Ekstraktionstabel – Amme-outcomes

PICO 1

Er der evidens for, at hud-mod-hud-kontakt påbegyndt fra første levedøgn, har positiv effekt på præmature børns amning sammenlignet med ingen hud-mod-hud-kontakt?

GA= Gestational age, BW = birth weight, STS=skin-to-skin, KMC= kangaroo mother care, NICU= neonatal intensive care unit, PNA= postnatal age, PMA= postmenstrual age, CA= corrected age, excl = exclusive, BF= breastfeeding, VPI= very preterm infant, PT= preterm infant, IBFAT = infant breastfeeding assessment tool,

Author and year	Population	Intervention	Control	Outcomes	Experimental - data	Control - data
WHO/Arya 2021 (1) RCT	3211 infants were randomized to intervention (1609) or control (1602). Intervention: Mean GA 32,6 week Mean BW 1500 g Control: Mean GA 32,6 week Mean BW 1500 g Inclusion: BW 1.000 - 1.799 g infants in 5 developing countries Exclusion: Unable to breathe spontaneously by 1 hour after birth or major congenital malformation	Immediate STS after birth. 1) STS started mean 1,3 h postpartum, 2) Continued mean 16.9 h/day until stable 3) Mean 20 h/day after transfer to STS ward	Transferred to the control NICU without their mother. 1) STS started mean 53,6 h postpartum (at least 24 h), 2) Continued mean 1,5 h/day until stable 3) Mean 19 h/day after transfer to STS ward	Initiation of breastmilk feeds within 24 h RR (95% CI): 1,29 (1,20 – 1,37) Infant put to breast before 72 h/pp RR (95% CI): 1,32 (1,24 – 1,41) Reached full breastmilk feeds within 7 d RR (95% CI): 1,14 (1,09 – 1,19) Excl. breastmilk feeding at discharge RR (95% CI): 1,05 (1,02–1,08)	941/1609 (58,5%) 1108/1609 (68,9%) 1261/1609 (78,4%) 1208/1298 (93,1%)	729/1602 (45,5%) 832/1602 (51,9%) 1105/1602 (69,0%) 1067/1203 (88,7%)

Author and year	Population	Intervention	Control	Outcomes	Experimental - data	Control - data
Zhang 2020 (2) Cohort	844 mothers of late preterm infants (GA <37 weeks) in the maternity ward. 627/844 (74%) chose STS 217/844 (26%) Did not choose STS	Mean 3,5 STS-sessions in hospital, mean 65 minutes STS per session. Start day 1 - presumable.	Not STS.	Excl breastmilk feeding at discharge OR (95% CI): 2,15 (1,53 – 3,02) Any breastfeeding discharge OR (95% CI): 1,61 (1,15, 2,25)	342/627 (54,5%) 409/627 (65,2%)	75/217 (34,6%) 113/217 (52,1%)
Mitha 2019 (3) Cohort	828 French preterm infants GA 32-34	STS initiated before 24 h pp	No STS during first week of life	Any breastmilk feeding at discharge OR (95% CI) 2,32 (1,35 - 3,98)	80/122 (66%)	46/102 (45%)
El Farrash 2020 (51) RCT	120 infants randomized to 1: Intervention 60 min STS (40), not included in PICO 1) 2: Intervention 120 min STS (40) or 3: control, no STS (40), 2: Mean GA 32,5 Mean BW 1687 3: Mean GA 32,4 Mean BW 1663 Inclusion: GA 31 – 35 weeks, stable Exclusion: major congenital anomalies, perinatal asphyxia, intraventricular hemorrhage.	STS 120 min/day in minimum 7 days in a row (mean 12 days) Invention started <24 t pp	Conventional neonatal care and parents could hold their babies for 15–30 min. for at least 7 days (not STS)	STS 120-min group had higher breastfeeding performance score (IBFAT) at discharge than the no-STS group (P<0,001)	Mean 10,7 (SD 0,92)	Mean 6,6 (SD 1,31)

PICO 2

Er der evidens for, at længerevarende hud-mod-hud-kontakt mellem præmature børn og deres forældre har større effekt på amning end korterevarende hud-mod-hud-kontakt?

Author and year	Population	Intervention	Control	Outcomes	Experimental – data	Control – data
Jayaraman 2017 (15) RCT	160 preterm infants randomized to intervention (80) or control (80) Intervention: Mean GA 32,7 Mean BW 1376 g Control: Mean GA 32,3 Mean BW 1369 g Inclusion: BW 1.000 – 1800 g, hemodynamically stable. Exclusion: mechanical ventilation or vasoactive support, necrotizing entero colitis, GA<28 w, recurrent apnea at enrollment, and major congenital malformations.	Intermittent early STS, was initiated soon after randomization (within the first 4 days of life) median 1.5 days (IQR 1 – 3.3) STS time mean 5.4 (SD 1.5) hours/day	Intermittent late STS (after complete stabilization, which is defined as off respiratory support and off intravenous fluids). Median initiation 8.5 days (IQR 7-10) STS time mean 4.5 (SD 0.9) hours/day	Exclusive breastmilk feeding at discharge (p<0,001) Exclusive breastfeeding one month postdischarge (p=0,001) Exclusive breastmilk feeding one month post discharge (p<0,001)	66/80 (83,5%) 32/78 (41,0%) 57/78 (73,1%)	39/80 (50,6%) 16/73 (21.9%) 26/73 (35,6%)

