



Kangaroo Mother Care

What are the benefits of kangaroo care for premature infants in the neonatal intensive care unit?

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Introduction

Premature births account for approximately 7% of all births annually in New Zealand. In 2015 that equated to 4329 births (Ministry of Health, 2017). Kangaroo care is bare skin-to-skin contact between an infant and their parent, usually the mother. It was pioneered in 1970's Columbia where, in the absence of incubators, mothers were used as human incubators, to keep their babies warm. It's now widely accepted as a valid, fundamental therapy for premature infants and is endorsed by the World Health Organisation (2012).

Literature Review

Research has shown the physiological benefits of kangaroo care include; cardiorespiratory stability, less apnoea episodes, improved oxygen saturations and temperature regulation. Also noted was sleep promotion, duration of quiet sleep and initiation of, and improved rates of breastfeeding (Jefferies, 2012; Ludington-Hoe, Anderson, Swinth, Thompson and Hadeed, 2004).

Kangaroo care has been shown to reduce procedural pain. A randomized controlled trial by Haixia et al., (2015) showed lower heart rates and shorter durations of crying and facial grimacing among infants receiving kangaroo care during heel prick tests.

Kangaroo care promotes bonding and attachment through the release of oxytocin during skin-to-skin contact. Mothers report less feelings of stress or depression and are more positive about their role as mother (Johnson, 2013; Baker-Rush, 2016).

Implications

The nursing implications for kangaroo care include assessing an infants suitability, infants need to be medically stable for kangaroo care. Parents' readiness to engage also needs to be assessed. An infant needs to be closely monitored during kangaroo care.

Recommendations

- Enable nurses through education and training so they can in turn, educate parents and promote kangaroo care. This requires resources and support from management. A clear protocol with guidelines creates clarity and consistency (Chan et al., 2016; Jefferies, 2012).
- Enable families through education and support. Fully informed parents are more likely to engage successfully (Chan et al., 2016).
- The facilities need to be able to accommodate mothers staying close to their babies and provide suitable, private spaces for kangaroo care.

Conclusion

Kangaroo care is a valid intervention in the care of premature babies in the neonatal intensive care unit. Research shows there are many physiological and psychological benefits to kangaroo care. If barriers, such as incomplete or lack of knowledge can be addressed and a protocol put in place, nurses and parents can be enabled to engage successfully with this method. Early interventions can have lifelong benefits and can improve outcomes for premature babies.

References

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PECOT Category	Information relating to question	Explanation
Population	Premature infants	Infants born between 23 or 24 weeks and 37 weeks gestation are considered
Exposure	Kangaroo care	Kangaroo care or skin-to-skin care has been endorsed by the World Health Organisation (2012) as an appropriate
Comparison	Standard incubator or cot care	This literature review looks at the physiological and psychological benefits of kangaroo care as opposed to
Outcome	Positive benefits of kangaroo care for premature infants and their parents	Kangaroo care is essential for early growth and development, especially brain development (Ludington-Hoe,
Time	The duration of stay in the neonatal intensive care unit.	This review looks at research conducted in neonatal intensive care units. The duration of stay will vary depending on the gestational age at birth and the progress of each infant.

(Whitehead, 2013).

Summary

I have chosen to present my findings as a poster because it is an effective, visual communication tool. Posters are commonly used to present health information at both conferences, and also at a community level (Ilic and Rowe, 2013). A poster has enabled me to convey a depth of information in a concise manner. I have worded the poster in a way which will appeal to my target audience of both health professionals and patients alike. Williams and Cullen (2016) have outlined the three components of an effective poster; visual aesthetics, contextual relevance and logical sequencing. I have used colour and pictures for visual appeal and to hold the attention of the reader. I have condensed my findings from the literature review in part A of this assignment and made it relevant for professionals and service users. I have presented this in a logical way from introduction to conclusion.

References

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