

FT20

Comfort in Premature Babies

Esra BAĞLI¹ Doç. Dr. Sibel KÜÇÜKOĞLU²

 ¹ Selcuk University Institute of Health Sciences, Department of Nursing, Konya, Turkey
² Selcuk University Faculty of Nursing, Department of Child Health and Diseases Nursing, Konya, Turkey

ABSTRACT

Objective: Comfort; sadness, boredom, non-anxiety as a condition of the Turkish Language Institution's Dictionary. The concept of comfort has become a frequently talked about concept for premature infants and neonatal intensive care units since Kolcaba defined comfort and developed its theory. Premature infants must remain in intensive care units during the period when they need to be present in a safe intrauterine environment. Neonatal intensive care units are areas where premature babies are treated and treated as necessary, as well as where there are many painful procedures and procedures that will disturb the comfort of the baby and where there is an inappropriate environment. The aim of this review is to present the concept of comfort in prematures in the light of current information.

Methods: This descriptive study was conducted between June and October 2019 using the scanning method and document review technique. National (Hacettepe University Libraries, Turkish Medline and Ulakbim Journalpark, National Thesis Center) and international ("Web of Science", "Science Direct" and "Pub-Med", "Web of Science") databases were scanned.

Keywords "Comfort", "Comfort", "Premature", "Newborn" were scanned in Turkish and

Results:

Environmental stimuli such as sound, heat, light and noise in neonatal intensive care units, as well as deterioration of the usual order, frequent touch, NGS feeding, painful interventions (heel blood removal, vascular opening and intubation, etc.) for premature is a major source of discomfort. As soon as possible, the ready baby should switch to oral nutrition. In order not to divide sleep, light adjustment, day-night periods are created, care scans are performed outside of sleep time and eye pad use is one of the applications that will increase comfort. Premature massage application and contact with the mother to the skin increases the comfort of the premature. Touching the skin increases the commitment of the mother and baby, strengthening the sense of trust. Positioning, aromatic fragrance sniffing, sweet solutions, breastfeeding, pacifier ingestion and massage applications have been found to reduce pain and increase comfort of the newborn. Heat, light and noise control in neonatal units increases the comfort of the newborn. Adjustable and not-too-bright light usage, reducing monitor light and sound, staff speaking in low voice, covering incubators are applications that can be made.

Conclusion: An intensive care nurse is the only person who can provide the baby's comfort with holistic care. Many practices performed by nurses will increase the comfort of prematures and will ensure that their development is positively affected. Therefore, it is necessary to raise awareness of nurses working in intensive care and to encourage practices to take care of the comfort of the baby.

Keywords: Comfort, premature, newborn, nurse.

PEDIATR











Introduction

The word comfort derives its origin from French and means material comfort, which makes everyday life easier for Turkish. Comfort, on the other hand, has been included in the Dictionary of the Turkish Language Association as a state of sadness, boredom and non-anxiety. (1) Since the Neonatal Intensive Care Unit (ICU) is an environment where there are many disturbing factors unlike intrauterine life for newborn babies, the concept of comfort is a frequently discussed topic for ICU and newborns. (2).

COMFORT CONCEPT AND THEORY

The concept of comfort; After being analyzed by Katharine Kolcaba, he developed the theory of comfort in 1994. In the theory, comfort is defined as "an expected result with a complex structure in physical, psychospspiritual, social and environmental integrity in relation to the individual's needs, providing peace and overcoming problems" (3, 4).

Kolcaba examined the concept of comfort in two taxonomic structures. Kolcaba, stage one; has determined the comfort levels according to the condition in which individual comfort needs are met. These levels include; relief, relaxation and superiority. In the second stage, it formed the dimensions of comfort based on holistic vision. Comfort dimensions; physical, psychospispiritual, environmental and sociocultural dimensions (5)

Comfort In Premature Babies

Premature babies are obliged to spend the most sensitive and critical periods of their lives in the intensive care unit. Intensive care units contain many factors that affect the comfort of patients and their relatives. However, if intensive care nurses know the effect of comfort and comfort in intensive care units, they can offer a care that increases the comfort of patients and their relatives with holistic vision (6).

Initiatives for Comfort in Premature Infants

1. Nutrition

Many functions of premature babies should be fed enterally with orogastric tube due to reasons such as immature, inability to provide organization between absorption, swallowing and breathing. Since probe nutrition delays the development of motor functions, oral feeding should be switched to the shortest and safest time. Changes in nutrition affect the physical comfort of the patient (7).

