NEWBORN CARE BY PUERPERAE IN ROOMING-IN1

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ABSTRACT

The objective of this study were analyze maternal care performedin newborn rooming. It is a descriptive and observational study in a quantitative approach. Interviews were carried out with puerperae in rooming-in at the Hospital de Clínicas da Universidade Federal do Triângulo Mineiro – UFTM, between October and December 2010. Data were collected through a questionnaire and were analyzed by using simple frequency. 194 women older than 18 years old took part in the study. They were interviewed after 6 hours after labor, during the 48 or 72 hours of internment, in adequate medical conditions. We identified that most mothers provided correct care and nurses were mentioned as advisors on how to take care of newborns during puerperium. The participation of the mothers on the cares to the newborns at the rooming-in and the nursing orientation and help to the mothers' needs, doubts and fears are fundamental.

Keywords: Infant, Newborn. Postpartum Period. Maternal-Child Nursing.

INTRODUCTION

The postpartum period is a period of interaction between mother and child through the newborn care (NB). All this gradual and continuous process begins in rooming-in, where the healthy newborn's mother has the right, guaranteed by law, to stay with their child 24 hours a day, even in the hospital until discharge. It is the ideal time to promote guidelines for child care, to encourage breastfeeding, to facilitate a bond with family and to contribute to reduction of the rates of nosocomial infection (1).

Nursing as a profession that provides care and guidance can also take the mother to be a multiplier, contributing to better newborn care. This guided puerperaepotentiates assistance that will be taken to the family, social and individual environment (2).

It is important that when guiding these mothers, their feelings are considered as an aid for care. An example of thisis the difficulty with breastfeeding. By demonstrating the correct technique of this procedure, it is possible turn away the puerperae's anxiety and fear, as well as the commitment to the safety of newborn care⁽²⁾.

The puerperae's health education is an indispensable tool for discharge planning. In the effective and concrete nursing performance, it is necessary to achieve this educational dimension, supporting the independence and autonomy of mothers for care ⁽²⁾. These guidelines include bathing, sleeping, care for the umbilical stump and changing diapers, watching the evacuation and urination, prevention of diaper dermatitis (rash) and the benefits of breastfeeding, among others.

It is emphasized that nursing, when guiding these puerperae, should respect their experiences and opinions. So the way care has been taught can influence the success of understanding, implementing and achieving its purpose ⁽²⁾.

For women to feel calm in exercising their role as mothers, it is fundamental that the professional is aware of this educational system and health guidance, which does not require

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expensive and sophisticated equipment, but only a good communication, willingness, monitoring, evaluation and conception of host which require professional competence and availability⁽¹⁾.

Based on these, this research aims to analyze the accomplishment of maternal care to newborn, held in rooming-in.

METHODOLOGY

Ĭt is quantitative, descriptive, observational study with cross-sectional delimitation. The survey was conducted noServiço de Ginecologia e Obstetrícia do Hospital de Clínicas da Universidade Federal do Triângulo Mineiro (SGO/HC/UFTM) from October to December 2010. The participants were 194 womenolder than 18 years-old, admitted in the nursing wards of that service, during the period of data collection. The only exclusion criterion was the fact they were not performing direct care to the baby due they're admitted to the Neonatal Intensive Care Unit or nursery.

The puerperae who agreed to participate signed a consent form. The participation only occurred six hours after delivery, within 48 or 72 hours of admission and the woman had to be able to answer questions.

It was used in data collection a structured instrument containing questions about sociodemographic data, obstetrical and gynecological history and the newborn care.

The data compilation was performed on the database of *Microsoft Excel* ®. For statistical analysis, they were imported into SPSS (Statistical Package for Social Science) version 17.0. The quantitative variables were subjected to descriptive measures: medium, standard-deviation and median. For qualitative variables was obtained simple frequency distribution.

This research project was approved by the Ethics Committee on Human Research of Universidade Federal do Triângulo Mineiro (Comitê de Ética em Pesquisa com Seres Humanos – CEP/UFTM) under protocol number 1629/2010..

RESULTS AND DISCUSSION

The group was composed of 194 puerperae who are between 18 and 43 years-old, an

average of 25.95 years-old, median of 25 and a standard deviation of 24 years-old.

In relation to marital status, 95 women (49.0%) reported they live with their partners, 54 (27.8%) reported they're married, 38 (19.6%) are single, five (2.6%) are separated, and two declared they're divorced.

In regard to education, the years of study ranged from one to 21 years, with the majority, 59 (30.4%), completed 11 years of schooling.

