## P 34. CLINICAL PRACTICE GUIDELINE DEVELOPMENT FOR KANGAROO CARE IN JAPAN –JAPANESE CONSENSUS UPON AVAILABLE EVIDENCE– Kangaroo Care Guideline Working Group Yoriko Nishizawa<sup>†</sup>, Shuko Nagai<sup>†</sup>, Shigeru Ohki<sup>‡</sup>, Rintaro Mori<sup>†</sup>, Kenji Shirai<sup>‡</sup>, Shinichi Watabe<sup>‡</sup>

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**Background:** Many facilities in Japan have successfully introduced Kangaroo Care (KC) in the past decade by adapting and modifying the KC method to suit their needs. Recently life-threatening events during KC have been reported and some concerns arose in Japan.

Aim: To develop consensus over KC based upon the available evidence to promote appropriate application of KC in Japan. Material and methods: KC was categorised into three groups: 1) continuous KC for stable low birth weight babies (classic definition of Kangaroo Mother Care); 2) temporary KC for babies in neonatal intensive care; 3) starting KC immediately after birth for term healthy babies. Draft recommendations were developed by the working group based upon the available evidence from systematic reviews. The guideline committee members were recruited to ensure a multidisciplinary environment including a patient representative, and recommendations were finalised by using the modified Delphi consensus method. Results: Recommendations in all the three topics were highly agreed by the third round. The way to promote KC by ensuring safety has flagged for special attentions. Details of final recommendations will be presented in the the meeting. Conclusions: Limitations and controversies discussed in the consensus meeting will be presented. Further public consultation is planned. Key words: Kangaroo Care, patient safety, practice variations, Delphi method, consensus