2. Sleep

After intrauterine period, ICU's are a very noisy and complex environment for newborns. Maintaining night-day order in intensive care units, bringing high light and sound level to appropriate standards, performing baby massage, giving suitable position, covering incubators, using eye patches, maintaining outside of sleep hours and ensuring sleep patterns contributes positively to the growth and development of the baby (8).

3. Massage Application

The first sense that communicates with the baby's environment is touch. While touch is important in perceiving the environment in infancy, it is very well developed in the newborn with forehead, tongue, lips and ear (9). Massage shows the effect of increasing blood and lymph circulation, relaxation of muscles and enlargement of arterioles. Massage provides comfort by providing a general state of rest Massage application increases the relationship between mother and baby, reduces the stress of the baby, maintains sleep patterns, supports growth and reduces the length of hospital stay. In cases where the massage is not performed by the mother, massage has the same effect in infants; increases communication with the mother and the environment (10).



PEDIATR









4. Mother-Infant Attachment

Bonding is a relationship that is often emotional. This relationship, which begins during the neonatal period, seriously affects all the developmental areas of the baby throughout life and continues to have an effect throughout life. The mother's speech to her baby, touching and touching the skin, encouraging, encouraging and informing the mother of participation in baby care increasematernal maternal-infant commitment is one of the applications (11).

5. Kangaroo Care

Kangaroo care provides skin contact between mother and baby immediately after birth. With this method, the mother and the baby begin as the mother and the baby are adapted to the outside world with maternal heart tone, breath and body temperature. With maternal and infant commitment, feelings of happiness, trust and peace develop and mother and baby calm down. No preparatory preparation is required for the method, it is cost-effective and high-quality maintenance. (12,13)

6. Pain Relief

Probe and catheter placement procedures, aspiration, lack of proper position and other painful procedures adversely affect the child's comfort in intensive care units. Breastfeeding, positioning, providing skin-to-skin contact, maternal heart tone, massage, giving pacifier or sweet solutions, smelling aromatic odors are effective methods in the baby. (14)

7. Non-Nutritious Absorption

Non-nourishing absorption, which has a relaxing and soothing effect on the baby, is used to accelerate the transition of the baby to the mother's breast or bottle by improving the suction behavior. Non-nutritious absorption calms the baby, facilitates the transition to sleep and reduces the length of hospital stay (15).

8. Music Reclusive and Lullaby

Music and music therapy has been used in many fields over the years. Music therapy can be used to improve therapeutic, palliative or quality of life and to relieve disturbing symptoms. Music is also used because of the benefits of ICU's such as reducing stress and pain, facilitating the transition to sleep, facilitating the transition to nutrition, increasing oxygen saturation and stabilizing the heart peak and reducing the length of hospital stay (16).

Listening to lullaby improves maternal and infant commitment while positively improving language development, cognitive and psychosocial development in infants. Listening to a lullaby calms the baby, reduces stress, increases nutrition and absorption, relieves pain and contributes to respiration. Mothers can convey their feelings and love to babies by singing lullaby. (17)

Strategies for Improving Baby Comfort in Intensive Care Units

1. Ensuring Environmental Sound and Light Control

PEDIATR

NICU are noisy and luminous environments with high-equipped medical devices, machines that can make high noise such as monitors, ventilators and infusion devices. Improper sound and light adversely affect the comfort of the premature. Creating the day and night cycle, bringing medical devices to the appropriate volume, staff speaking in a low voice, covering the incubators are applications that will increase the baby's comfort. In intensive care units, the light should not be too bright, the patient should have light per head and other patients should not be affected by the reflections of light. The light used must be adjustable (18).

2. Ensuring Hygiene Control

The neonatal period is a period of greater life-threatening life. Intensive care units should have hand washing areas, dirty and clean storage, negative pressure ventilation, insulation rooms to prevent infections. All materials in the unit must be suitable for frequent cleaning. (19)







3. Odor Control

Premature babies are known to increase the adaptation of pleasant and familiar scents, reduce apnea and calm down, and increase attachment and comfort. Unpleasant odors such as alcohol, disinfectant and flaster create negative experiences in infants, creating negative physiological effects and stress. Reducing these odors is one of the applications that can increase the comfort of the baby (20).

Results

An intensive care nurse is the only person who can provide the baby's comfort with holistic care. Many practices performed by nurses will increase the comfort of prematures and will ensure that their development is positively affected. Therefore, it is necessary to raise awareness of nurses working in intensive care and to encourage practices to take care of the comfort of the baby.