As for the mothers' occupation, 134 (69.1%) reported they don't have a paid work, and 29 of the 60 women who have paid jobs reported to receive the minimum wage. The family income ranged from none to 11 minimum wages, but thepredominant income is two minimum wages (53 to 27.3%). In relation to housing, 94 respondents (48.5%) said they live in own property, 77 (39.7%) on rental property and 23 (11.9%)in transferred property. postpartum women, 193 (99.5%), said they live in a property with good infrastructure. In a study conducted with puerperae who in a known maternity in Fortaleza-CE, it was found that women were predominantly aged between 21 and 30 years-old, had 11-16 years of education, living without formal involvement with their partners, depended on them financially and had a family income of up to two minimum wages (3).

In regard to the age of menarche, there was a variation from nine to 17 years-old (an average of 12.4 years-old). The women in this study had their first pregnancy between 11 and 37 years-old (average of 19.6), it is considered that the ideal age for first pregnancy would be between 18 and 20 years-old ⁽⁴⁾. The first sexual intercourse occurred between 11 and 25 years-old (average of 16.2 years-old).

Most puerperae (65 %) had normal delivery, 28.9 % were primiparous and 21.1 % reported they have already had an abortion, andfrom the 41 cases of abortion just one was not spontaneous.

Among the interviewed women, 190 (97.9 %) had the prenatal checkup and only four (2.1 %) did not get the prenatal care, and 32 (16.5 %) had six appointments and 131 (67.5 %) more than six. According to the World Health Organization (WHO), the appropriate number of prenatal checkups would be equal to or greater than six (5). The most cited place for the prenatal

by women (110 to 56.7 %) was Ambulatório Maria da Glória at Universidade Federal do Triângulo Mineiro, and all women reported have had prenatal care with the doctor.

The Table 1 shows the distribution of participants of this study, according to the newborn care.

Table 1. Distribution of puerperas admitted in rooming-in - HC / UFTM –second newborn care

Variable Frequency						
	Yes		No		Total	
	N	(%)	N	(%)	N	%
NBin phototherapy	3	(1,5)	191	(98,5)	194	(100)
Had immunization	192	(99)	2	(1,0)	194	(100)
Exclusive breastfeeding	178	(91,8)	16	(8,2)	194	(100)
Presents bowel elimination	174	(89,7)	20	(10,3)	194	(100)
Presents urinary elimination	181	(93,3)	13	(6,7)	194	(100)
Diapers changed after each bowel elimination	186	(94,9)	8	(4,1)	194	(100)
Diapers changed after each urination	171	(88,1)	23	(11,9)	194	(100)
NBwho sleeps between 2 and 3 hours	124	(63,9)	70	(36,1)	194	(100)
NB position in the crib, adopted by the mother - Dorsal	70	(36,1)	124	(63,9)	194	(100)
NB position in the crib, adopted by the mother - Side	121	(62,4)	73	(37,6)	194	(100)
RN position in the crib, adopted by the mother - Ventral	3	(1,5)	191	(98,5)	194	(100)
Intends to give pacifiers	85	(43,8)	109	(56,2)	194	(100)
NB who receives a daily bath	193	(99,5)	1	(0,5)	194	(100)
Cleans the umbilical stump every diaper change	177	(91,2)	17	(8,8)	194	(100)
Cleaning is accomplished with 70% alcohol	194	(100)	-	(-)	194	(100)
Peaceful environment	194	(100)	-	(-)	194	(100)
Puerperae who shows affection	193	(99,5)	1	(0,5)	194	(100)
Father who helps in NB care	165	(85,1)	29	(14,9)	194	(100)

Source: Interviews in rooming-in at HC/UFTM, Uberaba (MG), 2010.

In regard to phototherapy it was necessary to perform in three (1.5%) newborn children who developed jaundice. Phototherapy is the most common treatment of hyperbilirubinemia in the newborn; this is due to the fact of being a noninvasive method and high impact in decreased levels of plasma bilirubin ⁽⁶⁾.

A research conducted in a midrange maternity, in the State of Minas Gerais, showed that mothers who experience this treatment with their children have feelings such as anxiety and insecurity in relation to this therapy (7). Healthcare professionals should inform and guide correctly them about the treatment (8) because the uncertainty may be caused by a lack

of knowledge about the significance of jaundice and its treatment –the phototherapy ⁽⁷⁾.

During the rooming-in 192 (99%) newborns had been immunized. The university hospital, where the research was conducted, has the immunization service with vaccine room and knowledgeable staff to offer at birth the Hepatitis B vaccine and BCG, as recommended by the Ministry of Health

Most NBs (91.8%) received exclusive breastfeeding, which is consistent with the fact that the hospital staff encourages this practice. The Ministry of Health recommends exclusive breastfeeding until six months-old. Later the child should receive complementary foods, but

should also receive breast milk up to two years-old or more ⁽⁹⁾.

