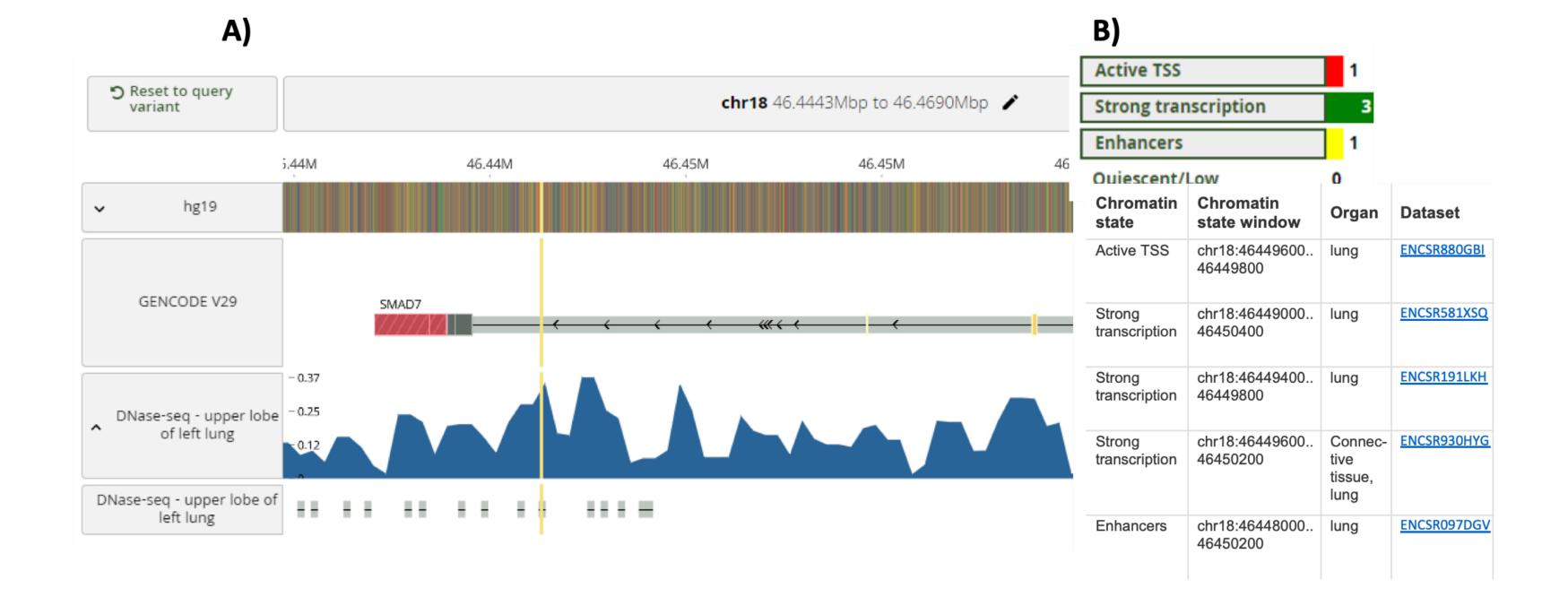
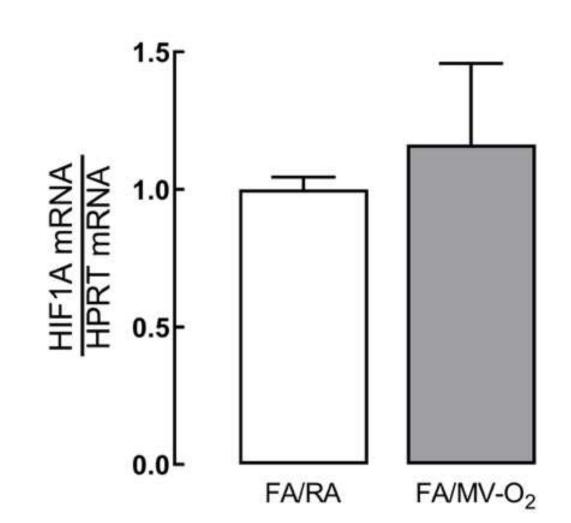
Supplementary

