ABSTRACT

The diploma thesis deals with the individualized feeding of preterm infants. The aim of this work was to evaluate the benefits of orofacial stimulation and to compare the values with a group of premature newborns who were fed standardly, without any intervention.

The measurement took place in three periods of the child's life. When being discharged from the maternity hospital, in the 1st and 2nd years of life. Evaluation parameters included length of hospitalization, diet at discharge, at 12 and 24 months, and anthropometric parameters such as BMI, weight-height ratio, head circumference, and body length. Orofacial stimulation always took place before each breastfeeding during hospitalization.

In the monitored period, statistically significant changes were recorded in the days of hospitalization, diet at discharge, and at 12 and 24 months in preterm infants. Breastfeeding difficulties were significantly reduced after orofacial stimulation. However, the study did not show significant differences in orofacial stimulation on anthropometric parameters. It follows that orofacial stimulation does not affect the growth of the newborn, it only supports and improves the quality of breastfeeding.

In summary, it can be said that the orofacial stimulation method is an effective form of breastfeeding support for preterm infants, and newborns benefited from this method.