Kaynaklar

- 1. Türk Dil Kurumu. https://sozluk.gov.tr/ Erişim Tarihi: 15.11.2019.
- 2. Kahraman A, Başbakkal Z, Yalaz M, 2014. Turkish validity and reliability of comfortneo scale International Refereed Journal of Nursing Researches Uluslararası Hakemli Hemşirelik Araştırmaları Dergisi, 2014; 1(2): 1-11.
- 3. Kolcaba KY, 1994. A theory of holistic comfort for nursing. Journal of Advanced Nursing, 19, 1178-84.
- 4. Karabacak Ü, Acaroğlu R, 2011. Konfor kuramı. Maltepe Üniversitesi Bilim ve Sanat Dergisi, 4, 1, 197-202.
- 5. Kolcaba K, Kolcaba R, 1991. An analysis of the concept of comfort. Journal of advanced nursing, 16, 11, 1301-10.
- 6. Sarı HY, Çiğdem Z. Gestasyon Haftalarına Göre Bebeğin Gelişimsel Bakımının Planlanması. Dokuz Eylül Üniversitesi Hemşirelik Fakültesi Elektronik Dergisi, 2013; 6, 1, 40-8.
- 7. Aykanat GB, Gözen D. Preterm Bebeklerde Oral Beslenmeye Hazır Oluşluğun Değerlendirilmesi. Turkiye Klinikleri Hemsirelik Bilimleri, 2017; 9, 4, 326-36.
- 8. Küçük S. Yenidoğan yoğun bakım ünitelerinde kaliteli uyku. DEUHFED, 2015,8(3),214-217.
- 9. Güleşen A, Yıldız D. Investigation of Maternal-Infant Attachment in The Early Postpartum Period With Evidence Based Practice. TAF Prev Med Bull 2013;12(2):177 -182
- 10. Degirmen N, Ozerdogan N, Sayiner D, Kosgeroglu N, Ayranci U. Effectiveness of foot and hand massage in postcesarean pain control in a group of Turkish pregnant women. Applied Nursing Research, 2010; 23, 3, 153-8.
- 11. Akarsu RH, Tunca B, Alsaç SY.. Anne-bebek bağlanmasında kanıta dayalı uygulamalar. Gümüşhane Üniversitesi Sağlık Bilimleri Dergisi, 2017; 6(4): 275-279.
- 12. Güler E, Ateş NA, Küğcümen G.. Kanguru Bakımının Düşük Doğum Ağırlıklı Ve Prematüre Yenidoğana Etkileri. Cumhuriyet Üniversitesi Sağlık Bilimleri Enstitüsü Dergisi, 2019; 4, 2, 1-5.
- 13. Günay U, Coşkun D. Kanguru Bakımı Uygulaması Başlatılan Bir Yenidoğan Yoğun Bakım Ünitesinde Yenidoğan Ekibinin Gözlem, Görüş ve Deneyimleri: Nitel Bir Araştırma. J Pediatr Emerg Intensive Care Med 2019;6(2):85-90
- 14. Aydın D, İnal S. Effects of breastfeeding and heel warming on pain levels during heel stick in neonates. International Journal of Nursing Practice 2019: E12734.
- 15. Eras Z, Atay G, Şakrucu ED, Bingöler EB, Dilmen U. Yenidoğan yoğun bakım ünitesinde gelişimsel destek. Şişli Etfal Hastanesi Tıp Bülteni, 2013; 47, 3, 97-103.
- 16. İmseytoğlu D, Yıldız S. Yenidoğan Yoğun Bakım Ünitelerinde Müzik Terapi. Florence Nightingale Hemşirelik Dergisi, 2012; 20(2): 160-5.



PEDIATR







- 17. Karaca S, Öngün E. Ninnilerle Büyümek. JAREN/Hemşirelik Akademik Araştırma Dergisi, 2017; 3(1): 28-32.
- 18. Güven ŞT, Dalgıç Aİ. Prematüre Yenidoğanlar İçin Geliştirilmiş Bireyselleştirilmiş Destekleyici Gelişimsel Bakım Programı. Uluslararası Hakemli Kadın Hastalıkları ve Anne Çocuk Sağlığı Dergisi, 2017; 9, 42-61.
- 19. Salihoğlu Ö, Akkuş CH, Hatipoğlu S. Yenidoğan Yoğun Bakım Ünitesi Standartları Bakırköy Tıp Dergisi 2011;7:45-51
- 20. Kanbur BN, Balcı S. Preterm Yenidoğanlarda Koku. Sağlık Bilimleri ve Meslekleri Dergisi, 2017; 4(3): 272-6.









