Limited health literacy in caregivers of very premature infants

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PAS Meeting

May 1, 2016
Disclosures

All authors have no financial relationships to disclose or Conflicts of Interest (COIs) to resolve
Background

- 380,000 premature infants (< 37 weeks) born in 2014
- Substantial racial and economic disparities in perinatal outcomes, including prematurity
Background

- Low socioeconomic status infants have worse outcomes after discharge:
  - Higher post-neonatal mortality
  - Increased ER visits, readmissions
Socioeconomic Status → Health Literacy → Health Outcomes
What is Health Literacy?

“The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.”
2004 Institute of Medicine Report:

- Limited health literacy (LHL) may contribute to billions of dollars in health care costs
How is Health Literacy Measured?

Short Test of Functional Literacy in Adults

STOFHLA

READING COMPREHENSION

REALM-R
Who has Limited Health Literacy?

- Age: Older adults
- Race: African American
- Ethnicity: Hispanic
- Limited English proficiency
- Education

- Non-parents: 39% have LHL compared to 28% of parents
Health Literacy and the NICU

- NICU parents have frequent interactions with health care system:
  - Long hospitalizations
  - Average of 20-25 primary care visits in the first year of life
- Disparities in preterm birth may put NICU parents at higher risk for limited HL
Specific Aims

1.) Measure the **prevalence** of limited HL in caregivers of very premature infants at NICU admission and discharge

2.) Assess if HL **changes** from admission to discharge

3.) Correlate **discharge readiness** with HL
Design

Prospective, cohort study

Inclusion criteria:
1. $\leq 32$ and 0/7 weeks
2. Born at one of two level III NICUs

Exclusion criteria:
1. Infant death or high likelihood of death
2. Uncertainty of primary caregiver
3. Non-English speaking
Parent Health Literacy Activities Test: PHLAT-8

- 8-item scale
- Numeracy and literacy items
- Parents of infants
- Validated (TOFLHA, WRAT)
- Enrollment and discharge
5. Your baby has an ear infection and the doctor puts him on Amoxicillin 3 times a day (see bottle). Using the picture of the dropper, please color to where the dropper should be filled with medicine.

MEDICAL CENTER EAST PHARMACY

Rx# 5392877

GIVE 2.5ML BY MOUTH
3 TIMES DAILY FOR 10 DAYS
///DISCARD INUSED PORTION
///AFTER 14 DAYS
150 AMOXIL 250/5ML SUS SKBM

no refills allowed
Enrollment

- race/ethnicity
- education
- income
- primary language
- country of origin
- employment status
- marital status
- size of household
- # of other children, chronic conditions, prematurity
Enrollment

Brief Illness Perception Questionnaire (BIPQ)

Edinburgh Postnatal Depression Scale (EPDS)
Discharge

1.) Repeat PHLAT-8 and EPDS

2.) Discharge Preparedness:
   • Bedside RN and primary caregiver
   • **Unprepared** = Nurse or self-rated score of < 7 on a scale from 1 to 9
Table 1: Infant and caregiver demographics

<table>
<thead>
<tr>
<th>Infant demographics, mean (SD)</th>
<th>Enrollment PHLAT-8 score</th>
<th></th>
<th></th>
<th></th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Overall</td>
<td>Low (0-5)</td>
<td>High (6-8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>N=132</td>
<td>N=42</td>
<td>N=90</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gestational age, wks</td>
<td>28.1 (2.6)</td>
<td>27.9 (2.6)</td>
<td>28.3 (2.5)</td>
<td>.42</td>
<td></td>
</tr>
<tr>
<td>Birth weight, g</td>
<td>1069 (392)</td>
<td>1048 (366)</td>
<td>1079 (405)</td>
<td>.93</td>
<td></td>
</tr>
<tr>
<td>Length of stay, d, median (IQR)</td>
<td>76.5 (51-121)</td>
<td>78 (44-127)</td>
<td>76.5 (53.5-116)</td>
<td>.58</td>
<td></td>
</tr>
</tbody>
</table>
Table 1: Infant and caregiver demographics

