## CORRESPONDENCE

## Interpretation of Physical Growth among Healthy Late Preterm Neonates

We read with interest the recent research paper on Physical growth, morbidity and mortality among latepreterm neonates [1]. There are certain methodological issues, clarification to which would help in better interpretation of these results:

- In this study, the authors have compared physical growth parameters of healthy term and late preterm neonates and concluded that late preterms have higher odds of being underweight, stunted and wasted at the chronological age of one year. However, authors did not use corrected age. CDC as well as WHO multicenter growth reference study (MGRS) has endorsed that corrected age should be used for preterms (<37 weeks) till two years of corrected age [2]. Babies born at 34<sup>+1</sup> weeks of gestation cannot be compared with those born at 41<sup>+6</sup> weeks, and infants having normal growth potential for their corrected age may be misclassified as having growth faltering.
- 2. The authors have mentioned that feeding problems and bottle feeding were more in late preterms but it is not clear that these problems were more in the first two months (till corrected age of 40 weeks) or at the end of one year. As their feeding skills may be immature till corrected age of 40 weeks, persistence of feeding problems beyond this age carries more significance.
- 3. There were 1333 late preterm neonates out of which only 37 (2.8%) were small for gestational age (SGA), which is very less considering SGA prevalence in India as 46.9% [3].

4. Authors rightly state that the obstetrician colleagues should not perform elective caesarean sections before full-term gestation, but according to The American College of Obstetricians and Gynaecologists (ACOG) latest definitions, full term is 39<sup>0/7</sup> weeks through 40<sup>6/7</sup> weeks, not 37 weeks as stated by the author [4]. ACOG endorsed in its recommendation that because of potential medical complications, elective cesarean delivery should not be performed before a gestational age of 39 weeks [5].

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*Editor's Notes:* Authors of the manuscript entitled "Physical growth, morbidity and mortality among late-preterm neonates" did not respond to the above queries despite reminders.