

Supplemental Information

METHODS

Native T1 Cardiac ShMOLLI

We also acquired shortened modified look-locker inversion recovery (ShMOLLI) T1 maps without the administration of any invasive agents over the basal, mid, and apical parts of the ventricle to help detect any possible major myocardial pathophysiology. Imaging was performed with steady-state free precession (SSFP) by using flip 35° angle. Each image readout was preceded by 5 ramp-up linearly increasing startup angles (LISA) pulses, and followed by a single 17.5° pulse at a TR/2 distance. Inversions were performed by using a hyperbolic secant pulse.¹ All images were analyzed by using in-house software as previously described (Interactive Data Language, Ver. 6.1; Boulder, CO).¹ Myocardial contours were drawn directly on the T1 maps with full control over image windowing to separate consistent myocardial tissue with minimal partial volume of the neighboring tissues.

Thoracic Dimensions and Pulmonary Artery Diameters

On the coronal localizer, we measured left and right thoracic height from the base of the diaphragm to the top of the thorax and measured diameters from the costophrenic angle to the spine on both sides by using Siemens analytical software (Argus; Siemens Healthcare, Erlangen, Germany). On the transaxial localizer at the

SUPPLEMENTAL TABLE 3 Birth Characteristics of Preterm-Born Feeding Groups

	EFF, n = 16	EHM, n = 30	P
Birth weight z score	-0.70 ± 1.33	-0.92 ± 1.19	.56
Small for gestational age, n (%)	4 (25.0)	7 (23.3)	>.99
Ventilation, d	4.60 ± 3.99	4.87 ± 3.80	.32
Maternal smoking during pregnancy, n (%)	2 (12.5)	5 (16.7)	.93
Paternal smoking during pregnancy, n (%)	4 (25.0)	9 (30.0)	.88
Antenatal glucocorticoids, n (%)	4 (25.0)	6 (20.0)	.70
5-min Apgar score, n (%)			.76
0–3	0 (0)	1 (3.33)	
4–6	4 (25.0)	7 (23.3)	
7–10	12 (75.0)	22 (73.3)	

Values are mean ± SD unless stated otherwise.

SUPPLEMENTAL TABLE 4 Sociodemographic Characteristics of Preterm-Born Feeding Groups

	EFF, n = 16	EHM, n = 30	P
Relationship status, n (%)			.91
Single	9 (56.3)	16 (53.3)	
Long-term relationship	4 (25.0)	8 (26.7)	
Married	3 (18.9)	6 (20.0)	
Divorced	0 (0)	0 (0)	
Educational level, n (%)			.94
None	0 (0)	0 (0)	
GCSE or equivalent	0 (0)	2 (6.67)	
A-levels or equivalent	8 (50.0)	15 (50.0)	
Degree or higher	8 (50.0)	13 (43.3)	
Employment status, n (%)			.88
Full-time paid	9 (56.3)	15 (50.0)	
Part-time paid	3 (18.9)	8 (26.7)	
Caring for the home or children full-time	1 (6.25)	0 (0)	
Student/apprentice	3 (18.9)	7 (23.3)	

SUPPLEMENTAL TABLE 5 Thoracic Cavity Dimensions

	EFF, n = 16	EHM, n = 30	P
Left thoracic dimensions			
Height	16.6 ± 2.0	17.9 ± 2.4	.09
Diameter	9.12 ± 0.73	9.72 ± 1.40	.14
AP distance	10.7 ± 1.4	12.2 ± 1.5	.004*
Right thoracic dimensions			
Height	16.2 ± 1.8	17.4 ± 2.5	.13
Diameter	9.66 ± 1.05	10.2 ± 1.1	.08
AP distance	10.9 ± 1.3	12.4 ± 1.4	.002*

AP, anterior-to-posterior.

* $P < .05$.

level of the bifurcation of the right pulmonary artery, we measured the anterior to posterior distance on the left and right sides of the thorax. Main pulmonary artery and aortic

diameters were measured on electrocardiogram-gated transaxial localizer images at the level of the right pulmonary artery bifurcation.²

SUPPLEMENTAL REFERENCES

1. Piechnik SK, Ferreira VM, Lewandowski AJ, et al. Normal variation of magnetic resonance T1 relaxation times in the human population at 1.5 T using ShMOLLI. *J Cardiovasc Magn Reson.* 2013;15(1):1–11
2. Truong QA, Massaro JM, Rogers IS, et al. Reference values for normal pulmonary artery dimensions by noncontrast cardiac computed tomography: The Framingham Heart Study. *Circ Cardiovasc Imaging.* 2012;5(1):147–154