<table>
<thead>
<tr>
<th>Caregiver demographics</th>
<th>Overall</th>
<th>Low (0-5)</th>
<th>High (6-8)</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age, y, mean(SD)</td>
<td>28.5 (7.0)</td>
<td>26.5 (5.8)</td>
<td>29.8 (6.6)</td>
<td>.003</td>
</tr>
<tr>
<td>Race, %</td>
<td></td>
<td></td>
<td></td>
<td>.01</td>
</tr>
<tr>
<td>White</td>
<td>28</td>
<td>12</td>
<td>36</td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>64</td>
<td>81</td>
<td>55</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>8</td>
<td>7</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>Education, %</td>
<td></td>
<td></td>
<td></td>
<td>&lt;.001</td>
</tr>
<tr>
<td>&lt; High school</td>
<td>11</td>
<td>17</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>High school diploma</td>
<td>26</td>
<td>44</td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>&gt; High school</td>
<td>63</td>
<td>36</td>
<td>75</td>
<td></td>
</tr>
</tbody>
</table>
### Table 1: Infant and caregiver demographics

<table>
<thead>
<tr>
<th></th>
<th>Enrollment PHLAT-8 score</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Overall</td>
<td>Low</td>
<td>High</td>
<td></td>
<td>P-value</td>
</tr>
<tr>
<td><strong>Annual Income, %</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0.003</td>
</tr>
<tr>
<td>Less than $25,000</td>
<td>28</td>
<td>47</td>
<td>24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>$25,000 to $74,999</td>
<td>41</td>
<td>45</td>
<td>39</td>
<td></td>
<td></td>
</tr>
<tr>
<td>$75,000 and above</td>
<td>31</td>
<td>8</td>
<td>37</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>US born, %</strong></td>
<td></td>
<td>85</td>
<td>88</td>
<td>84</td>
<td>0.62</td>
</tr>
<tr>
<td><strong>Has other children, %</strong></td>
<td></td>
<td>46</td>
<td>56</td>
<td>41</td>
<td>0.11</td>
</tr>
<tr>
<td>Previous preemie</td>
<td>18</td>
<td>17</td>
<td>21</td>
<td></td>
<td>0.51</td>
</tr>
<tr>
<td><strong>Depression, %</strong></td>
<td>17</td>
<td>14</td>
<td>24</td>
<td></td>
<td>0.19</td>
</tr>
</tbody>
</table>
Enrollment PHLAT-8 Scores

35% missed three or more
Using the instructions provided on the Enfamil powder formula, how much water and formula would you add to make a 4oz. bottle?

**Amount of water added:**

4oz

**Number of scoops added:**

2 scoops

85% Answered Correctly
Using the instructions provided for Enfamil concentrated formula, how much water and formula would you add to make a 4oz. bottle?

Amount of water added: 2 oz
Amount of concentrate added: 2 oz

33% Answered Correctly
Table 2: Parent perceptions of infant illness by health literacy level

<table>
<thead>
<tr>
<th>Construct, median (IQR)</th>
<th>Overall</th>
<th>Low (0-5)</th>
<th>High (6-8)</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control over infant’s illness</td>
<td>2 (0-5)</td>
<td>3.5 (0-8)</td>
<td>2 (0-5)</td>
<td>0.09</td>
</tr>
<tr>
<td>Understanding of infant’s condition</td>
<td>9 (7-10)</td>
<td>9 (7-10)</td>
<td>10 (7-10)</td>
<td>0.28</td>
</tr>
<tr>
<td>Perception of infant’s illness severity</td>
<td>5 (2-6)</td>
<td>5 (2-6)</td>
<td>4 (2-7)</td>
<td>0.98</td>
</tr>
</tbody>
</table>

BIPQ questions answered on a scale from 1-9, higher scores indicate more agreement.
36% improved
41% unchanged
23% worsened

