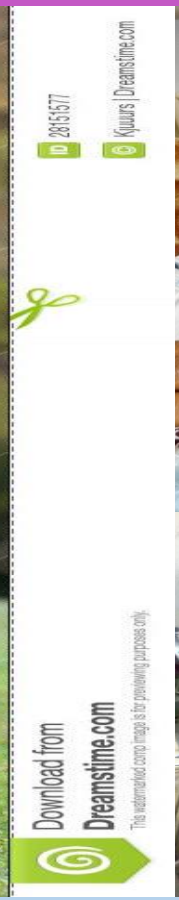
SAVING LIVES,SPREADDING SMILES
KANGAROO MOTHER CARE



WHPHA - MT HAGEN PROVINCIAL HOSPITAL

HEO MONICA POASA

CONTENT

- AIM
- Introduction
- Background
- Methodology
- Results (LBW statistics Jan – Jun 2018 & 2019)
- Discussion
- Challenges
- Conclusion

AIM

- Asses the Impact of Kangaroo Mother Care on Low Birth Weight morbidity and mortality in Special Care Nursery – Mt Hagen Provincial Hospital

INTRODUCTION

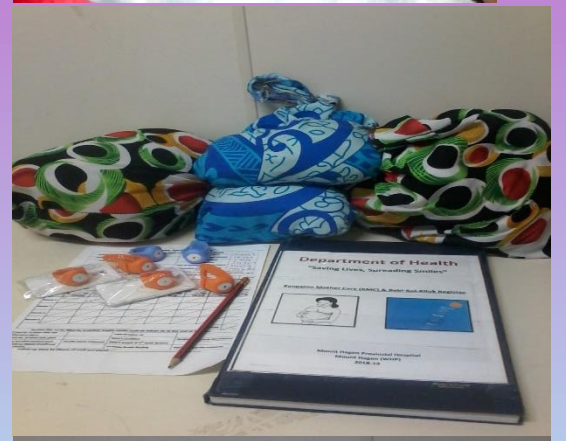
- LBW – a birth weight of 2,499g or less regardless of gestational age. (WHO Def.)[1]
  - Subcategories: VLBW<1500g & ELBW < 1000g[1]
- Preterm : GA < 37weeks
- New born death rates highest in the Pacific region[2]
- Hypothermia is the underline cause 60 – 80% of newborn deaths in PNG (neonatal period)[3]
- Globally,15% of babies are born with LBW as a result of Preterm or IUGR [4]
- About 70% of neonatal deaths occur in LBW babies [4]
- Underline Causes of death include hypoxia, hypothermia, hypoglycaemia and infection.[3]
- KMC
  - an effective way to reduce mortality and morbidity among LBW babies [4]
  - Early, prolonged continuous direct skin to skin contact between a mother and her baby [4]
  - Helps to meet baby's need for warmth, breast milk, protection from infection, safety and love [6]
  - Results in exclusive breast feeding and early discharge from the hospital [6]

BACKGROUND

- 1976 : Dr Chateau in Sweden first describe the studies of early contact with a mother and a baby at birth[8]
- 1978 : Dr Ray in Bogota, Colombia first suggested KMC in response to increased mortality and morbidity rates among LBW babies due to shortage of incubators and manpower.[7,8]
- 1984 : First reported by UNICEF[6]
- 1998: First International Conference on KMC [7]- Baltimore, Maryland and USA
  - Supported by WHO and many organizations as a life saving method of care [7, 9]
- 2011: May 15 – International KMC awareness day [7 ,9]

KMC IN WHPHA – MHPH

- UNICEF partner with NDOH Launched in WHPHA in September 2018.
- Introduced to Special Care Nursey in October 2018
- Dr Manish from UNICEF did few hours training on;
  - Skin to skin contact
  - Hypothermia alert device (BKK)
  - Documentation and reporting
  - Donated KMC kits,BKK and posters



METHODOLOGY

- To evaluate impact, data was collected on morbidity and mortality variable in period January to June 2018 as historical control compared with data from same period in 2019 after KMC was introduced
- With historical controls, we can not separate out which babies would have gone on to KMC (all LBW < 2500grams)
- Data collected include incidence of LBW,total mortality on LBW babies, Average Length of Stay and readmission frequency
- Data was compared to see if there was any significant improvement in morbidity and mortality

RESULTS

	2018 Jan-June	2019 Jan - June	
	BEFORE KMC	AFTER KMC	
Total LBW admissions	156	202	Increase by 46 patients
Deaths	40 (25.6%)	31 (15.3%)	10.3% decrease
Readmissions	10 (6.4%)	8 (4%)	2.4% decrease
Average LOS	7 days(Sd:2.2days)	3 days(Sd:1day)	4 days decrease(Sd:1.2days)

- **Total KMC babies : 124**
- **Deaths after KMC : 2**
- **Deaths before KMC : 29 (too sick to receive KMC)**
- **Absconds/LHOR : 47**
- **LOSS TO FOLLOW UP : 18**
- **Trial KMC on 5 persistent PNA pts on O2 dependent with 2 SBA : All came off O2 2 - 4 days later**

DISCUSION

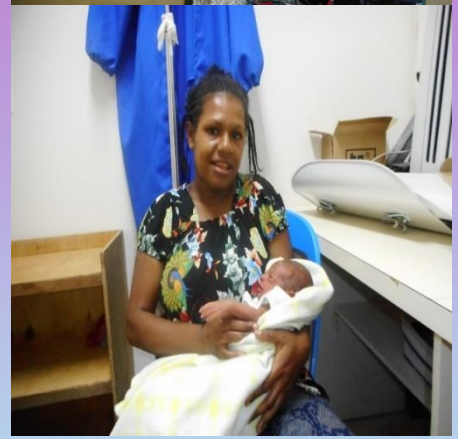
- As per the results,KMC significantly reduced mortality rates, readmission frequency and shortened hospital stay
- Warmth is maintained (BKK beep/orange light alerts mother care givers when the baby is hypothermia)
- Promoted exclusive and successful breast feeding
- Gaining weight quickly and growing (D/c at 2-3 reviews)
- Improved sleeping patterns,less cries
- Family involvement and bonding among the family members

CHALLENGES

- Counselling, demonstration & documentation takes 30 – 60 minutes
- Few clinical staff involved
- Limited space on register book
- Difficult mothers:
    - illiterate
    - Single mothers
    - teenage and unwanted pregnancies
    - Adopted babies

CONCLUSION

KMC is a old concept, a cost effective intervention in improving survival rates among LBW babies and should be made available at all levels of health care



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THANKYOU….

IN THE FIGHT OF LBW MORBIDITY & MORTALITY