1. Introduction and who the guideline applies to:

This guideline is aimed at all Health care professionals involved in the care of infants within the Neonatal Service.

Aims:
- To outline the process for prescription and administration of a probiotic preparation. Current evidence suggests that probiotics may reduce the incidence of severe necrotising enterocolitis.

Key Points
- Neonates < 32+0 gestation and <1500 grams are eligible for probiotics.
- The probiotic formulation (Labinic) contains live bacteria. Standard infection control measures apply for its preparation and administration.
- Each probiotic bottle should be discarded 30 days after opening.
- The probiotic drops should be withheld if nil by mouth.
- Blood culture growth of *Lactobacillus acidophilus* / *Bifidobacterium bifidum* / *Bifidobacterium infantis* is uncommon and should be discussed with the consultant neonatologist and microbiologist.
- Labinic should be discontinued when an infant reaches 34 weeks corrected gestational age.

Related UHL documents

<table>
<thead>
<tr>
<th>Document</th>
<th>ID Number (if applicable) or Appendix No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feeding preterm neonates guidelines</td>
<td>C105/2005</td>
</tr>
</tbody>
</table>

Background

Systematic reviews (including meta-analyses) of studies employing different probiotic preparations and feeding regimens concluded that preterm and low birth weight infants benefit from probiotics to prevent severe necrotising enterocolitis and death (1-9). The probiotic preparation Labinic is the preferred probiotic of choice on the UHL neonatal units due to shelf-life and ease of preparation (10).
2. Guidance:

**Labinic: Composition and Characteristics**

- Each 0.2 ml Labinic liquid drops contains approx. 2 billion bacteria (*Lactobacillus acidophilus, Bifidobacterium bifidum and Bifidobacterium infantis*)
- Other constituents: EU-approved food additive & medium chain triglyceride oil.
- Labinic is not licensed as a medicine; it is categorised as a food product.
- Storage is at room temperature (max 25°C)
- Labinic is lactose, dairy, gluten, soya and animal product free.

**Probiotic Feeding in Preterm Very Low Birth Weight neonates**

- <32⁰ weeks or birthweight <1500g
- Tolerating minimal enteral nutrition for 24 hours

- Prepare Labinic feeds as per instructions
- Do not add the probiotics to continuous feeds.
- Parent information leaflets are available if required
- At discharge, ensure use of probiotics is clearly documented in the Badgernet discharge summary letter.

**STOP probiotics if:**
- Nil by mouth
- Blood culture positive with probiotic bacteria strains

Following a decision to restart, ensure the baby tolerates 24 hours of minimal enteral feeding prior to re-commencing probiotics.
**Probiotic (Labinic) Prescription**

- Prescribe on drug chart as follows:

  **Labinic 0.16 ml (4 drops) once daily; given PO/NG with milk.**

- This needs to be checked prior to administration as with any medication.

**When to stop Labinic**

- Stop at 34 weeks corrected gestation
- If baby is nil by mouth for any reason.
- If baby develops blood culture positive with the probiotic bacteria strains.
- If being transferred to another hospital, the probiotic may be given on the day of transfer if due, but will not normally be continued in the receiving hospital unless they also have a policy of giving probiotics.

**Probiotic (Labinic) Preparation and precautions (Appendix)**

- The Labinic vials will be shared between patients. Labinic feeds should be prepared by strict adherence to aseptic non-touch technique in the drug preparation area.

- Use clean gloves and **do not touch the rim / inside of cap.**

- Shake the bottle well prior to first use and allow it to stand for 30 seconds. The bottle needs to be gently swirled for 5-10 seconds prior to subsequent uses.

- Ensure the bottle is dated when opened as the probiotics can only be used for 30 days. The bottle must be discarded after this.

- When opening a new bottle remove the stopper using clean gloves and discard it. Replace this with a small bung.

- Using a medical straw and sterile 1 ml oral (purple) syringe, aspirate 0.16 ml from the bottle.

- Please take care not to spill the excess medication around the sides of the bottle. If there is a spillage, use clean gloves and sterile gauze to wipe it.

**Labinic administration**

- Labinic is drawn directly from the bottle and given without further dilution either orally or via NGT.

- Start by giving the probiotic first. Following this, milk should be given to ‘flush’ the dose through the NGT. This will prevent blockage of the NGT.
3. Audit standards:

1. All eligible babies <32⁰ weeks or < 1500 grams should receive probiotics drops with feeds (100%).
2. The probiotic drops should be discontinued at 34 weeks corrected gestation or when nil by mouth.

4. Supporting References:


Guideline development:

<table>
<thead>
<tr>
<th>Sept 2018</th>
<th>Neonatal Guidelines Meeting – New Guideline (amendments recommended)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sept 2018</td>
<td>Neonatal Governance Meeting</td>
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</table>
## Appendix: Probiotic Administration

### 1. Preparation of Tray

<table>
<thead>
<tr>
<th>Image</th>
<th>Description</th>
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<tbody>
<tr>
<td>![Image](120x111 to 285x227)</td>
<td>Ensure ANTT technique has been followed for preparation of the tray. In the clean tray, you will require:</td>
</tr>
</tbody>
</table>
| ![Image](119x251 to 302x372) | - 1 ml oral syringe  
- medicines straw  
- small bung |

### 2. Preparation of Probiotic

<table>
<thead>
<tr>
<th>Image</th>
<th>Description</th>
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</thead>
</table>
| ![Image](119x394 to 258x520) | Use clean gloves  
Do not touch the dropper or rim. |
| ![Image](88x77 to 285x302) | When opening a new bottle, shake well prior to use.  
Following this, remove the stopper using clean gloves and discard it.  
Ensure the bottle is dated when opened as once opened, the probiotics can only be used for 30 days and the bottle must be discarded after this. |
| ![Image](119x553 to 299x686) | Replace the stopper with a small bung |
Using a medical straw, draw up 0.16 ml of probiotic into the syringe.

3. Administration to Baby

Start the feed by giving the 0.16 ml of probiotic via the nasogastric or orogastric tube.

This should be followed immediately by a milk feed for the baby. Please follow the NG feeding guidance for this.