

Pediatric enteral nutrition therapy for burn victims: When should it be initiated?

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Abstract

The aim of this study was to review the scientific evidence regarding the initiation of enteral nutrition in the pediatric burn population. This study was a systematic review and meta-analysis of randomized clinical trials comparing early enteral nutrition and late enteral nutrition in individuals aged 1 month to 18 years with burns. The MEDLINE/PubMed, Embase and Cochrane Library databases were searched using the terms “burns”, “fires”, “child nutrition disorders”, “nutritional support” and related terms. Three articles that included a total of 781 patients were identified. There was no significant difference in the mortality rate between the early and late groups (OR = 0.72, 95% CI = 0.46 - 1.15, p= 0.17). Patients who received early enteral nutrition had a 3.69-day reduction in the length of hospital stay (mean difference = -3.69, 95% CI = -4.11 - -3.27, p < 0.00001). There was a higher incidence of diarrhea and vomiting and decreased intestinal permeability in the early group. This group also presented higher a serum insulin concentration and insulin/glucagon ratio as well as lower caloric deficit and weight loss when compared to the control group. Analysis of the different intragroup variables suggests the importance of starting nutritional support early. Considering the number of pediatric burn patients, there is a need for robust studies with greater scientific impact.

Biography

Mariéle Valentini has completed her master's in child and adolescent health at the age of 27 years from Federal University of Rio Grande do Sul, Brazil. Afterwards, she completed a postgraduate course in urgency and emergency at the age of 29 years from Hospital de Pronto Socorro de Porto Alegre, Brazil. Currently, working as nutritionist in Unimed Vale do Caí Hospital.

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