She received intravenous Phenobarbital 10 mg/kg followed by 5 mg/kg/day.

Initial laboratory findings including lumbar puncture and initial metabolic evaluation were all unremarkable. A tumor or congenital malformation of the left hemisphere of the brain was suspected after the first two dimensional brain ultrasonography. Multi Slice Computed Tomography (MSCT) revealed left HME, confirmed with the magnetic resonance imaging (MRI) together with polymicrogyria of frontal lobe, atypical form of the left Sylvian fissure and the left frontal ventriculomegaly. She developed refractory seizures (tonic; focal with automatisms – squelching, eye blinking; generalised, often waking her up from sleep). EEG showed suppression burst pattern and after extensive diagnostic evaluation the Ohtahara syndrome was diagnosed.

Despite several different antiepileptic drugs, and their different combination, frequency and severity of the seizures did not improve and she developed severe developmental delay. At the age of 10 months she underwent functional hemispherotomy, and so far, eight months after the surgery she experienced no seizures together with major improvement in neuromotor development (despite strabismus and right hemiparesis which occurred after surgery). Her twin sister is healthy, normally developing, without seizures. Our findings are in comply with the data from the literature, claiming that after surgery the improvement of the patients is remarkable.

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OPENING OF THE FIRST HUMAN MILK BANK IN CROATIA

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Objective Foundation project for the first human milk banks (HMB) in Croatia was launched in 2017 as the result of a collaboration between the Ministry of Health, University Hospital Centre (UHC) Zagreb, UNICEF and the Croatian Association of Breastfeeding Support Groups. The HMB was opened in UHC Zagreb on November 15, 2019 as a part of the Croatian Tissue and Cell Bank, a division of the Department of Transfusion Medicine and Transplantation Biology. The specific technical side is based on the PATH standards and Guide to the quality and safety of tissues and cells for human application, Council of Europe.

On January 10, 2020, HMB passed a Competent Authority (CA) inspection, conducted in accordance with the requirements of national tissue legislation that has been adapted to EU Directive 2004/23/EC on setting standards of quality and safety for the donation, procurement, testing, processing, preservation, storage and distribution of human tissues and cells. The specific technical part is based on the PATH standards and Guide to the quality and safety of tissues and cells for human application, Council of Europe.

The aim of this study was to review the very first experience in human milk banking in Croatia.

Methods We retrospectively analysed the data of the first 28 human milk donors.

Results From the opening to mid-February, 135 women showed interest in donating human milk, of which 28 became donors.

In February 2020, we had 24 still active donors. Four women stopped donating, with a median donation period of 2 months. All donors were tested for blood borne viruses by serology and NAT and were negative. In total, we received 79 L of donated human milk. We started pasteurizing the milk after obtaining a license. Of the 30 controlled pre-pasteurization milk pools, 10% was over the allowed microbial contamination. Microbiological controls were performed for each pasteurization cycle. They were all sterile. The nutritional values of milk were all within the expected range.

Conclusions Human milk is recognised as the optimal feeding for all newborn infants.

When mothers' own milk is not available, donor human milk provided by HMB is the second-best choice, especially for premature or sick infants. The opening of the HMB in Croatia is highly important in helping to provide the best possible medical care for prematurely born babies and infants with a serious medical condition when they cannot receive their mother's milk.

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MARKERS OF INFLAMMATORY RESPONSE OF THE INTESTINE IN NEWBORNS WHOSE MOTHERS RECEIVED A PROBIOTIC DURING THE 6 WEEKS BEFORE DELIVERY

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To determine the concentration of the fecal eosinophil-derived neurotoxin

(EDN) and fecal calprotectin as intestinal markers of inflammatory response in newborns whose mothers received a probiotic during the 6 weeks before delivery Pregnant women (n=115), depending on the number of detected chronic diseases, were divided into two groups. The main group included women with a history of two or more chronic diseases, including the genitourinary sphere

- 63/54.8%. The comparison group included pregnant women without a history of chronic diseases or having one chronic disease, with the exception of the pathology of the urogenital sphere - 52/46.2%. Pregnant women of the main group with a preventive purpose for 6 weeks before delivery used a probiotic containing *Bifidobacterium longum* and *Streptococcus thermophilus*. The concentration of fecal EDN and fecal calprotectin was assayed using an ELISA method (Immundiagnostik, Bensheim, Germany and Calprest, manufactured by Nycomed).

We found the following changes from the intestinal markers of inflammation in newborns depending on the use of probiotic by women before delivery: in children of the main group (mothers used probiotics) both markers were significantly lower than in comparison group (mothers not used probiotics).

Concentration of fecal EDN was 163.4 ± 58.2 vs 224.1 ± 83.4 ng/g ($P < 0.001$) and fecal calprotectin was 240.3 ± 78.6 vs 315.6 ± 101.2 mcg/g ($P < 0.001$).