Author and year	Population	Intervention	Control	Outcomes	Experimental – data	Control – data
Goudard 2022 (14) Cohort	388 infants median GA 31.6 weeks, mean BW 1,429g. Excl BF rate at discharge: 61.6%. The 234 infants with BW 1.125 – 1.665 were included in final analysis 5 Brazilian NICUs	>149.6 minutes daily STS	<=149.6 minutes daily STS	Exclusive breastmilk feeding at discharge ($p<0.001$) Mean daily duration of STS was strongly associated with exclusive breastmilk feeding at discharge: Those with a mean daily STS duration of more than 149.6 minutes were more likely to be breastmilk fed exclusively at discharge compared to those with a mean daily STS duration of less or = 149.6 minutes ($p<0.001$)	90/121 (74,4%)	53/113 (46,9%)

Author and year	Population	Intervention	Control	Outcomes	Experimental – data	Control – data
Flacking 2011 (52) Cohort In this design, the duration of the intervention is the outcome	100 very preterm infants (VPI), median GA 29, range 24-31 weeks, BW 508 - 2263 g. 195 moderate preterm infants (PT), median GA 34, range 32-36 weeks, BW 1365 – 4125 g. The average number of STS-minutes per day was 130 (± 78) in the VPTinfants and 127 (±103) in the PT infants (p =0,696).	Cohort VPI: Any breastmilk feeding (72/98, 73%) Cohort PT: Any breastmilk feeding (169/195, 87%)	Cohort VPI: No breastmilk feeding (26/98, 27%) Cohort PT: No breastmilk feeding (26/195, 13%)	VPI Any breastmilk feeding 1 month (p = 0,04) PT Any breastmilk feeding 1 month Infants (all) who were exclusively breastfed at 1 month (n=202 infants) had experienced more STS time per day (p<0,05) than infants who were exclusively breastmilk fed by other methods (breast/bottle, bottle, other) at 1 month (n=32)	Any breastmilk feeding: Mean (SD) daily STS-minutes 139 (84) Any breastmilk feeding: Mean (SD) daily STS-minutes 126 (104) No minutes reported	No breastmilk feeding: Mean (SD) daily STS-minutes 108 (59) No breastmilk feeding: Mean (SD) daily STS-minutes 127 (98) No minutes reported
Parker 2021 (53) Cohort In this design, the duration of the intervention is the outcome	142 mothers of preterm infants GA <32 GA, <1500 g, single and twins. In groups according to outcome: BW 927 vs. 1005 GA 26.8 vs 27.6 Total time of STS in the first 6 weeks	Cohort: Infants fed any breastmilk (mother continued pumping or breastfeeding) 6 weeks pp	Cohort: Infants of mothers who ceased pumping 6 weeks pp	Mean **total** minutes of STS	Any breastmilk feeding: Mean STS minutes 714 (954)	No breastmilk feeding: Mean STS minutes 280 (522)

Author and year	Population	Intervention	Control	Outcomes	Experimental – data	Control – data
Oras 2016 (17) Cohort Reported with a correlation Variables included in regression analysis: GA, NICU A or B, infant's PNA at first STS, median daily duration of STS.	104 infants Mean GA 32,1 (range 28,0 - 33,9) Mean BW 1835 The 53 infants who attained full breastfeeding in the NICU did so at a median (range) of 35 + 0 (32 + 1 to 37 + 5) weeks of postmenstrual age.	Time to exclusive breastfeeding: Infants with longer daily duration of STS attained exclusive breastfeeding at a lower postmenstruat age (PMA) (rs = _0.326 p = 0.017).	Duration of daily STS.	Timing of establishment of exclusive BF The daily duration of skin-to-skin contact emerged as the sole significant factor in the regressin analysis that contributed to an explanation of the result (R2 = 0.215 p < 0.001).		
Maastrup 2014 (16) Cohort Variables included in General Linear regression Model: GA groups, SGA, gender, multiples, parity, mode of delivery, maternal education, smoking and language	1488 in cohort, 1002 established exclusive breastfeeding, 851 infants included in GLM Inclusion: 24-36 GA Whole cohort: mean GA:34,1 Mean BW:2094 The 1002 infants who established excl. BF did so at a mean PMA 36.7 weeks (signf differences between GA groups)	Continued STS on a daily basis after incubator care	Did not continue STS on a daily basis after incubator care	Timing of establishment of exclusive breastfeeding	485/851 (57%) infants continued daily STS and established exclusive breastfeeding (1,1 days (95% CI 0,0–2,1) earlier (p=0,046)	Ref did not continue STS and established exclusive breastfeeding later

Author and year	Population	Intervention	Control	Outcomes	Experimental – data	Control – data
El-Farrash 2020 (51) RCT	120 infants randomized to 1: Intervention 60 min STS (40), 2: Intervention 120 min STS (40) or 3: control (40), not included in PICO 2 1: Mean GA 32,5 Mean BW 1700 g 2: Mean GA 32,5 Mean BW 1687 Inclusion: GA 31 – 35 weeks, stable Exclusion: major congenital anomalies, perinatal asphyxia, intraventricular hemorrhage.	Intervention group: STS 120 min/day in minimum 7 days in a row (mean 12 days) Invention started <24 t pp	Control group: STS 60 min/ day in minimum 7 days in a row (mean 12 days)	IBFAT score at discharge No significant difference between intervention 1 and 2 (no p-value)	120 min: mean 10.7 (SD 0.92)	60 min: mean 9 (SD 0.97)