

5. THE OBSTACLES TO IMPLEMENT CONTINUOUS KANGAROO MOTHER CARE (KMC) AT HOSPITAL IN MADAGASCAR

N. Rabesandratana¹, S. Nagai^{1,2}, D. Andrianarimanana¹, R. Mori^{2,3},

N. Yonemoto³, A. Ramarijaona¹, M. E. Raza-fanomezanjanahary¹, T. Nakayama²

University hospital of Mahajanga, Madagascar 1, Kyoto University, School of Public Health, Japan 2, Osaka Medical Center and Research Institute for Maternal and Child Health, Japan 3.

Background: Since 2000, KMC has been started in Madagascar. Malagasy government decided that KMC was one of the important strategies for neonatal survival program, but the number of implemented patients at hospital came to a standstill.

Aim: To examine the obstacle factors to implement the earlier starting continuous KMC at hospital in Madagascar.

Material and methods: The subjects are stable low birthweight infants born at University hospital in Mahajanga, Madagascar and their mothers, from August, 2007 to August, 2008. GETKMM (Groupe d'Etude de la Technique Kangourou à Mahajanga, Madagascar) planned to analyze the obstacle factors to implement the KMC through the daily interviews during hospitalization.

The study design is nested case control study. Observed variables are as follows: the duration of implementing KMC, the person who did KMC, correctly/accurately of KMC method, baby's health condition, mother's health condition, socio economic status of family, and cost for hospitalization. **Results:** To date there are 54 children included in the study with a predicted 100 total by October, 2008, which will provide more conclusive results. **Conclusions:** The conclusions will be presentable upon the inclusion of up to 100 participants as outlined in the results. **Key words:** KMC, LBW, obstacle factors, developing country.