nlm.nih.gov/31871055

Diffusion tensor imaging in neonatal encephalopathy: a systematic review

https://pubmed.ncbi.nlm.nih.gov/31822482

Propofol for endotracheal intubation in neonates: a dose-finding trial

https://pubmed.ncbi.nlm.nih.gov/31932363

Growth to early adulthood following extremely preterm birth: the EPICure study

https://pubmed.ncbi.nlm.nih.gov/31907276

Thyroid function in preterm infants and neurodevelopment at 2 years

https://pubmed.ncbi.nlm.nih.gov/32079615

Neurodevelopmental outcome descriptions in cohorts of extremely preterm children

https://pubmed.ncbi.nlm.nih.gov/31932362

Prophylactic hydrocortisone in extremely preterm infants and brain MRI abnormality

https://pubmed.ncbi.nlm.nih.gov/31980445

Bubble versus other continuous positive airway pressure forms: a systematic review and meta-analysis https://pubmed.ncbi.nlm.nih.gov/31969457

Impact of sociodemographic and clinical factors on offer and parental consent to postmortem following stillbirth or neonatal death: a UK population-based cohort study

https://pubmed.ncbi.nlm.nih.gov/31969458

Priorities for collaborative research using very preterm birth cohorts

https://pubmed.ncbi.nlm.nih.gov/32029530

Suboptimal heart rate assessment and airway management in infants receiving delivery room chest compressions: a quality assurance project

https://pubmed.ncbi.nlm.nih.gov/32029528

Basic principles of neonatal bubble CPAP: effects on CPAP delivery and imposed work of breathing when altering the original design

https://pubmed.ncbi.nlm.nih.gov/32047029

Developmental dysplasia of the hip in preterm breech infants

https://pubmed.ncbi.nlm.nih.gov/31900256

Does parental presence affect workload during neonatal resuscitation?

https://pubmed.ncbi.nlm.nih.gov/32561565

Cell therapy for the preterm infant: promise and practicalities

https://pubmed.ncbi.nlm.nih.gov/32253200

Images: Sternal cleft in a newborn

https://pubmed.ncbi.nlm.nih.gov/32269149

Images: Sprinkled water drops on the skin in newborns: congenital miliaria crystallina

https://pubmed.ncbi.nlm.nih.gov/32312743

Journal of Perinatology

Review: Preterm birth and neonatal acute kidney injury: implications on adolescent and adult outcomes https://pubmed.ncbi.nlm.nih.gov/32277164

Acute kidney injury, fluid balance and risks of intraventricular hemorrhage in premature infants https://pubmed.ncbi.nlm.nih.gov/32066840

The impact of increased awareness of acute kidney injury in the Neonatal Intensive Care Unit on acute kidney injury incidence and reporting: results of a retrospective cohort study

https://pubmed.ncbi.nlm.nih.gov/32681064

A comparison of Triple I classification with neonatal early-onset sepsis calculator recommendations in neonates born to mothers with clinical chorioamnionitis

https://pubmed.ncbi.nlm.nih.gov/32678316

Can we improve early identification of neonatal late-onset sepsis? A validated prediction model https://pubmed.ncbi.nlm.nih.gov/32203177

Impact of vaccination during pregnancy and staphylococci concentration on the presence of Bacillus cereus in raw human milk

Clinical impact of neonatal hypoglycemia screening in the well-baby care

https://pubmed.ncbi.nlm.nih.gov/32152490

Neonatal hypoglycemia after initiation of late preterm antenatal corticosteroids

https://pubmed.ncbi.nlm.nih.gov/32060360

Hydrocortisone and bronchopulmonary dysplasia: variables associated with response in premature infants

https://pubmed.ncbi.nlm.nih.gov/32382114

The effect of prolonged tracheal intubation on the association between patent ductus arteriosus and bronchopulmonary dysplasia (grades 2 and 3)

https://pubmed.ncbi.nlm.nih.gov/32669644

The effect of patent ductus arteriosus on coronary artery blood flow in premature infants: a prospective observational pilot study

