Supplementary Materials: Nutrition of Preterm Infants and Raw Breast Milk-Acquired Cytomegalovirus Infection: French National Audit of Clinical Practices and Diagnostic Approach

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				ants with raw breast IV infections.	Use of raw breast m Use of raw breast milk of Unconditionally on all p	when it is used): oreterm infants:	Q Yes	□ No
preterm infants from CM weight of 1500 g. Howev nutrition with raw breast r milk-acquired CMV infec	tions agreed on V-positive mothe ver, since 2012, t nilk for all prete tion does not off	the contra ers before the Americ erm infants fset the ber	indication a correcte can Acade s, consider nefits of ra	to feed with raw breast milk d age of 32 weeks or under a mic of Pediatrics recommends ing that the low risk of severe	Based on the infants' w	nn: nich term?	Ves Ves	□ No □ No 32 weeks □ >33 weeks □ >34 weeks □ No □ >1500 g □ >2000 g
General data: Neonatal unit: Hospital: Approximate annu ≤ 32 weeks: ≤ 1500 g;	NICU nal hospitalisation	non-1	ICU		What are the obstacles t Risk of transmitting info Which ones?	ctions?	□ Yes □ HIV	□ No □ Others:
Current practices:					Others:			
Use of frozen milk: Use of pasteurised milk: Use of raw milk:	YesYesYes	□ No □ No □ No						
Promotion of breastfeedir Presence of a breastfeedir Established protocol to he	g counsellor?	i,	☐ Yes ☐ Yes ☐ Yes	□ No □ No □ No	Postnatal CMV infecti	0.05		
Access to a Human milk b	oank?	ţ	Yes	No	Did milk-acquired CMV		been diagnose	d in the unit?
If the infant's mother mill before a corrected age of:		is Human	milk syste	ematically used for infants	If yes: The infection was:	 asymptot with seven 		 with mild signs "sepsis-like" symptoms
- <30 weeks? - <32 weeks? - <33 weeks? - <34 weeks?	☐ Yes ☐ Yes ☐ Yes ☐ Yes	□ No □ No □ No □ No			The evolution was:	goodsepsis		 bacterial coinfection death
Comments:					Comments:			
								Thanks for participating

Figure S1. Translation of the questionnaire in English.

Table S1. Demographic data.

	NICU (<i>n</i> = 58)	Non-ICU (<i>n</i> = 47)
Overall hospitalisations	650 (140–2700)	400 (150–1000)
Hospitalisations of infants born before a corrected age under 32 weeks	125 (20–400)	30 (0–250)
Hospitalisations of infants born below a weight of 1500 g	115 (16–400)	26 (0–250)

The results are represented by the median and the extremes (minimum-maximum).