

The practice of Kangaroo Care at St. Olavs Hospital in Trondheim, Norway



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Maternity ward



Neonatal Intensive Care Unit





A reflection...

- Is it necessary to separate mother and child after delivery to provide medical care for the preterm infant?



No.... we dont think so



KC in delivery room (DR) for preterm infants

2007: In cooperation with the maternity ward we introduced skin-to-skin contact (SSC) in DR for preterm infants from 32 weeks of gestation

2009: Starting a multicentre study in cooperation with two other hospitals in Norway that do not offer KC after delivery. They represent the control group and St. Olavs Hospital the intervention (KC) group.



Problem to be addressed

- Safety of KC in delivery room at GA 32.0-34.6
 - Body temperature
 - Blood glucose
- Correlation between early skin-to-skin contact and frequency of breastfeeding



Preliminary results

Mean duration of KC was 95 min. Reasons for discontinuation of KC were grunting and tachypnea

Body temperature on arrival in the nursery

KC group: median (range) 36,8 (36,0-37,2)

Standard group: median (range) 37,0 (35,7-37,6)

First blood-glucose

KC group: median (range) 3,0 (1,7-4,8)

Standard group: median 3,3 (2,2-6,2)

Preliminary results

Breastfeed at discharge

KC group: 89,5 % (seventeen of nineteen preterm infants)

Standard group: 87,5 % (fourteen of sixteen preterm infants)

Post menstrual age at discharge

KC group: median (range) 36,1 (34,5-37,4)

Standard group: median (range) 36,0 (35,4-37,6)



Experiences along the way

- ✓ At the beginning of the study period temperature was measured axillary. Practice was changed to rectal measurement after one infant was diagnosed with anal atresia after arrival NICU at two hours of life
- ✓ Except from this incident we have not experienced any negative consequences (just positive) after the procedure was revised



Conclusion

KC in the delivery room for preterm infants born at 32.0 to 34.6 weeks of gestation are feasible and safe







The practice of skin-to-skin contact in a level III NICU in Norway



- So far, we are not providing continuous Kangaroo Mother Care, but we encourage the parents to sit skin-to-skin with their preterm infants as often and as long time as possible



IMA



Else

- Born at 28 weeks of gestation
- Severe RDS and development of irreversible hypoxic failure
- High frequency ventilation with 100% O₂
- iNO (inhaled nitric oxide)









John

- 23 weeks of gestation
- 520 grams
- Seven weeks of high frequency mechanical ventilation







Lucas

- 24 weeks of gestation
- 720 grams
- Intraventricular haemorrhage grade III
- External drainage









A comfortable, safe and relaxed father



Thank you for your attention

