Supplemental tables

Supplementary table 1 Association between the protein-to-energy intake ratio and the rate of weight gain

Variables	Univariable analysis		Multivariable analysis	
	B (95% CI)	P-value	aB (95% CI)	P-value
Gestational age	-0.11 (-0.41, 0.19)	0.486		
Duration of parenteral nutrition support	-0.04 (-0.12, 0.04)	0.286		
Small-for-gestational age	0.75 (-1.4, 2.90)	0.496		
Presumed early onset sepsis	0.02 (-2.05, 2.09)	0.984		
Late onset sepsis	-1.33 (-3.51, 0.85)	0.232		
Ventilator associated pneumonia	-2.49 (-5.89, 0.91)	0.152	-2.67 (-5.89, 0.58)	0.105
Patent ductus arteriosus	0.54 (-1.19, 2.26)	0.542		
Necrotizing enterocolitis	-1.27 (-4.76, 2.21)	0.475		
Intraventricular hemorrhage	0.63 (-1.97, 3.24)	0.633		
Bronchopulmonary dysplasia	-0.97 (-2.81, 0.87)	0.302		
Diuretic usage	-0.39 (-2.1, 1.32)	0.656		
Antibiotic usage	-2.63 (-7.25, 2)	0.266		
History of steroid therapy	1.35 (-3.54, 6.24)	0.589		
Receiving positive pressure ventilation*	0.59 (-1.2, 2.37)	0.519		
Protein to energy ratio (P:E ratio)	2.75 (-0.09, 5.60)	0.057	2.95 (0.12, 5.79)	0.041

B indicates unadjusted unstandardized coefficient, aB indicates adjusted unstandardized coefficient, 95%CI: 95% Confidence interval.
Univariate and multivariate analyses were performed using population-averaged generalized estimating equations (GEE) with a linear model.
Variables with *p*-values < 0.2 in the univariate analysis were included in the multivariate model.
* Positive pressure ventilation included both invasive positive ventilator support and non-invasive positive pressure ventilator support.