P = 0.06
<table>
<thead>
<tr>
<th></th>
<th>Discharge PHLAT-8</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low (0-5)</td>
<td>High (6-8)</td>
</tr>
<tr>
<td>N=24</td>
<td>35</td>
<td>8</td>
</tr>
<tr>
<td>Unprepared for discharge, %</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Caregiver: self-rated</td>
<td>8.5 (0.8)</td>
<td>8.5 (0.7)</td>
</tr>
<tr>
<td>RN: emotional preparedness</td>
<td>7.4 (1.3)</td>
<td>8.3 (0.9)</td>
</tr>
<tr>
<td>RN: technical preparedness</td>
<td>7.5 (1.4)</td>
<td>8.4 (0.8)</td>
</tr>
</tbody>
</table>

*Measured on a scale from 1-9 with 9 indicating "Very Prepared"

Parent rated as unprepared if rated < 7 by nurse or self
Discussion

Many parents of premature infants cannot correctly answer questions related to basic infant care tasks

HL scores generally stable from admission compared to discharge

Health literacy score correlates with providers’, but not caregivers’, perceptions of discharge readiness
Limitations

• Testing scores may not reflect what happens in practice

• Unknown how this will impact infant outcomes after discharge

• Limited power to detect a change in literacy score from admission to discharge
Conclusions

Consider the role of HL when counseling families and planning for discharge

Next steps

• Association with NICU outcomes
• Outcomes after discharge

Future

• Trial interventions to impact or address health literacy
Acknowledgements

HUP
Principal Investigator:
Scott A. Lorch

Megan Gray
Danielle Foy
Laura H. Rubinos
Nicolas Bamat
Aasma Chaudhary

PAH
Site coordinator:
Soraya Abbasi

Heather Speers
Tony Mancini
Sagori Mukhopadhyay

Liz Enlow: enlowe@email.chop.edu
Resources

AHRQ Toolkit:
http://www.ahrq.gov/nicutoolkit

“Transitioning Newborns from NICU to Home”

Microsoft Word: Reading level assessment

Goal: 8th grade level or lower

Liz Enlow: enlowe@email.chop.edu
Parent LHL and Outcomes

- Lower breastfeeding rates
- Depression
- Glycemic control in diabetes
- Asthma severity
- Barriers to giving medications, inaccurate dosing and decreased compliance
- ED utilization: mixed results


References


References

References

**Brief Illness Perception Questionnaire, modified**

For the following questions, please circle the number that best corresponds to your views:

1. **How much will the baby’s illness or condition affect his or her life?**
   - 0 = no affect at all
   - 10 = severely affects his/her life

2. **How long do you think the baby’s illness will continue?**
   - 0 = a very short time
   - 10 = forever

3. **How much control do you feel you have over your baby’s illness?**
   - 0 = absolutely no control
   - 10 = extreme amount of control

4. **How much do you think the baby’s treatment can help his or her illness?**
   - 0 = not at all helpful
   - 10 = extremely helpful

5. **How sick is your baby?**
   - 0 = not sick at all
   - 10 = extremely sick

6. **How concerned are you about the baby’s illness?**
   - 0 = not at all concerned
   - 10 = extremely concerned

7. **How well do you feel you understand your baby’s illness?**
   - 0 = don’t understand at all
   - 10 = understand very clearly

8. **How much does your baby’s illness affect you emotionally?**
   - 0 = not at all affected emotionally
   - 10 = extremely affected emotionally

9. **How much do you think the baby’s condition is a serious condition?**
   - 0 = not serious
   - 10 = extremely serious

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Health literacy as a mediator

Mediator
Health literacy

Independent variables
Race/ethnicity
Educational attainment

Dependent variable
Self-reported health status
Preventive health behaviors
  - Influenza vaccine
  - Mammography
  - Dental care

Bennett, IM et al. *Ann Fam Med* May 1, 2009 vol. 7 no. 3 204-21
### Table VI. Logistic regression model for risk for IVH with all African ancestry and white subjects