Milk formulas were offered to 16 NBs (8.2%) and performed under prescription. At this stage of life, this kind of food is recommended in cases of mothers who can not breastfeed, as women with Human Immunodeficiency Virus(HIV), infected with HTLV 1 and HTLV2 or who use drugs incompatible with breastfeeding ⁽⁹⁾. It is noteworthy that the study hospital is a reference for obstetric pathology.

According to information gathered from postpartum women, 174 (89.7%) reported NBs bowel eliminations and 160 (82.5%) reported its frequency is up to twice a day. Meconium is the earliest stool of an infant, composed of fluff, epithelial debris and bile. Its phase is between 12 and 24 hours-old after birth (10).

In relation to urinary elimination, 93.3 % of NBs had already presented urination until the time for data collection, and 66 % presented with a frequency of urination three times a day or more. The majority, 102 (56.2 %) reported the color of their urine is light yellow, and 25 (12.9%) have had gold yellow urine, other 42 (21.6%) reported they've had clear urine and 12 (6,2%), turbid. The first NB's diuresis occurs in the first 48 hours (10). It is noteworthy that the absence of urinary and bowel elimination may be justified by the fact that some interviews were carried out within 24 hours after delivery.

In regard to care, most of the mothers reported they have changed diapers after each bowel movement (94.9 %) and each micturition (81.1 %). The diaper should be changed whenever necessary, after the child defecates and/or urinates. It should preferably be disposable because they have greater ability to maintain the corresponding area dry. In the case of diuresis, hygiene by using warm water and cotton, without soap, is sufficient for the feces; the use of mild soap is recommended (11).

The puerperae feel insecure about the standards of urinary elimination of their babies. Thus they're also the part of care to promote observations in relation to the number of daily voids and the care with diaper changes, keeping the NB dry and free from skin irritation (12).

About the care of newborns' sleep, 42 (44.8%) postpartum women mentioned that they slept two hours continuous. In the first days of

life, the newborns usually sleep for many hours, what may vary from baby to baby. They do not distinguish day from night, preventing established time and habits for sleeping, and the first night of the mothers may be sleepless (12).

During the interview, the care with the newborn infant was observed. In relation to the care with the position in the cradle, 121 (62.4 %) reported placing them in lateral decubitus. Although the supine position is not more widely used, it is preferably a recommended position. When sleeping in supine position there is a lower risk for the occurrence of syndrome of sudden death than the lateral decubitus position (13). Despite the guidance on the dorsal decubitus, it is realized that it is still often the mothers who put their babies laterally.

About the puerperae, 85 (34.8 %) answered that they would make the use of pacifiers. The use of pacifiers and bottle is cautioned by health professionals; however, we realized that mothers keepusing them. These mothers believe that children who use pacifiers are more quiet children (14).

As for the hygiene of NBs, it was observed that 192 (99.0 %) were clean and dry; 191 (98.5 %) were using with clean diapers; 190 (97.9 %) wore clean clothes; 189 (97.4 %) wore appropriate clothing; 193 (99.5 %) were in clean cots; and 193 (99.5 %) received daily bath.

It is noteworthy that the rooming-in becomes a good environment to learn about to bathe the newborn, as many mothers have fear and insecurity about this moment. A study conducted in a university hospital in Cuiabá-MT about the mother's behavior when bathing the newborn, the authors emphasized that the technique of bathing the newborn must be shown individually for the mothers in the first postpartum days, and later, in the next day,they should return this procedure to the nursing staff, who will assume the role of observer. It is important that the staff take this time to be sure about the mother's learning, to enhance and/or to correct the technique, if necessary (15).

Regarding the care of the umbilical stump, 177 (91.2%) mothers reported cleaning the umbilical stump every diaper change. All this cleaning is performed with 70% alcohol, what is provided by the hospital during hospitalization and at discharge, to be used at home. Although

mothers have been advised about the use of alcohol, and this is supplied at time of admission, eight (4.1%) women reported that they would use other products at home, such as coffee grounds, tobacco and olive oil. There are some "beliefs" that expose the newborn to the risk of contracting infections localized in the stump, what may lead to sepsis ⁽¹⁶⁾.

A study conducted in the State of Minas Gerais showed that 81% of mothers were not guided about the care for the umbilical stump $^{(17)}$

A research held in a hospital rooming in Cuiabá - MT revealed, through observation during NB bath, that the mothers have fear to manipulate the stump; and during the bath, they use some strategies to deal with it or simply ignore the presence of the stump, focusing on other areas of the NB body. Some of these mothers are afraid because they believe that washing this area would hurt her son. In this same study the author concluded that nursing did not clarify that this area is painless because there is not innervation, for consequence the lack of maternal knowledge increases their fear (15).

Most women (99.5 %) presented affectivity in relation to infants; 165 (85.1 %) responded that parents help in child care. Considering thatthe puerperaeis user of the Unified Health System - Sistema Único de Saúde (SUS), she is entitled to a companion, and often this is the father, so this moment for this interaction with him about the care for the baby.