Fig S1

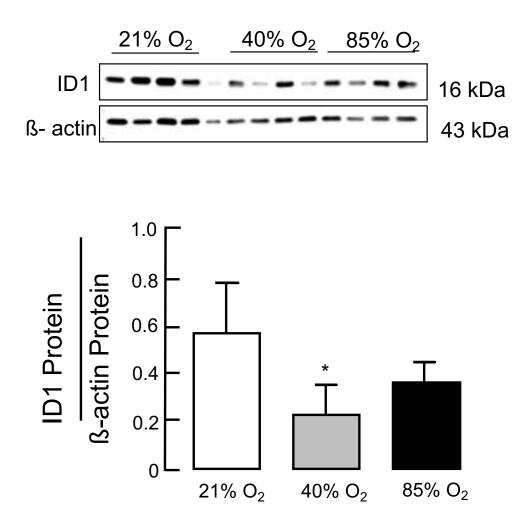








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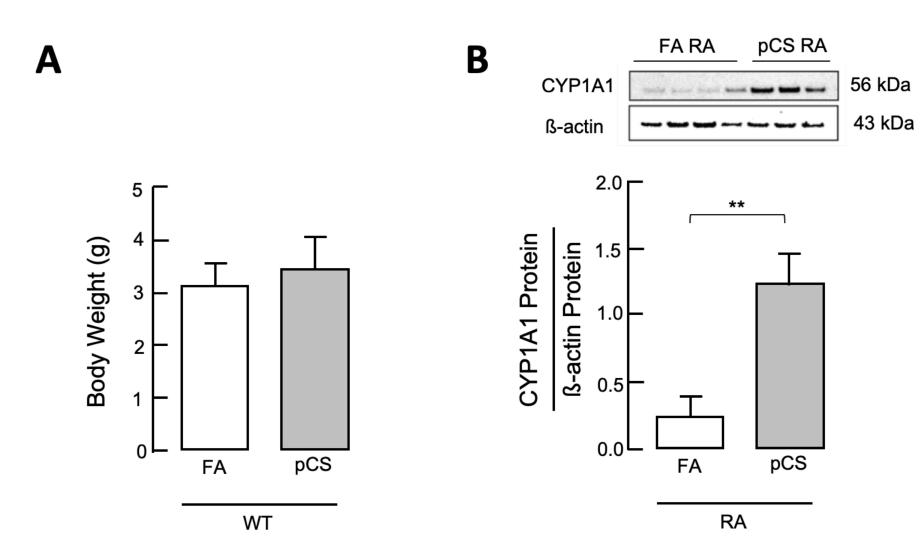




