

ORAL AND NON-ORAL SENSORIMOTOR STIMULATION IN PRETERM INFANTS: BIBLIOGRAPHIC REVIEW

Estimulação sensoriomotora intra e extra-oral em neonatos prematuros: revisão bibliográfica

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ABSTRACT

Prematurity is one of the most prevalent factors in children's hospital. The speech therapy performed in hospitals focusing on premature newborn has gained more space. This intervention had as main purpose the detection of problems related with feeding and provides solutions to newborns that use enteral tubes due to organic immaturity. The use of techniques has been exploited aiming the maturation of oral sensorimotor system in a more accelerated way, besides a safe transition to full oral feeding. The purpose of this study is to conduct a systematic review of national and international literature in order to list the different techniques and elucidate their effectiveness to the maturation of oral sensorimotor system in preterm neonates who remain in hospital. According to the literature, the most used techniques in Brazil were the non-nutritive sucking with minimal gloved finger or orthodontic pacifier. In other countries, the most cited techniques were non-nutritive sucking on pacifier and stimulation of the oral sensorimotor system. The techniques used in Brazil and abroad have reflected positively on the development of oral functions of neonates. Taking into account the need to promote exclusive breastfeeding, recent publications have shown alarming and disturbing percentage of use of synthetic nozzles for stimulation in neonatal intensive care.

KEYWORDS: Infant, Newborn; Infant, Premature; Feeding; Deglutition Disorders; Intensive Care, Neonatal; Breast Feeding

INTRODUCTION

Speech therapy performed in hospitals focusing newborns under risk has reaching more space. It aims to detect problems and propose solutions to neonates presenting difficulties with oral feeding (OF), due to their organic immaturity¹.

The speech pathology therapist is part of the minimum team of professionals working with newborns under risk in Neonatal Intensive Care Units (NICU). Their participation is determined by the Ministry of Health under regulation nº 930 in force since May 10th of 2012². The professionals

evaluates newborns that do not coordinate sucking, swallowing and breathing (SSB), lethargic neonates with weak sucking, apnea, declining saturation levels while feeding, gastro-esophageal reflux episodes, coughing while or after swallowing and those who are on gastric tube³.

Prematurity is one of the main factors that provoke neonatal complications, because retards newborn's (NB) natural development. Besides, the preterm infant is inclined to other future complications, as cognitive function compromising⁴.

According to World Health Organization (WHO), the preterm newborn (PTNB) or premature is the one that was born before the 37th gestational week. The classification for those neonates is based on the gestational age (GA), birth weight, on the relation weight and GA and also corrected gestational age (CGA). These data are used on the evaluation of baby's size and development after the 40th week⁵.

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Conflict of interest: non-existent

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 - The Rise of Digital Reading Oral Sensorimotor Functionpb 1998
 - Advantages of eBooks Over Traditional Books
2. Identifying Oral Sensorimotor Functionpb 1998
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Oral Sensorimotor Functionpb 1998
 - User-Friendly Interface
4. Exploring eBook Recommendations from Oral Sensorimotor Functionpb 1998
 - Personalized Recommendations
 - Oral Sensorimotor Functionpb 1998 User Reviews and Ratings
 - Oral Sensorimotor Functionpb 1998 and Bestseller Lists
5. Accessing Oral Sensorimotor Functionpb 1998 Free and Paid eBooks
 - Oral Sensorimotor Functionpb 1998 Public Domain eBooks
 - Oral Sensorimotor Functionpb 1998 eBook Subscription Services
 - Oral Sensorimotor Functionpb 1998 Budget-Friendly Options
6. Navigating Oral Sensorimotor Functionpb 1998 eBook Formats

- ePub, PDF, MOBI, and More
- Oral Sensorimotor Functionpb 1998 Compatibility with Devices
- Oral Sensorimotor Functionpb 1998 Enhanced eBook Features

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- Adjustable Fonts and Text Sizes of Oral Sensorimotor Functionpb 1998
- Highlighting and Note-Taking Oral Sensorimotor Functionpb 1998
- Interactive Elements Oral Sensorimotor Functionpb 1998

8. Staying Engaged with Oral Sensorimotor Functionpb 1998

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- Participating in Virtual Book Clubs
- Following Authors and Publishers Oral Sensorimotor Functionpb 1998

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- Benefits of a Digital Library
- Creating a Diverse Reading Collection Oral Sensorimotor Functionpb 1998

10. Overcoming Reading Challenges

- Dealing with Digital Eye Strain
- Minimizing Distractions
- Managing Screen Time

11. Cultivating a Reading Routine Oral Sensorimotor Functionpb 1998

- Setting Reading Goals Oral Sensorimotor Functionpb 1998
- Carving Out Dedicated Reading Time

12. Sourcing Reliable Information of Oral Sensorimotor Functionpb 1998

- Fact-Checking eBook Content of Oral Sensorimotor Functionpb 1998
- Distinguishing Credible Sources

13. Promoting Lifelong Learning

- Utilizing eBooks for Skill Development
- Exploring Educational eBooks

14. Embracing eBook Trends

- Integration of Multimedia Elements
- Interactive and Gamified eBooks

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