https://pubmed.ncbi.nlm.nih.gov/32080335

Early postnatal cardiac follow-up of survivors of twin—twin transfusion syndrome treated with fetoscopic laser coagulation

https://pubmed.ncbi.nlm.nih.gov/32152494

Ventricular and total brain volumes in infants with congenital heart disease: a longitudinal study

https://pubmed.ncbi.nlm.nih.gov/32546829

Ten-year trends in infant neuroimaging from US Neonatal Intensive Care Units

https://pubmed.ncbi.nlm.nih.gov/32327710

Association of age of initiation and type of complementary foods with body mass index and weight-forlength at 12 months of age in preterm infants

https://pubmed.ncbi.nlm.nih.gov/32152493

Implications of continuity of care on infant caloric intake in the neonatal intensive care unit

https://pubmed.ncbi.nlm.nih.gov/32157220

Communication between neonatologists and parents when prognosis is uncertain

https://pubmed.ncbi.nlm.nih.gov/32382115

Improving communication with parents: the Neonatal Intensive Care Unit Empathy Workshop https://pubmed.ncbi.nlm.nih.gov/32712622

Quality Improvement Article: Standardizing the approach to late onset sepsis in neonates through antimicrobial stewardship: a quality improvement initiative

https://pubmed.ncbi.nlm.nih.gov/31907396

Perspective: A review of approaches for resolving disputes between physicians and families on end-of-life care for newborns

https://pubmed.ncbi.nlm.nih.gov/32393828

Journal Club: Precision medicine in neonatal hemodynamics: need for prioritization of mechanism of illness and defining population of interest

https://pubmed.ncbi.nlm.nih.gov/32719495

Neonatology

No new articles

American Journal of Perinatology

Maternal amino acid profiles to distinguish constitutionally small versus growth-restricted fetuses defined by doppler ultrasound: a pilot study

https://pubmed.ncbi.nlm.nih.gov/32120425

Do calcium and potassium levels influence ductal patency in preterm infants?

https://pubmed.ncbi.nlm.nih.gov/31167236

Head circumference growth is enhanced by SMOF lipid in preterm neonates

https://pubmed.ncbi.nlm.nih.gov/31167235

Preventive effects of probiotic supplementation on neonatal hyperbilirubinemia caused by isoimmunization

Effects of partially hydrolyzed formula on severity and outcomes of neonatal abstinence syndrome https://pubmed.ncbi.nlm.nih.gov/31238343

Journal of Neonatal-Perinatal Medicine

Commentary – Exosomes: Realization of the great therapeutic potential of stem cells

https://pubmed.ncbi.nlm.nih.gov/32444568

Antenatal management and outcomes of pregnancies with congenital diaphragmatic hernia https://pubmed.ncbi.nlm.nih.gov/31796690

Is the type of neuraxial anesthesia associated with adverse neonatal outcomes among patients with preeclampsia?

https://pubmed.ncbi.nlm.nih.gov/31771075

Middle cerebral artery doppler pulsatility index as a predictor of intrapartum meconium release in prolonged pregnancies

https://pubmed.ncbi.nlm.nih.gov/31771080

Assessing the clinical significance of echocardiograms in determining treatment of patent ductus arteriosus in neonates

https://pubmed.ncbi.nlm.nih.gov/32925117

Blood pressure ranges via non-invasive and invasive monitoring techniques in premature neonates using high resolution physiologic data

https://pubmed.ncbi.nlm.nih.gov/31771082

Use of extubation bundle including modified spontaneous breathing trial (SBT) to reduce the rate of reintubation, among preterm neonates ≤ 30 weeks

https://pubmed.ncbi.nlm.nih.gov/31744023

Management of abdominal distension in the preterm infant with noninvasive ventilation: Comparison of cenit versus 2x1 technique for the utilization of feeding tube

https://pubmed.ncbi.nlm.nih.gov/31929124

Single nucleotide polymorphisms in the dual specificity phosphatase genes and risk of necrotizing enterocolitis in premature infant

https://pubmed.ncbi.nlm.nih.gov/31985475

Prolonged intravenous immunoglobulin treatment in very low birth weight infants with late onset sepsis https://pubmed.ncbi.nlm.nih.gov/31771081

