# **BRONCHOPULMONARY DYSPLASIA (BPD)**

# SAINT BARNABAS MEDICAL CENTER NEONATAL INTENSIVE CARE UNIT

#### What is bronchopulmonary dysplasia?

Bronchopulmonary dysplasia (BPD) is a form of chronic lung disease. It occurs in infants who have had severe Respiratory Distress Syndrome (RDS), lung infection or were extremely premature at birth.

# What causes BPD?

BPD is caused by inflammation of the premature lung exposed to oxygen and/or mechanical ventilation needed to treat the infant's lung disease.

#### How will I know if my baby has BPD?

BPD is usually diagnosed if a baby continues to have an abnormal chest x-ray and still needs oxygen by the time they are 36 weeks of gestation (a month before the due date). However, your baby's doctor may be concerned enough to treat your baby's continuing lung disease long before this date. A baby with BPD may also demonstrate one or more of the following:

- rapid breathing
- more trouble breathing
- wheezing or noisy breathing
- wet or crackling sound to the lungs heard with a stethoscope
- more difficult time gaining weight

#### How is BPD treated?

A baby with BPD needs extra oxygen for a long period of time. This may be several weeks or months, occasionally for more than a year. Some, but not many, babies are discharged home with oxygen.

Some babies are treated with medications which might include:

- Steroids drugs to decrease lung inflammation
- Diuretics drugs to help the body to get rid of extra water
- Drugs to decrease wheezing

# Why is my baby sometimes fussy?

Babies with BPD are often more fussy than other infants. This may be due to some of the medicines they need to take, congestion in their lungs, or the treatments needed to make them better.

# What can be done for the irritability?

We can reduce environmental stimulation by:

- 1. Dimming the lights
- 2. Talking softly
- 3. Allowing rest times

Giving your baby a pacifier, changing their positions or playing soft music may help to calm your baby.

# Will BPD affect my child's growth?

The extra work of breathing may mean that your baby has less energy and strength to grow and develop over the next several months. Your child should be followed closely after discharge by his or her doctor.

Steady weight gain is an important part of healing. Until your baby can suck without getting too tired, s/he will be fed by tube feedings and/or intravenous (IV) fluid (these IV fluids sometimes include hyperalimentation and intralipids which contain sugar, protein and fat).

If you have any further questions, please ask your nurse or doctor.