

Title: WHAT WE TALK ABOUT IN NICUs WHEN WE TALK ABOUT KANGAROO CARE: A NATIONAL SURVEY IN SPAIN.

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Background

Indirect evidence shows that KMC dissemination is increasing across Spain. This raises a number of questions about how KMC is being implemented in the context of different neonatal settings.

Main aim of this study was to determine the degree of implementation of KMC at a national level using KMC-WHO practical guide as a reference. Secondary aim was to relate KMC implementation with other neonatal unit practices.

Methods

Cross-sectional national survey. All level III neonatal units in the Spanish national health system (n=77) received a 67 items questionnaire. NICUs practices regarding KMC implementation were categorized as 1) skin to skin KMC (WHO-KMC), 2) No WHO-KMC, 3) No KMC, and further compared according to: level of care (IIIa, IIIb, IIIc), number of admissions per year (newborns with birthweight under 1500 g), parental participation in care and professional breastfeeding training.

Results

Response rate was 87% (67/77); 94% (63/67) of units responded positively when asked about KMC implementation in their unit; only 71% (45/63) performed WHO-KMC.

Units that allowed parental presence during procedures showed 79% (33/42) of WHO-KMC compared to 43% (9/21) in those that didn't, $p=0.07$. As per unit level, 100% (9/9) of IIIc units performed WHO-KMC compared to 66% (35/53) in IIIa-b units, $p=0.03$.

Number of admissions and availability of breastfeeding training did not show any association with WHO-KMC implementation.

Conclusions

Although KMC is widely implemented in Spain, almost 1 in 3 level-III units do not comply with WHO-KMC recommendations. Specific training should be promoted in order to increase WHO-KMC uptake.