SIFT Trial Results

We are delighted to tell you that the results of the SIFT Study of two speeds of increasing milk feeds for very preterm infants or very low birth weight infants have now been published.

Firstly and most importantly we would like to thank you for helping us to make this possible. Without the support of your family and others like you, we would not have been able to complete this important study and so we want to share the results with you. We know it is a long time since you and your baby took part in SIFT. It takes a long time to get to publication stage, so, thank you for your patience.

Reasons for doing the study:

Our main aim in doing the study was to find out whether it was best to increase milk feeds for very preterm or low birth weight babies at a faster rate or a slower rate. We wanted to find out which speed (fast or slow) helped to lower the risk of complications directly after birth, such as infections in the blood and a bowel disease called necrotising enterocolitis (NEC). NEC is a very serious condition that affects the gut of very preterm babies, where the tissue in the bowel becomes inflamed. Infection and NEC are important to study because babies can get seriously ill, require surgery, and sadly, some babies will die from these conditions. Babies who survive can have problems later as they grow and develop so we also looked at how the babies were doing when they were two years old.

What we did

Between June 2013 and June 2015, we enrolled more than 2800 very preterm babies or very low birth weight babies from neonatal units across the UK and Eire. Babies were put into one of two groups, where milk feeds increased at either a faster or a slower rate. In both groups, the increases continued until babies were receiving all their feeds as milk. We recorded whether they got infections or NEC, and we also sent you a questionnaire at your baby’s second birthday to see how they were getting on.

What we found:

The main aim of the study was to understand survival without moderate or severe neurodevelopmental disability at two years of age. The study found that the speed of feeding (fast or slow) made no difference to this. It also found that it did not affect growth or the risk of infection or bowel problems before the babies were discharged from hospital. The only differences were that babies being fed at
the faster rate took fewer days to reach full milk feeds and spent less time being fed through a tube. We did however, unexpectedly, see more cases of moderate & severe motor disability at 2 years in babies who received faster increases of milk feeds.

The results of SIFT do not clearly support either speed of feeding and doctors, nurses and parents will need to consider how to feed individual babies.

The full results have been published in a medical journal and you can read more about the findings of the SIFT trial in:


If you would like a copy of the full paper please contact the SIFT Study Coordinating office.

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Thank you again for allowing your baby to take part in this study. Without your help we would not be able to improve the care of other babies born prematurely.

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This study was organised by the National Perinatal Epidemiology Unit (NPEU) CTU at the University of Oxford. The Unit is dedicated to improving the care provided to women and their families during pregnancy, childbirth and the period after birth, as well as the care provided to the newborn.