Evaluation of suspected neonatal herpes simplex virus infection in preterm versus term newborns in the neonatal intensive care unit

https://pubmed.ncbi.nlm.nih.gov/32083595

Effect of environmental music on autonomic function in infants in intensive and growing care units https://pubmed.ncbi.nlm.nih.gov/31771074

Kangaroo father care to reduce paternal stress levels: A prospective observational before-after study https://pubmed.ncbi.nlm.nih.gov/32538877

Percutaneous retrieval of fractured intravascular catheters in premature infants

https://pubmed.ncbi.nlm.nih.gov/31771073

Brief report: Metabolic acidosis in newborn infants following maternal use of acetazolamide during pregnancy

https://pubmed.ncbi.nlm.nih.gov/31771084

In utero congenital chylothorax treatment with fetal thoracoamniotic shunt: Case report

https://pubmed.ncbi.nlm.nih.gov/31744022

Volvulus with intestinal malrotation hiding a near-total intestinal aganglionosis: Case report https://pubmed.ncbi.nlm.nih.gov/31771072

Maternal Health, Neonatology and Perinatology

No new content

Neoreviews

Intestinal failure-associated liver disease in neonates

https://pubmed.ncbi.nlm.nih.gov/32873652

Challenges of microvillus inclusion disease in the NICU

https://pubmed.ncbi.nlm.nih.gov/32873653

Evaluation and management of common neonatal arrhythmias

https://pubmed.ncbi.nlm.nih.gov/32873654

Case 1: Infant with hypoglycemia and midline defects in heart failure

https://pubmed.ncbi.nlm.nih.gov/32873655

Case 2: Unusual cause of abdominal distention and abdominal wall erythema in a preterm infant

https://pubmed.ncbi.nlm.nih.gov/32873656

Case 3: An unusual rhythm in a 12-day-old infant

https://pubmed.ncbi.nlm.nih.gov/32873657

A2-week-old infant presenting with seizures

https://pubmed.ncbi.nlm.nih.gov/32873659

Fetal echocardiography in a pregnancy with planned home birth

https://pubmed.ncbi.nlm.nih.gov/32873660

JAMA Pediatrics

Ending the diagnostic odyssey—is whole-genome sequencing the answer?

https://pubmed.ncbi.nlm.nih.gov/32597967

Associations of maternal prenatal drug abuse with measures of newborn brain structure, tissue organization, and metabolite concentrations

https://pubmed.ncbi.nlm.nih.gov/32539126

Guidance for the conduct and reporting of clinical trials of breast milk substitutes

https://pubmed.ncbi.nlm.nih.gov/32391870

Association of prenatal opioid exposure with precentral gyrus volume in children

https://pubmed.ncbi.nlm.nih.gov/32511674

BMC Pediatrics

The risks of advancing parental age on neonatal morbidity and mortality are U- or J-shaped for both maternal and paternal ages (PDF)

https://bmcpediatr.biomedcentral.com/track/pdf/10.1186/s12887-020-02341-0

Clinical practice guideline on the prevention and management of neonatal extravasation injury: a before-and-after study design (PDF)

https://bmcpediatr.biomedcentral.com/track/pdf/10.1186/s12887-020-02346-9

Healthcare worker perceptions of the implementation context surrounding an infection prevention intervention in a Zambian neonatal intensive care unit (PDF)

https://bmcpediatr.biomedcentral.com/track/pdf/10.1186/s12887-020-02323-2

Introduction of less invasive surfactant administration (LISA), impact on diagnostic and therapeutic procedures in early life: a historical cohort study (PDF)

https://bmcpediatr.biomedcentral.com/track/pdf/10.1186/s12887-020-02325-0

Hematological reference intervals among full-term newborns in Ethiopia: a cross-sectional study (PDF)

