

Table 17 Standard "Prevention of necrotising enterocolitis (NEC)" public consultation comments

ID	Country	How would you rate the overall quality of the standard "Prevention of necrotising enterocolitis (NEC)"?	Do you have any recommendations on how to improve the standard "Prevention of necrotising enterocolitis (NEC)" (e.g. rational, benefits, components)?		Is there any important evidence or useful guidelines you would recommend to be included in the standard "Prevention of necrotising enterocolitis (NEC)"?		Do you think the standard "Prevention of necrotising enterocolitis (NEC)" is relevant in your country?		Do you have any conflict of interest (e.g. financial support or consulting of industry)?		Please specify if you are responding as an individual or on behalf of an organisation.
		Response	Response	Yes - Please make your recommendation(s) below.	Response	Yes - Please specify below, which evidence should be added (DOIs, references) to the standards and why.	Response	No - Please specify below why the standard is not relevant in your country.	Response	Yes - Please enter your conflict(s) of interest.	Response
1	Poland		5	Yes - Please make your recommendation(s) below.	Comments Number 6 Probiotics in NEC ate still not recommended. See below last review in Cochrane Libery Sharif S, Meader N, Oddie SJ, Rojas-Reyes MX, McGuire W. Probiotics to prevent necrotising enterocolitis in very preterm or very low birth weight infants. Cochrane Database of Systematic Reviews 2020, Issue 10. Art. No.: CD005496. DOI: 10.1002/14651858.CD005496.pub5. Given the low to moderate level of certainty about the effects of probiotic supplements on the risk of NEC and associated morbidity and mortality for very preterm or very low birth weight infants, and particularly for extremely preterm or extremely low birth weight infants, further, large, high-quality trials are needed to provide evidence of sufficient quality and applicability to inform policy and practice	Yes - Please specify below, which evidence should be added (DOIs, references) to the standards and why.	see above	Yes	No		Coalition for Premies
2	Czech Republic		4	No		No		Yes	No		Individual
3	Poland		5	No		No		Yes	No		Individual
4	United States		3	Yes - Please make your recommendation(s) below.	Recommendation should include information for parents on the need for human milk fortification. Evidence for need for fortification is fairly high. Additionally, there should be information for parents regarding the types of fortification available. While the evidence is still emerging, parents should be informed there are different sources and qualities of fortification available. Risks and potential benefits should be explained. As new products are emerging on the markets, parents are not informed about the quality of the evidence for many of them.	Yes - Please specify below, which evidence should be added (DOIs, references) to the standards and why.	One well powered (DOI: 10.1016/j.jpeds.2009.10.040) RCT showed a decreased incidence of NEC when human milk-based fortifiers are used. One underpowered RCT (DOI: 10.1093/ajcn/nqz091) showed a near significant decrease (p=0.07) in a combined morbidity and mortality index for NEC, late-onset sepsis, severe ROP, BPD, and/or mortality. This second study was (according to the authors) powered for a specific feeding outcome based on Assad and then a different definition of feeding intolerance was used in the published results. Given this now underpowered study is being used to dispute the advantages of a human milk-based fortifier, I believe there is low level evidence to support the use of such products. Further study is needed, however, a very large number of cohort studies have been published that support the outcomes of both of these RCTs, adding weight to the evidence. This body of evidence is too voluminous and too important for infant outcomes to be entirely dismissed.	Yes	Yes - Please enter your conflict(s) of interest.	I am now employed by industry, but am also a practicing neonatologist with long experience in the NICU. I believe parents should be given all the available information for informed decisions rather than withholding potentially beneficial information, if available.	Individual
5	Portugal		5	No		No		Yes	No		APEPEN
6	Portugal		5	No		No		Yes	No		Portuguese Society of Neonatology
7	Slovakia		5	No		No		Yes	No		Section of Nurses Working in Neonatology, part of the Slovak Association of Nurses and Midwives is an organizational unit of the Slovak Medical Society
8	Estonia		5	No		No		Yes	No		Estonian Perinatal Society
9	Romania		5	No		No		Yes	No		ANMCS
10	Czech Republic		5	No		No		Yes	No		Individual
11	Hungary		5	No		I don't know		Yes	No		Melletted a helyem Egyesulet
12	Croatia		5	No		No		Yes	Yes - Please enter your conflict(s) of interest.	Cooperation with Nutricia and Thermo Fisher Scientific.	Croatian Society for Neonatology and Neonatal Intensive Medicine
13	Portugal		5	No		No		Yes	No		Individual