<table>
<thead>
<tr>
<th>Effect</th>
<th>P value</th>
<th>OR</th>
<th>95% CI</th>
</tr>
</thead>
<tbody>
<tr>
<td>GA</td>
<td>.01</td>
<td>0.89</td>
<td>0.82-0.97</td>
</tr>
<tr>
<td>Clinical chorioamnionitis</td>
<td>.01</td>
<td>1.48</td>
<td>1.08-2.02</td>
</tr>
<tr>
<td>Preeclampsia</td>
<td>.001</td>
<td>0.52</td>
<td>0.35-0.76</td>
</tr>
<tr>
<td>Complete course of antenatal steroids</td>
<td>.02</td>
<td>0.71</td>
<td>0.54-0.94</td>
</tr>
<tr>
<td>5-minute Apgar score &lt;3</td>
<td>.004</td>
<td>2.13</td>
<td>1.27-3.59</td>
</tr>
<tr>
<td>Cesarean delivery</td>
<td>&lt;.0001</td>
<td>0.50</td>
<td>0.37-0.67</td>
</tr>
<tr>
<td>Surfactant</td>
<td>&lt;.0001</td>
<td>3.32</td>
<td>2.06-5.34</td>
</tr>
<tr>
<td>HFV</td>
<td>&lt;.0001</td>
<td>2.61</td>
<td>1.94-3.51</td>
</tr>
<tr>
<td>White race</td>
<td>.012</td>
<td>0.26</td>
<td>0.09-0.75</td>
</tr>
<tr>
<td>College degree × white race</td>
<td>.047</td>
<td>0.70</td>
<td>0.49-0.99</td>
</tr>
<tr>
<td>Prenatal visit × African ancestry</td>
<td>.02</td>
<td>0.29</td>
<td>0.10-0.82</td>
</tr>
<tr>
<td>Multiple gestation × white race</td>
<td>&lt;.0001</td>
<td>2.28</td>
<td>1.51-3.45</td>
</tr>
</tbody>
</table>

Edinburgh Postnatal Depression Scale (EPDS)

Name: __________________________  Address: __________________________

Your Date of Birth: __________________________

Baby’s Date of Birth: __________________________  Phone: __________________________

As you are pregnant or have recently had a baby, we would like to know how you are feeling. Please check the answer that comes closest to how you have felt in the past 7 days, not just how you feel today.

Here is an example, already completed.

I have felt happy:
- Yes, all the time
- Yes, most of the time
- No, not very often
- No, not at all

In the past 7 days:

1. I have been able to laugh and see the funny side of things
   - As much as I always could
   - Not quite so much now
   - Definitely not so much now
   - Not at all

2. I have looked forward with enjoyment to things
   - As much as I ever did
   - Rather less than I used to
   - Definitely less than I used to
   - Hardly at all

3. I have blamed myself unnecessarily when things went wrong
   - Yes, most of the time
   - Yes, some of the time
   - Not very often
   - No, never

4. I have been anxious or worried for no good reason
   - No, not at all
   - Hardy ever
   - Yes, sometimes
   - Yes, very often

5. I have felt scared or panicky for no very good reason
   - Yes, quite a lot
   - Yes, sometimes
   - No, not much
   - No, not at all

6. Things have been getting on top of me
   - Yes, most of the time I haven't been able to cope at all
   - Yes, sometimes I haven't been coping as well as usual
   - No, most of the time I have coped quite well
   - No, I have been coping as well as ever

7. I have been so unhappy that I have had difficulty sleeping
   - Yes, most of the time
   - Yes, sometimes
   - Not very often
   - No, not at all

8. I have felt sad or miserable
   - Yes, most of the time
   - Yes, quite often
   - Not very often
   - No, not at all

9. I have been so unhappy that I have been crying
   - Yes, most of the time
   - Yes, quite often
   - Only occasionally
   - No, never

10. The thought of harming myself has occurred to me
    - Yes, quite often
    - Sometimes
    - Hardly ever
    - Never

