Infloran Newborn Use Only

necrotising enterocolitis (NEC), late-onset sepsis, mortality and reduction in time to reach full feeds. [1-3] 2) Small for gestational age, preterm neonates with abnormal umbilical artery Doppler for prevention of NEC and reduction in time to reach full feeds. [1, 4] 3) The safety and efficacy for other populations of infants at risk of NEC, sepsis or feed intolerance including infants with asphyxia, undergoing exchange transfusion, abdominal surgical conditions and congenital heart disease has not been assessed in clinical studies. Action Probiotics promote colonisation of the gut with beneficial organisms, preventing colonisation by pathogens, improving the maturity and function of gut mucosal barrier, and modulating the immune system (e.g. TLR4 receptor, nuclear factor-kB and inflammatory cytokines) to the advantage of the host. [5] Drug Type Probiotic bacteria Trade Name Infloran Presentation 250 mg capsule containing <i>Lactobacillus acidophilus</i> [10 ⁶ colony-forming units, NCDO 1748; National Collection of Dairy Organisms] and Bifidobacterium bifidum [10 ⁹ colony-forming units, NCDO 1748; National Collection of Dairy Organisms, Reading, United Kingdom]; Laboratorio Farmaceutico, Italy. [6, 7] Dosage/Interval Commence the dose soon after birth irrespective of the feeds. Birthweight < 1 kg: Commence with ½ capsule (125 mg) daily until neonate is on 40 mL/kg/day of oral feeds and then change to 1 capsule daily until 34–36 weeks or considered no longer at risk of NEC. Birthweight ≥ 1 kg: Commence 1 capsule (250 mg) daily and continue until 34–36 weeks or considered no longer at risk of NEC. <th>Alert</th> <th></th>	Alert	
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	Infloran should provide minimum of 2 x 10 ⁹ CFU. Studies have shown that up to 2 capsules/day dose is well tolerated by older premature neonates (> 1500 g).[8]
	All probiotic preparations given to newborn infants should have undergone quality testing in an Australian TGA equivalent regulated system including batch to batch testing for colony count to rule out contamination.[8]
	The intestinal barrier could be compromised during severe sepsis and critical illness. Probiotics may be discontinued in the initial stages of severe late onset sepsis, suspected NEC, or critical illness.[8]
Evidence summary	Refer to full version.
References	Refer to full version.

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