longum NCC3001 was detected in 17 % of cases. Enterobacteria diminished 1 log in the test group ($P=0.08$) whereas it did not change in the control group.

Conclusion: The use of pro- and prebiotic did not alter the tolerance of enteral feeding in the PICU, it is safe, and promotes a positive balance of the intestinal microbiota.

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CALCIUM/CREATININE RATIO IN ONE URINE SAMPLE INADEQUATELY REFLECTS NORMO- AND HYPERCALCIURIA IN PRETERM BORN INFANTS

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Background and aims: Preterm born infants can develop nephrocalcinosis or osteopenia. The urinary calcium/creatinine ratio is frequently used to screen for these conditions. In this pilot study we investigated variations of calcium/creatinine ratios in spot urine samples and the relation to total calcium excretion in 24 hours to detect hypo, normo or hypercalciuria.

Methods: Six to eight urine portions were collected from one feeding to the next, which combined, resulted in a 24hr urine collection. Calcium excretion was measured in mmol/l and calculated into mg/kg.day (Reference 1-7 mg/kg.day). Calcium/creatinine ratios were estimated in mmol/mmol (Reference 0.3-2.2 mmol/mmol). Fourteen preterm born infants (gestational age < 34 weeks) were more than two weeks old at the time of urine collection.

Results: Mean gestational age was 28.9 weeks with a mean age of 55 days at the time of urine collection. No patient was hypocalciuric. In 4 hypercalciuric infants 26 urine samples were collected. The calcium/creatinine ratio of 11 samples (42%) was in the normal range, thus appeared to be false negative for the detection of hypercalciuria. In 10 normocalciuric infants 68 urine samples were collected of which 7 (10%) showed elevated calcium/creatinine ratios, so 10 % of the samples did not match the diagnosis normocalciuria.

[Calcium/creatinine ratio versus calcium excretion]

Conclusion: Calcium/creatinine ratios estimated in one urine sample inadequately reflect normo or hypercalciuria in preterm infants and should not be used for this purpose.

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ASSOCIATIONS BETWEEN POLYUNSATURATED FATTY ACIDS IN PLASMA AT DELIVERY AND IN HUMAN MILK AT THE 6TH WEEK OF LACTATION

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Background and aims: It is generally accepted that considerable polyunsaturated fatty acid (PUFA) supply with human milk (HM) originates from maternal stores, however, the exact relationship is not fully understood.

Method: We investigated with gas chromatography fatty acid composition of maternal and cord plasma phospholipids at delivery and of human milk at the 6th week of lactation (n=61).