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[Neonatal hyperbilirubinemia of inadequately breast-fed infants and the effect of formula supplementation].

[Article in Japanese]

[Okawa K](#), [Takada S](#), [Sakai M](#), [Kayama F](#), [Mizutani K](#), [Mori H](#).

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Abstract

One hundred and fifty full-term breast-fed infants were analysed for their oral intake in the first 6 days. Fifty infants with less than 330 ml/kg/6 days breast feeding were defined as inadequately breast-fed infants. Twenty inadequately breast-fed infants without formula supplementation had significantly lower total fluid intake, lower total calorie intake, more body weight loss and significantly higher rates of hyperbilirubinemia and requirement of phototherapy when compared with the control group of 100 infants with more than 330 ml/kg/6 days breast feeding. On the other hand, 30 inadequately breast-fed infants with formula supplementation had significantly higher total fluid intake, higher total calorie intake, lower body weight loss and requirement of phototherapy than those without formula supplementation. From these data, we suggest that (1) Inadequate feeding may be a factor responsible for the higher prevalence of early neonatal jaundice in breast-fed infants reported in the literature. (2) Lower fluid intake, lower calorie intake and greater body weight loss may be associated with the higher incidence of hyperbilirubinemia and requirement of phototherapy. (3) Formula supplementation may be helpful in decreasing the risk of hyperbilirubinemia in inadequately breast-fed infants.

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Publication Types, MeSH Terms

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[Food, Formulated](#)

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[Hyperbilirubinemia/etiology*](#)

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