

Kangaroo mothering a boon for premature babies

Bonding technique makes saving the lives of tiny tots child's play

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IN A WARD full of small babies – some premature and others born with low birth weight, skin-to-skin contact, nutrition, constant love and support are king.

With the Kangaroo Mother Campaign (KMC), the babies are not only comforted by their mothers' heartbeat, similar to their in-utero situation, but they also benefit from good bacteria, the organisms they pick up from their mother's body.

This week mothers of the tiny babies at Kalafong Hospital's paediatric Ward 4 said the method – foreign to them and their upbringing – has yielded huge benefits when caring for their tiny tots.

Staff at the ward said there was a fine line between life and death with fragile babies like these, but medical and emotional attention is closing that gap.

"When they come in they are near death, but when they leave they are as healthy as full term babies," a nurse in the ward said.

Phumzile Shongwe said her premature baby's weight had grown significantly after they were moved from the Intensive Care Unit to Ward 4.

"Whenever I put my boy against my skin Tshagofatso knows that he is still with me, the person he knew before he was born, and he is happy," the mother told the Pretoria News.

Shongwe had her baby at 26 weeks, and he had weighed only 700g. Now, two months later, he weighs 1.9kg and is more than ready to go home.

This week his mother and staff were working on weaning him off the oxygen he had become used to.

Three days was all he needed.

Babies in the KMC wards are held, cuddled against their mother's chests, to which they are secured with specially-made cloth.

Florina Mafatoyela's twins were also thriving using the method. She said not only are they kept close to her but also as close to each other as they had been in-utero.

The 36-year-old Atteridgeville mother said her babies had also shown remarkable growth from the time they moved to the KMC ward.

She cuddled the boy and girl closely, speaking to them in soft tones while they dozed off after a feed. "This is a process I am taking home with me, and although they will become too big to 'kangaroo' together this period will allow us all to bond in a way that will never be broken," she said.

Consultant paediatrician and founder of the ward, Dr Elsie van Rooyen, said premature babies and babies born with low weight were extremely fragile, contributing largely to the three million neonates (babies younger than 28 days) who died annually worldwide.

"The biggest killer of neonates are prematurity, infections and asphyxia," she said.

Preventative measures had to be quickly put in place, she said, and kangaroo mothering was one of the best tried, tested and approved ones.

She introduced KMC to Kalafong patients in 1999. "Since then fewer than 30 babies have died of the close to 5 000 who had passed through," Van Rooyen said.

KMC ensured that mothers were the primary care givers, who fed, bathed and administered medication to their babies.

"Mothers are encouraged to keep the babies on their chests, with no clothing in-between. This encourages growth, and nutrition because



Florina Mafatoyela uses kangaroo mothering care on her twins.

they can breastfeed easily," she said.

That position also stimulated the production of milk and encouraged its absorption into the baby's system.

Babies also picked up the "good bacteria" that lined their mothers' moist skin.

"This provides them with protection, assists in neuro-development, and helps babies sleep better way after their mothers go home and continues into later life."

Lorrain Mokau's baby had weighed 500g at birth but had doubled that weight within a month, thanks to KMC.

She has had a premature baby before, and, she said, the girl's weight had taken four months to double.

"The difference between KMC and normal caring for my premature babies is so stark," she said.

The feeding process is the same, but because babies are sometimes left to lie in a basinet or in another ward they don't benefit from the closeness with the mother, she said.

The mothers admitted that they came from backgrounds that discouraged constantly holding their babies lest they got spoilt and refused to be put down.

They were however all adamant that this method would not leave

them in that situation.

Phindile Masemola said of her little girl Iminathi: "I would not allow even my mom to stop me from 'kangarooing' her. She is calm, cries rarely and brings me so much happiness by being happy when she's nestling against me."

"I would recommend this method to anyone, whether they had a full term baby or not," she said.

Sister Eva, who runs the ward, said working with at-risk babies was the biggest challenge for a paediatric nurse.

She had worked with babies for 30 of her 40 years in the profession. "Watching them thrive from the closeness of their mothers is the most rewarding aspect of my life."

"If you love them they grow bigger and stronger in response."

Watching them leave was sad, she said "... but the pride of watching healthy and happy babies leave far outweighs everything."

At lunch time the mothers went into their kitchen to eat, most with their babies firmly strapped to their chests. "This allows them to get in tune with our own activities," said Eva Ntoane. Her little boy Gift stirred for a minute and then went back to sleep. "He's just acknowledging that he knows it's my meal time."

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Phindile Masemola's kangaroo mothering care being practised on her tiny baby girl Iminathi Masemola at Kalafong Hospital's paediatric ward.

PICTURES: THOBILE MATHONSI