Administered/Reviewed by __________________________  Date __________________________


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Health Literacy and Outcomes

Eight of 10 leading health indicators, according to Healthy People 2010, have been linked to health literacy in adults.\(^5\)

Limited health literacy (LHL) has been linked to differences in parental health behaviors and pediatric outcomes.\(^6\)
<table>
<thead>
<tr>
<th>Milk appearance and amount</th>
<th>You (the mom)</th>
<th>The Baby</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Birth</strong></td>
<td>You will be tired and excited. This is a good time for you to feed your baby.</td>
<td>Your baby will probably be awake and alert in the first hour after birth and this is a good time for him or her to breastfeed.</td>
</tr>
<tr>
<td>Your milk will appear yellow or golden. The amount will be small, but it gives your baby a healthy dose of protection against diseases.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>First 12-24 hours</strong></td>
<td>Continue resting and getting to know your baby. Your breasts may be a little tender at first. If breastfeeding hurts, ask for help from someone who has experience helping breastfeeding mothers. Breastfeeding should not hurt.</td>
<td>It is normal for some babies to sleep heavily. Labor and delivery are hard work for the baby. Some babies may be too sleepy to latch on well at first. Feedings may be short and irregular. As your baby wakes up, he or she will have a strong instinct to suck and feed very often. Your baby will love the taste of your milk. Many babies like to eat or lick, nuzzle, pause, savor, doze, then eat again. Ask the nurses not to give your baby any formula or water unless needed for medical reasons.</td>
</tr>
<tr>
<td>Your baby will drink about 1 teaspoon of your milk at each feeding. You may not see the milk, but it has what your baby needs and in the right amounts.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Days 2-5</strong></td>
<td>Your breasts will feel full and may leak. (You may use disposable or cloth pads in your bra to absorb the milk.) If your breasts become swollen and hard, remove a little milk from your breasts before feeding your baby. Between feedings, use ice packs to reduce swelling sometimes called &quot;engorgement&quot;), which will go away in 1-2 days. Breastfeeding your baby helps reduce the swelling.</td>
<td>Your baby will feed a lot, at least 8-12 times in 24 hours. Your baby's stomach is little, so lots of feedings are normal. Breastfed babies don't eat on a schedule. It is okay if your baby eats every 1-2 hours. Feedings will probably take about 15-20 minutes on each side, but all babies are different. Your baby might take only one side at a time or seem to like one side better. After delivery, it is normal for a baby to lose a little weight. Your baby will regain his or her birth weight by about 10 days to 2 weeks of age.</td>
</tr>
<tr>
<td>Your mature milk comes in. It will look bluish white, but may still look a little yellow or golden for about 2 weeks.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>First 4-6 weeks</strong></td>
<td>Your body gets used to breastfeeding so your breasts will be softer and the leaking will slow down. Don't worry. The milk is still there.</td>
<td>Your baby will be better at breastfeeding and have a larger stomach to hold more milk. Feedings may take less time and be farther apart. Most breastfeeding babies like to nurse often, because it is comforting and it keeps them close to you.</td>
</tr>
<tr>
<td>Your milk gradually starts to look bluish white at the beginning of a feeding and creamy white toward the end of a feeding. The color may vary a little from day to day. Some foods you eat can change the color of your milk, but this won't harm your baby.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Outcomes after discharge

6 months corrected age

Special Babies Clinic visit/Follow-Up

• Emergency department visits, hospitalizations
• Medications
• DME
• New diagnoses
• Risk for delays
• Growth parameters

Subset analysis: CHOP practices

- Well and sick visits to primary care, no show rate, missed first appointment, immunizations
  - 4 Center City CHOP practices: Chart review to confirm parent report on ED visits, hospitalizations
Implications for care?