Considering the purposes and advantages of rooming-in, the mother should be treated as main subject of the relationship established in this educational system. To beattentive for their doubts, fears, questions and desires for learning makes the time lived in rooming-in significant in encouraging women to care for their child ⁽²⁾.

A study held in Natal-RN, in rooming-in, showed man's attitudes in relation to hiswife's postpartum period. For some interviewee, the presence and help are key attitudes adopted, in the involvement of his wife's daily life or in child care ⁽¹⁸⁾.

As for routine visits, 171 (88.1 %) the puerperae knows about the importance of returning to the clinic, 149 (76.8 %) received

guidelines about the newborn infant care during the postpartum period, and 104 (53.6 %) were performed by nurses.

The women's experiences, the speeches and the questions are tools that offer a different host, through the inter-relationship between the clients and nurses. The link between pregnant women and professional will provide experience in this stage for women to feel more peaceful. Thus, how to accommodate the frequency gets higher regularity and permanence in consultations (19).

The puerperae need to receive guidance on the changes in her body in postpartum period and care at home such as observation of lochia, the importance of fluid intake, about feeding in this period and the presence of the father in the child care (20).

Finally, it is emphasized that the admission is important for them to be also oriented about returning to the appointments during the postpartum period.

CONCLUSION

With this study, it was found that most of the mothers take care of the newborn correctly. All of them practice breastfeeding, without mentioning those who had contraindications to breastfeed so the newborns receive milk formula by doctor prescription.

The participants followed correctly the recommendations about the care in bathing her child, umbilical stump and diapering. Still there are some precautions that need to be reinforced by health professionals, for example, putting the RN dorsal decubitus. It is noticed that this practice, even being recommended, is not widely used.

These results show how relevant is the role that nurses play in the participation and guidance of newborn care offered by mothers. It is important that health professionals share their knowledge and actions.

Mothers should participate activelyin the care in rooming-in, and it is up to the nurse to be alert to any changes with newborns, as well as to help them and to guide them in their needs, doubts and fears.

CUIDADOS COM RECÉM-NASCIDO REALIZADOS POR PUÉRPERAS EM UM ALOJAMENTO CONJUNTO

RESUMO

O objetivo deste estudo foi analisar a realização dos cuidados maternos realizados ao recém-nascido, no alojamento conjunto. Trata-se de estudo descritivo e observacional de abordagem quantitativa. Foram realizadas entrevistas com puérperas no Alojamento Conjunto do Hospital de Clínicas da Universidade Federal do Triângulo Mineiro - UFTM, nos meses de outubro a dezembro de 2010. Os dados foram coletados através de um questionário e analisados por meio de frequência simples. Participaram do estudo 194 mulheres, maiores de 18 anos, que foram entrevistadas após 6 horas do parto, nas 48 ou 72 horas de internação, em condições clínicas adequadas. Foi possível identificar que a maior parte das mães oferece cuidados de forma correta e que o profissional de enfermagem foi citado como agente orientador dos cuidados com o recém-nascido, durante o puerpério. Sãofundamentais a participação das mães nos cuidados ao recém-nascido no alojamento conjunto e a orientação e auxílio da enfermagem em suas necessidades, dúvidas e medos.

Palavras-chave: Recém-Nascido. Período Pós-Parto. Enfermagem Materno-Infantil.

EL CUIDADO DE LOS RECIÉN NACIDOS REALIZADO POR LAS MUJERES DESPUÉS DEL PARTO EN UN ALOJAMIENTO CONJUNTO

RESUMEN

El objetivo de este estudio fue analizar la realización de los cuidados maternos al recién nacido en el alojamiento conjunto. Se trata de un estudio descriptivo y observacional de abordaje cuantitativo. Fueron realizadas entrevistas con puérperas en el Alojamiento Conjunto del Hospital de Clínicas de la Universidad Federal de Triângulo Mineiro - UFTM, en los meses de octubre a diciembre de 2010. Los datos fueron recolectados a través de un cuestionario y analizados por medio de frecuencia simple. Participaron del estudio 194 mujeres, mayores de 18 años, que fueron entrevistadas después de 6 horas del parto, en las 48 ó 72 horas de internación, en condiciones clínicas adecuadas. Fue posible identificar que la mayor parte de las madres ofrece cuidados de forma correcta y que el profesional de enfermería fue citado como agente orientador de los cuidados con el recién nacido durante el puerperio. Es fundamental la participación de las madres en los cuidados al recién nascido en el alojamiento conjunto y la orientación y auxilio de la enfermería en sus necesidades, dudas y miedos.

Palabras clave: Recién Nacido. Período de Postparto. Enfermería Materno infantil.

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