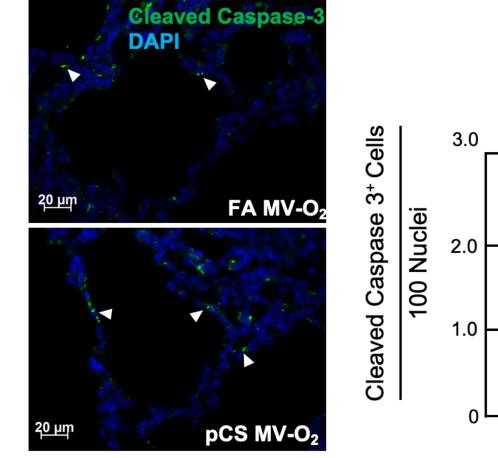
Supplemental material

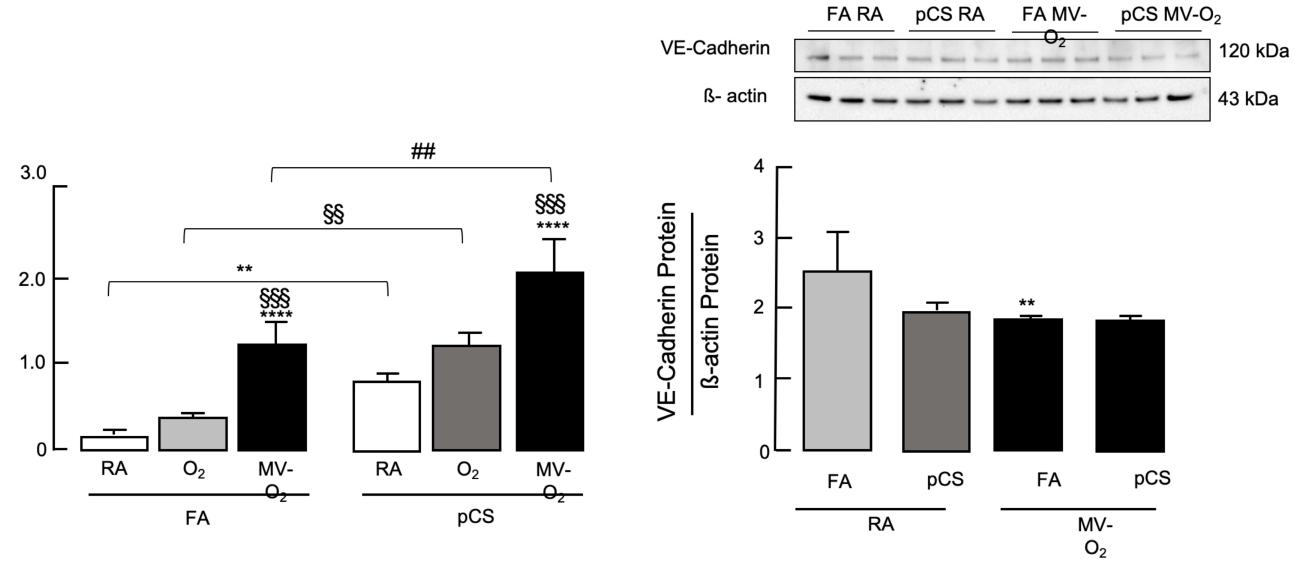
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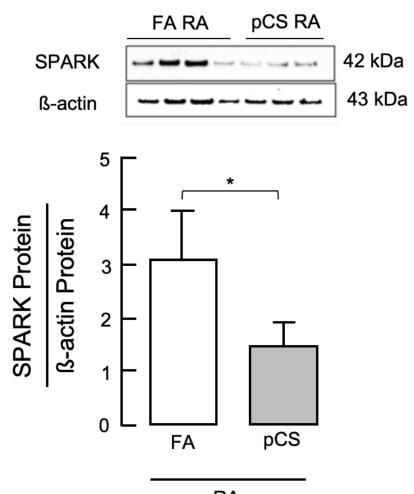
Fig S3



D







RA

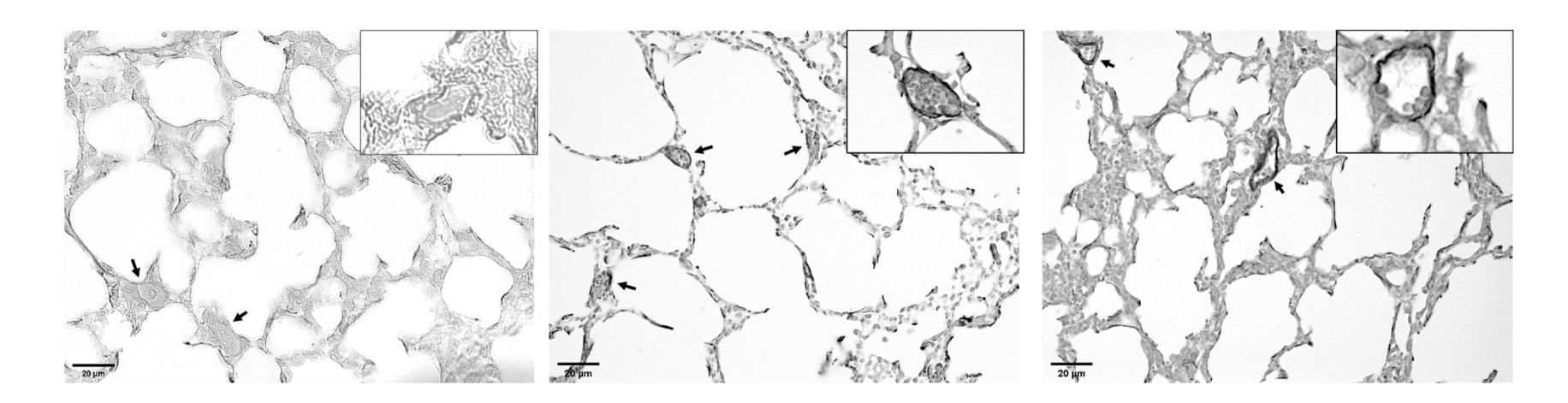
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С