Pre-natal counseling

Withdrawal of care

Family updates

Discharge planning
Aim 2: Assess change over time

Repeat PHLAT-8 within 10 days of discharge

- **Illness severity**: LOS, gestational age/birth weight, surgeries, major complications, days on ventilator, oxygen, pressors, antibiotics and central line days, time to full feeds
- **Parent involvement**: % days called, % days visited
- **Depression**: Repeat EPDS
Growth in the Neonatal Intensive Care Unit Influences Neurodevelopmental and Growth Outcomes of Extremely Low Birth Weight Infants

Richard A. Ehrenkranz, Anna M. Dusick, Betty R. Vohr, Linda L. Wright, Lisa A. Wrage and W. Kenneth Poole

*Pediatrics* 2006;117:1253
DOI: 10.1542/peds.2005-1368

### TABLE 4

Logistic-Regression Models Examining the Relationship Between Weight Gain Quartile and Neurodevelopmental Outcomes: OR (95% CI) of Selected Risk Factors

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>CP</th>
<th>MDI &lt;70</th>
<th>PDI &lt;70</th>
<th>NDI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weight gain quartile (quartiles 1 vs 4)</td>
<td>8.00 (2.07–30.78)&lt;sup&gt;a&lt;/sup&gt;</td>
<td>2.25 (1.03–4.93)&lt;sup&gt;b&lt;/sup&gt;</td>
<td>1.92 (0.86–4.29)</td>
<td>2.53 (1.27–5.03)&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Female gender</td>
<td>0.55 (0.28–1.08)</td>
<td>0.49 (0.30–0.81)&lt;sup&gt;a&lt;/sup&gt;</td>
<td>0.62 (0.37–1.05)</td>
<td>0.55 (0.36–0.85)&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Black race</td>
<td>—</td>
<td>2.50 (1.33–4.69)&lt;sup&gt;a&lt;/sup&gt;</td>
<td>—</td>
<td>1.60 (0.92–2.76)</td>
</tr>
<tr>
<td>SGA at birth</td>
<td>0.22 (0.06–0.80)&lt;sup&gt;b&lt;/sup&gt;</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Regained birth weight &gt;18 d</td>
<td>—</td>
<td>1.69 (0.97–2.93)</td>
<td>—</td>
<td>1.59 (0.97–2.61)</td>
</tr>
<tr>
<td>Education less than high school</td>
<td>1.95 (0.99–3.83)</td>
<td>1.66 (0.99–2.80)</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Severe IVH</td>
<td>2.53 (1.20–5.34)&lt;sup&gt;b&lt;/sup&gt;</td>
<td>1.24 (0.69–2.23)</td>
<td>1.42 (0.75–2.68)</td>
<td>1.24 (0.71–2.16)</td>
</tr>
<tr>
<td>PVL</td>
<td>6.89 (2.22–21.42)&lt;sup&gt;c&lt;/sup&gt;</td>
<td>2.67 (0.92–7.72)</td>
<td>8.13 (2.64–25.0)&lt;sup&gt;c&lt;/sup&gt;</td>
<td>3.22 (1.06–9.79)&lt;sup&gt;b&lt;/sup&gt;</td>
</tr>
<tr>
<td>BPD</td>
<td>—</td>
<td>2.68 (1.46–4.93)&lt;sup&gt;c&lt;/sup&gt;</td>
<td>1.42 (0.77–2.61)</td>
<td>1.57 (0.93–2.66)</td>
</tr>
<tr>
<td>Postnatal steroids</td>
<td>2.24 (1.08–4.67)&lt;sup&gt;b&lt;/sup&gt;</td>
<td>1.17 (0.67–2.05)</td>
<td>2.99 (1.65–5.42)&lt;sup&gt;c&lt;/sup&gt;</td>
<td>1.94 (1.18–3.19)&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td>Late-onset sepsis</td>
<td>1.32 (0.54–3.20)</td>
<td>0.85 (0.47–1.54)</td>
<td>1.68 (0.86–3.28)</td>
<td>0.84 (0.50–1.41)</td>
</tr>
</tbody>
</table>

<sup>a</sup> P < .01.

<sup>b</sup> P < .05.

<sup>c</sup> P < .001.