P 55. THE KANGAROO METHOD IS SAFE FOR PREMATURE INFANTS UNDER 30 WEEKS OF GESTATION DURING VENTILATORY SUPPORT

Henriette A. van Zanten, RN
Leiden University Medical Centre, Neonatology, Leiden, The Netherlands

Objective: Research into the safety of kangaroo care in infants born under 30 weeks of gestation, all supported on a ventilator. Material and method: Place: Neonatal Intensive Care Unit, Department of Paediatrics, Leiden University Medical Centre, Leiden, the Netherlands. Research design: Case control study in a repeated measures design. Population: 34 children with respiratory support (SIMV/CPAP) divided into two groups: 18 infants born after 25-28 weeks of gestation and 16 infants born after 28-30 weeks of gestation. Method: Safety was measured using the following parameters: heart rate, oxygen saturation, respiratory rate and arterial blood pressure measured every 5 minutes, one hour before, one hour after the initiation and one hour after finishing kangaroo care. Alarm settings at the NICU were used as a safety norm. The child's temperature and settings of the ventilator were registered as base variables. Results: Both heart rate and breathing rate decreased during kangarooing and remained low. Oxygen saturation increased during kangarooing and remained higher. Arterial blood pressure increased and only returned to the baseline values after kangarooing. Body temperature decreased and remained low after kangarooing. The results of the measurements remained within the safety norms. When the ventilatory settings were stable there was, in most cases, a decrease in the mean percentage of oxygen supply. In certain cases the ventilatory settings decreased but still remained well within the acceptable ranges. Conclusion: The kangaroo method is a safe intervention for premature infants born under 30 weeks of gestation as long as temperature is monitored and, where necessary, extra heat is supplied.