Fig S4

Α

Β



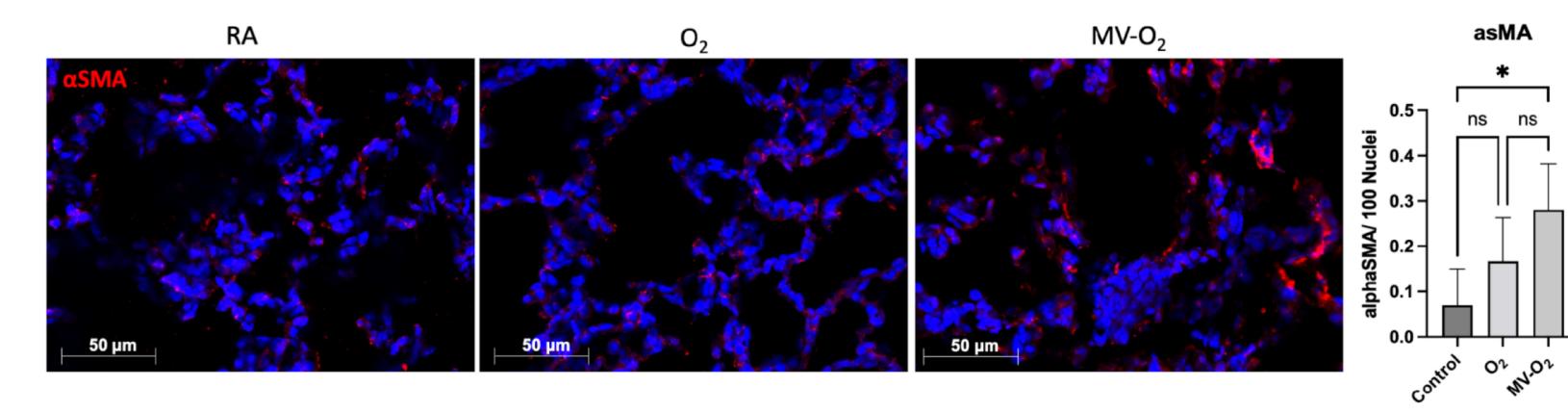
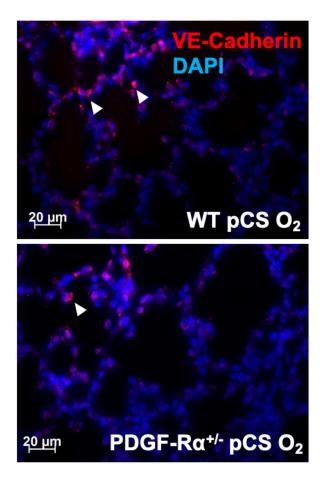
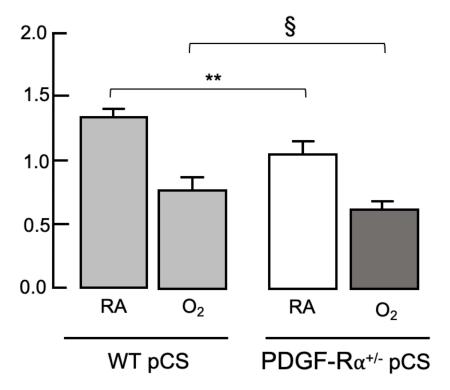
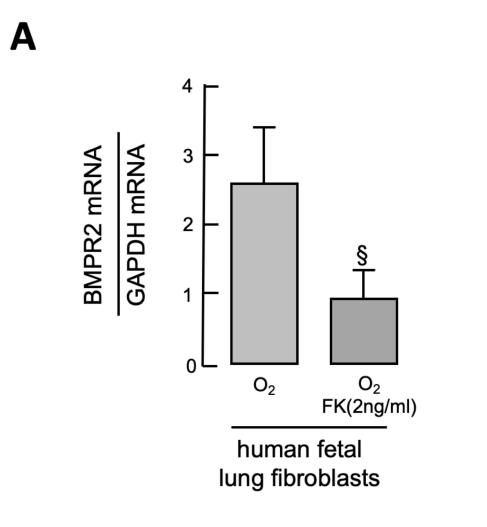


