

**P 44. EVALUATION OF CONTINUOUS KMC IN A HIGH TECH NICU YIV**  
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**Background:** Despite the evidence of positive effects of KMC, and the fact that Swedish parents are guaranteed temporary parental benefit when the newborn infant is sick and/or born preterm, KMC is still underused in Sweden. One possible explanation for this is a belief among hospital staff that mothers in Sweden would not accept this model of care. Aim: To describe infants in a Swedish neonatal unit who received continuous Kangaroo Mother Care (KMC) directly from birth until discharge, and to describe the mothers' experiences of this model of care. Material and method: The study has a descriptive, explorative and retrospective design. Data were obtained from 23 infants' medical records and a mail questionnaire to their mothers with a response rate of 17 (74 %). Result: These moderately preterm and sick newborn infants were born at a GA of 31-41, with birth weights between 1715 and 2700 g. Their mothers showed good acceptance for providing KMC during their infants' hospital stay. The mothers' evaluations of KMC were predominantly positive.

Negative comments concerned lack of practical information about the method and perception of their infants' care during the night as exhausting. Furthermore, they were dissatisfied with some nurses' lack of sensitivity to the mother's own needs and wishes. No mothers would have preferred not to perform KMC, nor would they have preferred to terminate KMC earlier than they did. **Conclusions:** These Swedish mothers accepted this model of care very well, on the condition that they were given the help and support they wanted. This study and existing evidence support the view that parents' bosom should be considered the optimal place for provision of infant care, and that care routines at neonatal units should be changed accordingly.

**Keywords:** Kangaroo mother care, preterm, neonatal care, mother, infant