

Pretermers bounce back from pain with a cuddle

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Research published today in the open access journal *BMC Pediatrics* suggests that very preterm babies, born between 28 and 31 weeks, could benefit from skin-to-skin cuddling with their mother before and during painful procedures such as a heel lance.

Celeste Johnston of McGill University, Montreal, Canada and colleagues have already shown that skin-to-skin contact, known as kangaroo mother care (KMC) helps babies born at 32 to 36 weeks to recover from pain. They hoped to determine whether KMC could reduce pain and aid recovery in even younger preterm babies born at 28 to 31 weeks. It was previously thought that such young babies were not developed enough to benefit from comfort strategies.

They carried out a randomized crossover trial to see whether such babies could bounce back from pain following a heel lance blood test, which involves pricking the baby's heel to obtain a blood sample. The team asked mothers to hold their babies for 15 minutes prior to and throughout a heel lance procedure. On another occasion the same babies in the trial were treated as normal and simply swaddled in the prone position in the incubator before and after the procedure.

The team was able to assess the babies' pain based on the Premature Infant Pain Profile (PIPP), which takes into account facial expressions, heart rate, and blood oxygen levels. They measured the PIPP just before the heel lance and at 30-second intervals during and after the procedure.



They found that PIPP scores at 90 seconds after the lance procedure were much lower in the KMC babies than in those without skin-to-skin contact. The facial expression of pain was shown less than half the time in the babies treated with KMC.

Babies receiving KMC also recovered from the pain within a couple of minutes, whereas the incubator babies were still suffering at more than three minutes. This delay could make all the difference to the health of a very preterm baby - born before 32 weeks - who needs almost constant incubator care.

"The pain response in very preterm neonates appears to be reduced by skin-to-skin maternal contact," says Johnston, "This response is not as powerful as it is in older preterm babies, but the shorter recovery time using KMC is important in helping maintain the baby's health." Johnston also points out that the approach could also have benefits for the mother whose parental role diminishes while her baby is in intensive care.

Source: BioMed Central

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