Conclusions The findings of this study indicate that VLBW children as a group have more adaptation challenges than their peers born at term. This was still the case when children with CP were excluded.

EVALUATION OF FEEDING-EDUCATION PROGRAMME FOR CHILDREN WITH CEREBRAL PALSY AT INPATIENT PEDIATRIC UNIT: FROM CAREGIVERS’ PERCEPTION

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R Hoque. Dept. of Occupational Therapy, Centre for the Rehabilitation of the Paralyzed, Dhaka, Bangladesh

Objective Evaluate the feeding-education programme of the Paediatric Inpatient Unit of CRP, Savar, Dhaka, from perceptions of caregivers of children with cerebral palsy, who are attending the feeding-education programme.

Methodology The study was conducted using phenomenological method in qualitative approach. Caregivers of children with cerebral palsy were the study participants who stay with their children in the Paediatric Inpatient Unit of CRP and attend the feeding-education programme. Nineteen participants were selected using purposive sample. Data were generated through 7 individual interviews and 3 focus-group discussions and observations within 2 months. Each focus group consisted of 4 participants. Face-to-face interviews were conducted using a semi-structured questionnaire. Data were analyzed using content analysis under category, code and preparing theme for result.

Results The results indicate that the caregivers of children with cerebral palsy felt that the feeding education programme was very important for them and their children. They mentioned that this programme improved the feeding performance of their children and enhanced their learning.

Conclusion The results suggest that the feeding education programme has the potential to make a valuable contribution to education. Caregivers were very satisfied with occupational therapists for their way of teaching, demonstration, and repetition of information for better understanding, which directly help caregivers manage their children’s feeding and reduce their stress.

EVALUATION OF ETIOLOGY-SEVERITY OF HL, SCHOOL TYPE AND MODE OF COMMUNICATION IN NICU GRADUATES AT 3–5 YEARS OF AGE

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1EA van de Ven, 1HLM van Straaten, 2AM Oudesluys-Murphy, 2AMH Korver. 1Dept Neonatology, Isala Clinics, Zwolle; 2Pediatrics, Leiden University Medical Center, Leiden, The Netherlands

Background Little is known about follow up of NICU graduates with permanent hearing loss (HL) following introduction of neonatal hearing screening.

Aim Evaluation of etiology, severity of HL, school type and mode of communication in NICU graduates.

Methods All NICU graduates with HL identified at the age of 3–5 years at the speech and hearing centres in the Netherlands were included. Results of 2 stage AABR neonatal hearing screening, medical and audiologic follow up as well as performance measures for school type and primary mode of communication were evaluated.

Results Included were 91 newborns [BW 1990 g (sd 1070); GA 32.9 wks (sd 5.3)]. Of those 5.6% passed neonatal hearing screening. In 44.3% moderate HL (40–60 dB), in 23.9% severe (60–80 dB) and in 31.8% profound HL (>80 dB) was established.

In 53/91 cases parental consent was obtained for adjuvant follow up data. In 80.3% HL was of hereditary origin, in 24.2% HL was caused by asphyxia, in 9.1% by CMV-infection. In 8 cases (24.2%) no cause was identified.

LONGITUDINAL FOLLOW UP IN A COHORT OF ELBW/ VLBW INFANTS IN THE CONTEXT OF THE BAYLEY-III STANDARDIZATION IN GREECE

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1V Soubasi, 1K Velkos, 1Michaletou, 1V Papadopoulou, 1O Zafeirisou, 1P Papakyriakidou, 1V Drossou. 11st Neonatal Clinic, Ipoppokration General Hospital, Aristotle University of Thessaloniki; 1Dept of Child Psychiatry, Ipoppokration General Hospital, 11st Dept of Paediatrics, Ipoppokration General Hospital, Aristotle University of Thessaloniki, Thessaloniki, Greece

Background It is not clear whether the Bayley III is overestimating cognitive performance or it is a more valid assessment of emerging cognitive skills than the older edition II(Vohr B 2012).

Aim To compare the developmental profile in a cohort of premature infants in two different time points in order to assess the stability of the results, in the context of the Bayley-III standardization in Greece.

Methods Bayley-III scales(cognitive, language, motor, social-emotional, and adaptive behavior), were administered in 103 preterm infants (<32 weeks) at a mean age of 12mo and 24mo. Infants were divided in 2 groups based to their GA: A(n=48, 24–28wks),
Background and Aims

Triplets may have adverse neurodevelopmental outcome. Parents are advised to fetal reduction, and they often opt to reject it.

The Aim of our study is to present triplets’ neurodevelopmental outcome in our “follow-up” program.

Methods

We review medical records of triplet pregnancies in our institution. All children were evaluated with Griffiths Mental Developmental Scales (GMDS-ER). Parents were asked to express their feelings about having a triplet delivery.

Results

Twenty one triplets were indentified. Two pregnancies (6/21 triplets) (28.57%) were conceived after hormonal replacement and 5/7 pregnancies (71.42%) after IVF. Mean maternal age was 33.85 years (range 1–3). All but three were fresh embryo transfer. Sperm Injection was used in all IVF pregnancies. Mean number of cycles 1.8 (range 1–3). All but three were fresh embryo transfer. Intra Cytoplasmic Sperm Injection was used in all IVF pregnancies. Mean number of cycles 1.8 (range 1–3). All but three were fresh embryo transfer. One IVF cycle was from donor oocyte. Mean GA at birth was 35 weeks (range 23–35wks). Mean BW was 1852gr (range 1540–2300gr). One IUGR neonate was excluded. Three neonates (14.28%) had mild RDS. Three neonates (from the same IVF pregnancy with donor oocyte) had mobile CP (14.28%).

Abstract 1245 Figure 1

Conclusion

In our cohort Bayleys III composite scores seems to be stable in serial examinations; however are lower to those reported. ELBW infants at 24mo showed a delay in the motor domain. Comparison with a control group is deemed necessary.