

STUDY OF THE IMPACT OF KANGAROO MOTHER CARE IN A RESOURCE LIMITED HOSPITAL

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Abstract: Essential newborn care, especially of premature babies constitutes an important intervention for the care of LBW babies. Management of hypothermia is one of the critical steps in newborn care. Various methods exist to provide warmth to the baby. KMC is very safe, efficient, cost-effective strategy to provide warmth and promote growth of the baby.

KMC is a simple method which can be practiced at all the levels of health care requiring minimum resources. While providing KMC, mother acts as a human incubator and it consists of two important components:

- Skin to skin contact
- Exclusive breastfeeding

To review this impact, a study was conducted in the NICU of a resource limited center, where in 100 LBW babies were studied over three months.

Criteria of baby's selection:

- birth weight less than 2kg
- thermodynamically stable babies(including those on IV fluids/orogastric feeds)

Method adopted:

Babies were given Kangaroo Mother Care in 4-5 sessions, each of minimum 3 hr to 12 hrs a day till the baby were out of NICU.

Results measured in terms of:

- Increase in rate of weight gain.
- Temperature stability.
- exclusive breastfeeding
- parents satisfaction
- complications.

Results:

79% of babies gained weight in the range of 10-15gms/day.

85% of babies maintained their body temperature in the normal range.

98% of the babies were exclusively breastfed.

78% of mothers showed satisfaction.

Over all conclusions drawn regarding the impact of KMC on the baby, mother, institution.

Benefits to the baby:

- rapid weight gain
- more regular breathing pattern and less apnea
- less incidence of hypothermia
- ready access to exclusive breastfeeding.
- reduced nosocomial infection in these infants

- improved sleep patterns

Benefits to the mother:

- ensures physiological and psychological bonding and warmth.
- increase in breast milk output.
- increased confidence and satisfaction in the mother, that she is able to do something special to her baby.
- can be practiced at home and hence decreased hospital stay.

Benefits to the hospital:

- no need of special technical intervention
- no need of expertise
- no need of costly equipments and electricity.
- cost effectiveness.

Weakness of the study.

Loss to follow up and withdrawal from KMC care was found in 22% cases.

