Results Of the 100 patients enrolled in the study, mean gestational age was 32.5 weeks in milking group compared to 32.3 in control group.

The mean airway pressure was measured and statistical differences between the two groups was found being lower in umbilical cord milking, mean 10 mmhg, compared to 17 mmhg in other group.

Abstract 1129 Figure 1

Abstract 1129 Figure 2

Conclusion Umbilical cord milking may help to improve the immediate transition of the preterm infants through improving heart rate and ventilation data, however the long-term effects remain an issue and needs to be addressed in further studies.

1035 REACTOGENICITY AMONG LACTATING MOTHER AND BABY DYADS FOLLOWING COVID-19 VACCINES IN TWO MULTI-ETHNIC ASIAN COUNTRIES

Aims At the time of publication, there was limited evidence on outcomes of breastfeeding mother-child dyads on breastfeeding after COVID-19 vaccination. The aim of this study is to systematically quantify the incidence of local and systemic adverse events in lactating women and their children to allow clinicians to appropriately counsel lactating women on the risks-benefit ratio of WHO-approved COVID-19 vaccinations.

Methods A cross sectional survey was conducted from 14th August 2021 to 5th January 2022 in Singapore and Malaysia. Data including demographic information, maternal and child symptoms, and vaccine history were collected through an online questionnaire. The survey was distributed online through social media and advertisements. Women more than 21 years of age who received at least one dose of the WHO-approved COVID-19 vaccines Pfizer–BioNTech, Moderna, AstraZeneca, Sinovac while pregnant or lactating were eligible for the survey.

Results Responses of 2043 breastfeeding mothers were analysed. 1747 mothers received mRNA vaccines and 296 mothers received non-mRNA vaccines. Overall in terms of maternal reactogenicity, 79.3% and 79.5% of mothers reported any reactions to the first and second dose respectively, primarily local reactions (64.1% dose 1, 57.0% dose 2). 91.8% of mothers breastfed their child uninterrupted after receiving the COVID-19 vaccination. 89.2% of breastfed infants had no symptoms reported following maternal COVID-19 vaccination. More than half (54.8%) of lactating respondents reported no change in milk supply or production. Among those experiencing changes in lactation, symptoms lasted for an average of 4.2 +/- 6.9 days.

Conclusion Our findings suggest that the vaccine resulted in minimal disruption of lactation or adverse impact on the breastfed child in mothers receiving COVID-19 vaccination. Breastfeeding mothers may experience a change in breast milk supply when receiving COVID-19 vaccinations, which may be mitigated by proactive measures to ensure adequate rest and hydration. There is minimal severe reactogenicity with COVID-19 vaccination in lactating mother-child dyads.

1161 PARENTAL ENGAGEMENT AND FEEDBACK ON PARENT REPORT OF CHILDREN’S ABILITIES-REVISED QUESTIONNAIRE (PARCA-R-Q): THE ONGOING QUALITY IMPROVEMENT PROJECT

Aims Standardised neurodevelopmental questionnaires offer an alternative to formal resource-intensive, face-to-face assessment for high-risk NICU graduates. PARCA-R-Q is a validated tool for assessing children’s cognitive and language development at 24 months of age and is recommended by NICE, UK. Currently, there is no data on parental feedback on using this questionnaire. The aim is to gather service user feedback for PARCA-R-Q as a quality improvement and feasibility study.

Methods Formal multidisciplinary 2-year neurodevelopmental assessment clinic for infants at high risk for acquired brain injury currently runs in a hybrid model. All parents who completed PARCA-R-Q for this clinic were invited to participate in anonymised feedback. The survey consisted of open and closed-ended questions and explored parents’ knowledge,