https://bmcpediatr.biomedcentral.com/track/pdf/10.1186/s12887-020-02320-5

Outcomes of neonates with tracheostomy secondary to bronchopulmonary dysplasia (PDF)

https://bmcpediatr.biomedcentral.com/track/pdf/10.1186/s12887-020-02324-1

Pediatric Critical Care Medicine

Evaluation of bivalirudin as an alternative to heparin for systemic anticoagulation in pediatric extracorporeal membrane oxygenation

https://pubmed.ncbi.nlm.nih.gov/32404633

Rapid increase in clearance of phenobarbital in neonates on extracorporeal membrane oxygenation: a pilot retrospective population pharmacokinetic analysis

https://pubmed.ncbi.nlm.nih.gov/32639476

Skin-to-skin care is a safe and effective comfort measure for infants before and after neonatal cardiac surgery

https://pubmed.ncbi.nlm.nih.gov/32740179

Factors that contribute to cost differences based on ICU of admission in neonates undergoing congenital heart surgery: a novel decomposition analysis

https://pubmed.ncbi.nlm.nih.gov/32769705

Standardization of the perioperative management for neonates undergoing the Norwood operation for hypoplastic left heart syndrome and related heart defects

https://pubmed.ncbi.nlm.nih.gov/32701749

New England Journal of Medicine

Causal genetic variants in stillbirth (PDF)

https://www.nejm.org/doi/pdf/10.1056/nejmoa1908753?articletools=true

Editorial: Genomic insights into stillbirth (PDF)

https://www.nejm.org/doi/pdf/10.1056/nejme2016410?articletools=true

Lancet

No relevant content

JAMA

Association of routine infant vaccinations with antibody levels among preterm infants

https://www.ncbi.nlm.nih.gov/pubmed/32930758

Estimating risk ratios and risk differences alternatives to odds ratios

https://www.ncbi.nlm.nih.gov/pubmed/32930746

BMJ

Clinical manifestations, risk factors, and maternal and perinatal outcomes of coronavirus disease 2019 in pregnancy: living systematic review and meta-analysis (PDF) https://www.bmj.com/content/bmj/370/bmj.m3320.full.pdf

Pediatric Infectious Disease Journal

No relevant content

Pediatric Cardiology

No relevant content

Pediatric Neurology

Neuroprotection care bundle implementation to decrease acute brain injury in preterm infants https://pubmed.ncbi.nlm.nih.gov/32473764

Brain magnetic resonance imaging in congenital cytomegalovirus with failed newborn hearing screen https://pubmed.ncbi.nlm.nih.gov/32713673

Obstetrics and Gynecology

Neonatal and maternal composite adverse outcomes among low-risk nulliparous women compared with multiparous women at 39–41 weeks of gestation

https://www.ncbi.nlm.nih.gov/pubmed/32769638

Reproductive travel of intended parents for delivery of gestational carrier pregnancies https://www.ncbi.nlm.nih.gov/pubmed/32769637

American Journal of Obstetrics & Gynecology

Research Letters: Added value of interleukin-1 blockade to hypothermia in the treatment of neonatal encephalopathy (PDF)

https://www.ajog.org/article/S0002-9378(20)30329-X/pdf

Research Letters: Is umbilicocerebral ratio better than cerebroplacental ratio for predicting adverse pregnancy and neonatal outcomes? (PDF)

https://www.ajog.org/article/S0002-9378(20)30434-8/pdf

Hospital Pediatrics

Time to positive blood and cerebrospinal fluid cultures in febrile infants ≤60 days of age https://pubmed.ncbi.nlm.nih.gov/32868377

Relationship between clinical factors and duration of IV antibiotic treatment in neonatal UTI https://pubmed.ncbi.nlm.nih.gov/32817062

Supplementation practices and donor milk use in US well-newborn nurseries https://pubmed.ncbi.nlm.nih.gov/32778567

The Colorado Hospitals Substance Exposed Newborn Quality Improvement Collaborative: Standardization of care for opioid-exposed newborns shortens length of stay and reduces number of infants requiring opiate therapy

https://pubmed.ncbi.nlm.nih.gov/32769086

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