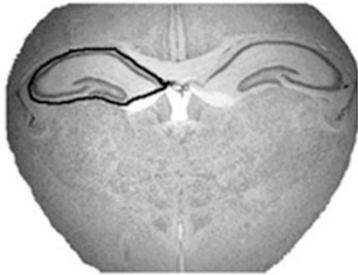


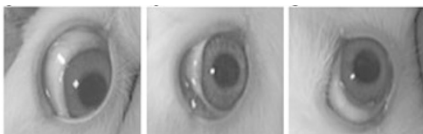
doi:10.1038/pr.2014.125

Postnatal inflammation and the hippocampus



Malaeb and coauthors examined the effects of postnatal systemic inflammation on the developing hippocampus in mice. Pups received daily intraperitoneal injections of lipopolysaccharide in the first postnatal days, and behavioral testing was conducted at 8–9 weeks of age. The findings support the concept that sustained systemic inflammation contributes to neurodevelopmental impairment in preterm infants. [See page 363](#)

Propranolol eye drops



Oral propranolol, a nonselective β -blocker, is able to reduce the progression of retinopathy of prematurity (ROP) in newborns, but it appears to be unsafe. Padrini and colleagues aimed to find a propranolol eye drop concentration that induces

lower plasma but higher retinal concentrations than those obtained after oral administration. Their findings in rabbits suggest that topical treatment with propranolol might be viable for ROP. [See page 378](#)

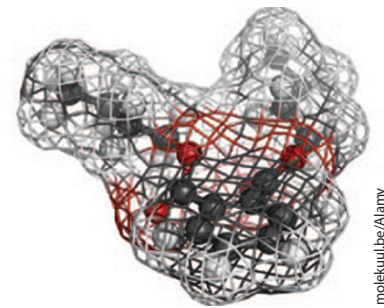
Risk markers and infant formula



Timby *et al.* hypothesized that infants fed experimental formula (EF) with added milk fat globule membrane (MFGM) would have outcomes more similar to those of breast-fed infants than to those of infants fed standard formula (SF). In a prospective double-blind randomized trial, 160 infants were randomized to EF or SF until 6 months of age. Supplementation of infant formula with MFGM narrowed the gap between breast-fed and formula-fed infants with regard to serum lipid status. [See page 394](#)

Phthalates and IUGR

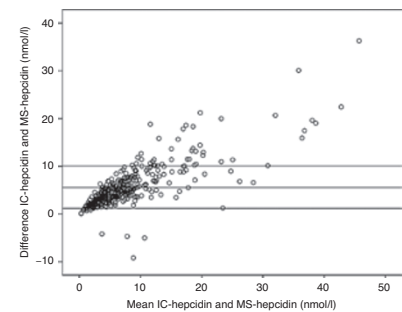
Zhao and coinvestigators investigated whether prenatal exposure to phthalates was associated with increased risk of intrauterine growth restriction (IUGR). Spot urine samples were collected during the third



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trimester of pregnancy, and five phthalate metabolites were measured in 126 mother–newborn pairs. Prenatal exposure to phthalates was associated with increased risk of IUGR, and male babies seemed to be more sensitive than females. [See page 401](#)

Hepcidin in healthy children



Promising applications for hepcidin in diagnostic medicine have been described, but mostly for adults. Uijterschout *et al.* established reference ranges of serum hepcidin in healthy children aged 0.5 to 3 years using mass spectrometry and an immunochemical assay. They also examined hepcidin's association with other indicators of iron status and inflammation. [See page 409](#)