

# Oral Immune Therapy (OIT) with Colostrum

## 5 Minute Huddle Sheet

### Why it Matters

- Colostrum is the first and most powerful medicine we can give newborns.
- Two drops deliver concentrated immune factors that support infection prevention and gut stability.
- OIT reduces culture-proven sepsis, mortality, NEC, feeding intolerance, and speeds time to full enteral feeds in preterm infants.<sup>1-3</sup>



### Remember the 3 Cs

- **Coats:** sIgA and lactoferrin coat the mouth and oropharynx.<sup>4</sup>
- **Closes:** Growth factors and HMOs support tight junctions and gut barrier function.<sup>5,6</sup>
- **Coaches:** Repeated exposure provides tolerogenic cues shaping early mucosal immunity.<sup>7</sup>

### Clinical Practice Steps

<ul style="list-style-type: none"> <li>• Start early, ideally within the first hour after birth</li> </ul>
<ul style="list-style-type: none"> <li>• Dose: 0.1–0.2 mL fresh colostrum to each cheek every 2–3 hours. Document as “Oral Immune Therapy”.<sup>8</sup></li> </ul>
<ul style="list-style-type: none"> <li>• Protect supply with hand expression or pumping; more removal on day one increases volume by day two.<sup>9</sup></li> </ul>
<ul style="list-style-type: none"> <li>• Use maternal or donor human milk whenever possible.</li> </ul>
<ul style="list-style-type: none"> <li>• Partner with families: Two drops help today and support feeding tomorrow.</li> </ul>

### Key Message for Nurses

- Two drops are not too little to matter.
- Standardize OIT: Chart it, time it, and make it routine.
- Every interaction reinforces that every drop counts.

**Colostrum is one of the most effective tools we have in the first days of life because every drop counts™.**



**References:** **1** Huo M et al. *Front Pediatr.* 2022; 10:895375. **2** Kumar J et al. *Nutr Rev.* 2023; 81(10):1254–1266. **3** Anne RP et al. *J Pediatr Gastroenterol Nutr.* 2024; 78(3):471–487. **4** Szyller H et al. *Nutrients.* 2024; 16(10):1487. **5** Taylor SN et al. *Breastfeed Med.* 2009; 4(1):11–15. **6** Rodríguez-Camejo C et al. *Front Immunol.* 2023; 14:1282144. **7** Verhasselt V. *Immunol Rev.* 2024; 326(1):117–129. **8** Lee J et al. *Pediatrics.* 2015; 135(2):e357–366. **9** Morton J et al. *J Perinatol.* 2009; 29(11):757–764.