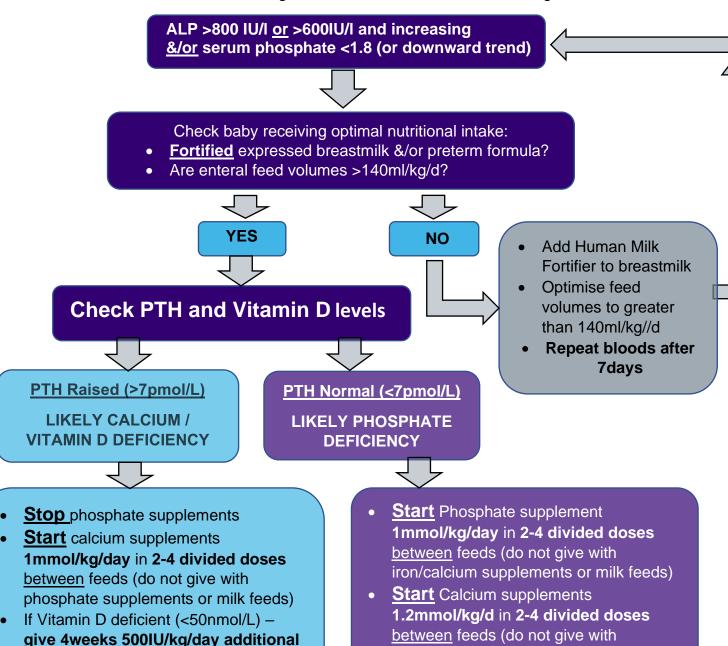




# **Nutritional Management of Metabolic Bone Disease**

#### (Enteral Feeding Only)

Please refer to network guidelines for further information and guidance.



### **Monitoring:**

- 1. Recheck ALP, PTH, Calcium and Phosphate every 1-2 weeks
- 2. Recheck Vit D levels monthly whilst on treatment dose

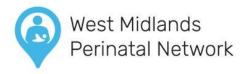
### When to stop supplements:

**Vitamin D supplement** 

- Reduce supplements when biochemical parameters begin to normalise.
- Halve doses initially, monitor ALP, PTH, Calcium and Phosphate weekly.
- If parameters are within normal ranges on 2 consecutive weekly samples stop supplements

phosphate supplements or milk feeds)





## Recommended screening for MBDP (adapted from Chinoy et al, 2019)

At risk groups		Preterm: gestational age less than 28 weeks.
	<u>Who</u>	Low birth weight: less than 1500 g.
		Parenteral nutrition for over 2 weeks.
		Chronic lung disease/bronchopulmonary dysplasia.
		Necrotising enterocolitis.
		Prolonged prescribing of glucocorticoids, antacids or loop diuretics.
Screening		From 2–3 weeks of age.
	when	1–2 weekly depending on degree of risk.
Screening		Bone profile: serum ALP, phosphate and adjusted calcium.
	what	

#### **References:**

- Metabolic Bone Disease. West Midlands Neonatal Bedside Guidelines 2022-24
- Chinoy A, Mughal MZ, Padidela R. <u>Metabolic bone disease of prematurity: causes, recognition, prevention, treatment and long-term consequences</u>. Arch Dis Child Fetal Neonatal Ed. 2019 Sep;104(5):F560-F566. doi: 10.1136/archdischild-2018-316330. Epub 2019 May 11.
- Rayannavar A, Calabria AC. Screening for Metabolic Bone Disease of prematurity. Semin Fetal Neonatal Med. 2020 Feb;25(1):101086. doi: 10.1016/j.siny.2020.101086. Epub 2020 Jan 16. PMID: 32081592.
- Embleton, Nicholas et al. Enteral Nutrition in Preterm Infants (2022): A Position Paper from the ESPGHAN Committee on Nutrition and invited experts. Journal of Pediatric Gastroenterology and Nutrition ():10.1097/MPG.0000000000003642, October 21, 2022.

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