Fig S5

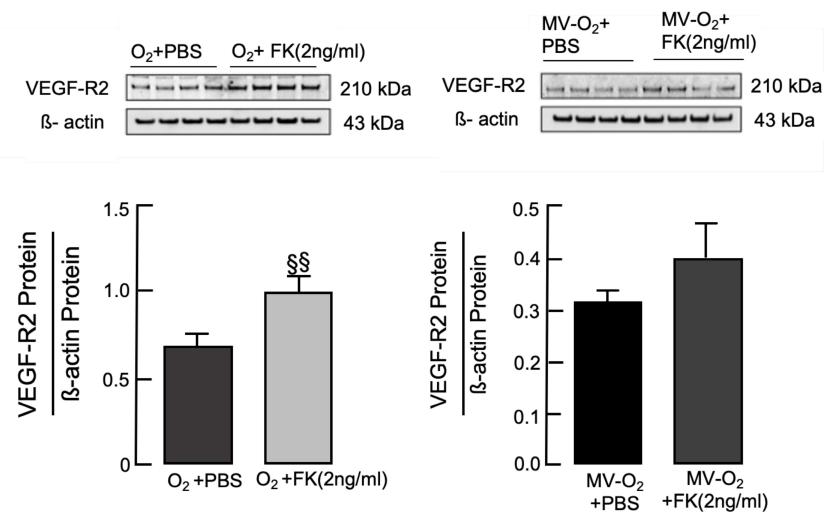




Thorax



С



В



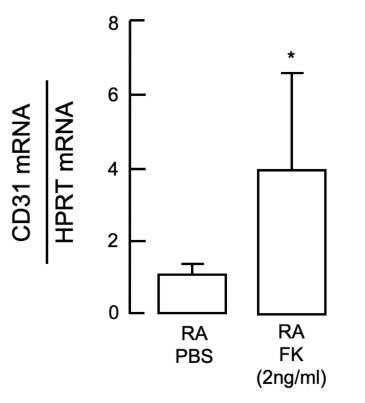


Table S1. Patient characteristics preterm infants.

Data are given as median and range or number and percent of total in group respective range.

GA, gestational age; IUGR, intrauterine growth retardation; ANCS, antenatal corticosteroids; RDS, respiratory distress syndrome; PDA, patent ductus arteriosus; ROP, retinopathy of prematurity; IVH, intraventricular hemorrhage; ICU, intensive care unit; BPD, bronchopulmonary dysplasia. NA (not available): IUGR n=3; PDA n=7. Intrauterine growth restriction was defined as birth weight below the 10th percentile. Postnatally, diagnosis and severity of respiratory distress syndrome (RDS) were scored on anterior-posterior (a.-p.) chest radiographs according to Couchard et al (1). Chorioamnionitis was defined as inflammatory alterations of the chorionic plate (histologic examination) or signs of maternal and fetal signs of infection (2) Systemic infections were diagnosed according to Sherman et al. (3) based on one or more clinical and laboratory signs of infection. BPD was defined according to Jobe and Bancalari (4) and graded as mild (oxygen supplementation at 28 days postnatally), moderate (oxygen supplementation < 30% and/or ventilator support at 36 weeks postmenstrual age), and severe (oxygen supplementation > 30% and/or ventilator support at 36 weeks postmenstrual age).

1. Couchard M, Polge J, Bomsel F. Hyaline membrane disease: diagnosis, radiologic surveillance, treatment and complications. *Ann. Radiol. (Paris).* 1974;17(7):669–83.

2. Franz A, Steinbach G, Kron M, Pohlandt F. Interleukin-8: a valuable tool to restrict antibiotic therapy in newborn infants. *Acta Paediatr.* 2007;90(9):1025–1032.

3. Sherman MP, Goetzman BW, Ahlfors CE, Wennberg RP. Tracheal Aspiration and Its Clinical Correlates in the Diagnosis of Congenital Pneumonia. *Pediatrics* 1980;65(2):258–263.

4. Jobe AH, Bancalari E. Bronchopulmonary dysplasia. *Am. J. Respir. Crit. Care Med.* 2001;163(7):1723–1729.

n GA (w Birth w IUGR Gende ANCS

Chorio

Early c

RDS≥II

Days o

Days c

PDA

Postna

ROP

IVH

ICU da

BPD

- Non

- Mild

- Moc

- Seve

	28
veeks)	28.2 (25.1-30.6)
weight (g)	1031 (650-1770)
	2 (8%)
er (female/male)	12/16
	25 (89.3%)
oamnionitis	11 (39.3%)
onset infection	7 (25.0%)
III°	7 (25.0%)
of mechanical ventilation	34 (0-70)
of oxygen supplementation	22 (0-88)
	18 (78.3%)
atal steroids	10 (35.7%)
	5 (17.9%)
	2 (7.1%)
ays	64 (30-109)
ne	17 (60.7%)
d	7 (25.0%)
derate	3 (10.7%)
ere	1 (3.6%)