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KANGAROO MOTHER CARE FOR LOW BIRTH WEIGHT INFANTS (< 2000 GRAMS): A RANDOMIZED

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Background: Kangaroo Mother Care (KMC) is a comprehensive method of care for low birth weight infants that allows an earlier establishment of mother-infant bonding, increased breastfeeding rates and duration, and leads to better utilization of the technological and human resources available.

Objectives: To compare the effect of KMC versus conventional method on the growth and neonatal stability of low birth weight infants weighing <2000 grams.

Method: A randomized controlled trial was conducted in a tertiary care hospital for a total of 5 months duration. Out of 82 infants weighing <2000 grams 47 met the inclusion criteria. The subjects were randomized into two groups: interventional group received KMC (KMC-24) and control group received conventional method of care (CMC-23) They were monitored for weight gain, length and head circumference, neonatal stability particularly thermoregulation and glycemic control and incidence of other neonatal morbidity and mortality until they reached a weight of 2500 grams.

Results: The KMC babies had 65% higher weight gain (p-<0.0001) as compared to the CMC group. The weekly increments in length and head circumference were also significantly higher in the KMC group (p-<0.0001). Also, significantly higher random blood sugar (RBS) readings and faster attainment of normal RBS was noted (p<0.0001). A better temperature control was observed among KMC group (p<0.0001). A significantly higher number of babies in the CMC group suffered from nosocomial sepsis (p-<0.0001). There was also a significant decrease in time to discharge in the KMC group (p<0.0001). Conclusions: KMC improved clinical outcomes of low birth weight infants weighing <2000 grams in terms of faster gain in weight, length, and head circumference; faster attainment of normal RBS and temperature control eventually facilitating earlier hospital discharge.

Keywords: Kangaroo Mother Care, conventional method of care, neonatal stability, hypoglycemia, nosocomial infection