Follow-up of Lung Function 8 and 16 years after Moderate to Late Preterm Birth

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With the ability to follow-up preterm infants who enter longitudinal study cohorts for decades nowadays, we are learning more and more about the complications of being born preterm relative to their physiologic and developmental capacity later in life. This week Thunqvist et al. (10.1542/peds.2015-2056) look at lung function in children and teens in a Swedish prospective birth cohort of which 149 moderate to late preterms born at 32-36 weeks gestations were compared to 2472 term babies by looking at their spirometry results when they were 8 and 16 years of age.

The authors identified significantly lower FEV1 at age 8 if a patient had been born a preterm female compared to a term female, but this was not seen in preterm and term males-until age 16 years of age when both genders showed significantly lower FEV1s. The implications of these findings and the need for us to more closely monitor lung function even in moderate to late preterms make for an interesting discussion section of this article-and will hopefully enable you and most importantly your moderate to late preterm patients to breathe more easily with appropriate pulmonary support as needed as they grow up under your care.

Further Reading

- A Standardized Discharge Process Decreases Length of Stay for Ventilator-Dependent Children
- Lung Function in Very Low Birth Weight Adults
- Pediatrics on Facebook
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