The Efficacy of Kangaroo Mother Care on Preterm Babies At Selected Hospitals In Bareilly

Mr Santhosh S.U
Vice Principal
Ganga Sheel School of Nursing, Bareilly

I. INTRODUCTION

Using incubators to care for low-birth-weight babies in developing countries like India is a costly endeavour for parents. Because of their high price, incubators are out of reach for the families of low-birth-weight babies. As a result, information about low birth weight baby management options like Kangaroo Mother Care should be disseminated to expectant mothers. Kangaroo Mother Care not only keeps babies with low birth weight from getting too cold, but it also makes the bond between the child and his or her mother stronger.

In addition, nurses have the most direct contact with mothers of low birth weight babies, making them an ideal resource for teaching them about Kangaroo Mother Care.

Even though India has seen a significant increase over the past decade, there is still an urgent need for more neonatal intensive care units (NICUs).

For the time being, it's difficult to estimate the exact cost of establishing and operating a neonatal intensive care unit (NICU). Intensive care units for newborns are some of the most expensive places to be admitted. Women who give birth in hospitals are unable to get the high-quality neonatal care their babies need. The majority of health facilities in India and most developing countries do not provide Level I and Level II neonatal care. As the investigator discovered in her clinical practice, many low-birth-weight and preterm babies die in the neonatal period due to the complications of their conditions. Kangaroo Mother Care is unknown to the majority of women who give birth to premature or underweight babies. Because of this, he believes that educating the mothers of these low-birth-weight and preterm infants will significantly reduce their mortality rates. This prompted the researcher to choose this topic.

II. METHODOLOGY

Quasi-experimental design was used to evaluate the effect of Kangaroo Mother care on preterm babies' physiological, behavioural, and psychosocial outcomes in a selected hospital. Based on inclusion and exclusion criteria,

the samples were selected by means of a purposeful sampling technique. It had a total of sixty participants.

Experts in nursing and medicine verified the accuracy of the content, and any revisions that were found to be necessary were made.

Using information from the mother and from hospital records, we gathered demographic data. Physiological, behavioural, and psychosocial outcomes were evaluated using a Kangaroo mother care assessment flow sheet. A variety of statistical tests, such as the independent "t" test, the paired t test, and the chi-square test, were used to determine the results of the data collected.

III. RESULTS

Physiological outcomes had a mean value of 6.1 in the pre-test. level of pain had a standard deviation of 1.88 and a post-test mean was12.76 The standard deviation is 2.76. a paired 't' test result of 18.74 was obtained was significant (P 0.05).

7.54 was the pre-test mean for behavioural outcomes, with a standard deviation of 1.84The post-test mean level of pain was 3.01 with a standard deviation of 1.87, and the standard deviation was 1.38. The paired 't' test result of 14.34 was found to be correct.As a result, the calculated value exceeded the table value.

In KMC, the technique has a significant impact on preterm infants enhancing one's health in both the physical and psychological senses.

There is a statistically significant correlation (r=.67, at a P-value 0.05) between the two variables. with regards to the maternal-baby age and delivery type.

Conclusion

In the current experiment, KMC proved to be more effective than conventional care in promoting physiological stability, behavioural organization, and improved psychosocial outcomes in premature infants. Even more importantly, it was found that mothers who held their babies close to their chest while they slept felt better about themselves and more confident in their ability to care for their children during the night. No mother would have preferred not to perform continuous KMC or to end KMC earlier than they did. This may be due to a lack of interest in KMC applications and research.

REFERENCES

[1] L. S. Owen, B. J. Manley, P. G. Davis, and L. W. Doyle, "The evolution of modern respiratory care for preterm infants," The Lancet, vol. 389, no. 10079, pp. 1649–1659, 2017. View at: Publisher Site | Google Scholar

[2] M. Brossard-Racine and C. Limperopoulos, "Cerebellar injury in premature neonates: imaging findings and relationship with outcome," Seminars in Perinatology, vol. 45, no. 7, Article ID 151470, 2021. View at: Publisher Site | Google Scholar

[3] L. B. Boettcher and E. A. S. Clark, "Neonatal and childhood outcomes following preterm premature rupture of membranes," Obstetrics &Gynecology Clinics of North America, vol. 47, no. 4, pp. 671–680, 2020. View at: Publisher Site | Google Scholar

[4] J. L. Mehta and M. Bavineni, "Premature birth, infections, and atherosclerotic cardiovascular disease," European Heart Journal, vol. 40, no. 39, p. 3275, 2019. View at: Publisher Site | Google Scholar

[5] A. S. Scavacini, J. Davidson, G. F. Wandalsen et al., "Association between thoracic musculoskeletal abnormalities and lung function in preterm infants," The Clinical Respiratory Journal, vol. 14, no. 2, pp. 158–164, 2020. View at: Publisher Site | Google Scholar

[6] T. Sproat, R. P. Payne, N. D. Embleton, J. Berrington, and S. Hambleton, "T cells in preterm infants and the influence of milk diet," Frontiers in Immunology, vol. 11, p. 1035, 2020. View at: Publisher Site | Google Scholar

[7] G. Mangili and E. Garzoli, "Feeding of preterm infants and fortification of breast milk," La Pediatria Medica e Chirurgica, vol. 39, no. 2, p. 158, 2017. View at: Publisher Site | Google Scholar

[8] D. A. Gidrewicz and T. R. Fenton, "A systematic review and meta-analysis of the nutrient content of preterm and term breast milk," BMC Pediatrics, vol. 14, no. 1, p. 216, 2014. View at: Publisher Site | Google Scholar

[9] E. O. Boundy, R. Dastjerdi, D. Spiegelman et al., "Kangaroo mother care and neonatal outcomes: a meta-analysis," Pediatrics, vol. 137, no. 1, 2016. View at: Publisher Site | Google Scholar

[10] R. R. Kostandy and S. M. Ludington-Hoe, "The evolution of the science of kangaroo (mother) care (skin-to-skin contact)," Birth Defects Research, vol. 111, no. 15, pp. 1032–1043, 2019. View at: Publisher Site | Google Scholar