Simple Nursing Technique of Premature Babies

By Miss L.F.I. Crasta

SOME YEARS ago all babies less than 2,500 grams at birth were called premature babies, i.e., babies born before full term. Now it is realised that many such small babies are small even though the period of gestation is normal. They are small because of foetal malnutrition and other conditions in utero affecting the normal foetal growth. Many such babies also need such specialised care. Even though any baby less than 2,500 grams in weight can be categorised as "low birth weight baby" according to international standards, under Indian conditions babies weighing less than 2,000 grams can be arbitrarily grouped in this category. At the same time many babies weighing 2,000 grams do not need any elaborate specialised care. But many small low birth weight, mature and immature, babies need special nursing care for survival. It is well known that for such babies there are many excellent costly and complicated gadgets like Isolcts available in affluent countries. For our country we need a practical, simple and economical method of nursing care techniques for them. Keeping this in view I have developed a simplified care technique in the Institute of Child Health and Hospital for Children, Egmore, Madras.

The premature babies are nursed in "sorrento cots". These cots were slightly modified by me from the original ones used in the premature unit of Sorrento Maternity Hospital, Birmingham, England, to suit our conditions. The cots are made of metal and are easily disinfected. They are sufficiently deep to be draught proof and sufficiently wide to allow easy handling of infants. The cots are easily adjustable to three levels at either end by means of three pairs of hooks. (See Fig 1) Even the smallest infant can be cared for successfully in open modified sorrento cots. These cots can be heated easily and oxygen can be given by mask, hood, or tent.

Clothed infant must always be placed on its sides in the cot and never flat on its back because of the danger of inhalation of regurgitated material. In order to allow equal expansion of both lungs, it is a good rule to place the infant on its right during and after a feed and to turn it carefully over on to the left side midway between feeding times. With this exception, small feeble infants should be handled as little because of the danger of precipitating a cyanotic attack. After any alteration in position, the nurse must watch the infant carefully for at least a minute to ensure that she will be at hand if any harm has been done by the handling. Any necessary handling must take place before and not after a feed, if regurgitation is to be avoided.

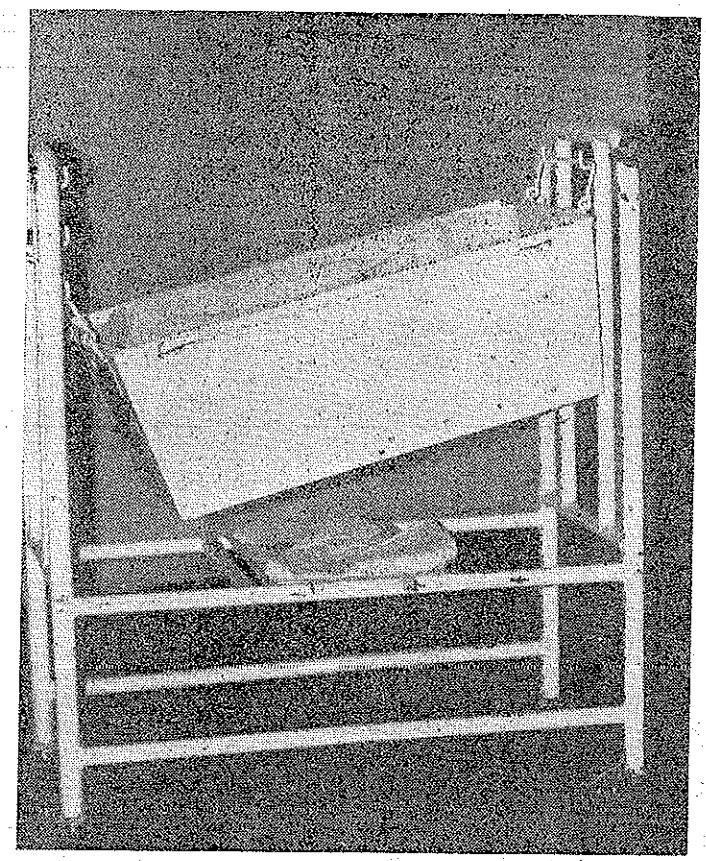

Fig. 1. Modified Sorrento Cot-Head-Side raised. Hooks on either ends at 3 levels with gown and hood

Miss L.F.I. Crasta retired as the Paediatric Nursing Tutor at the Institute of Child Health and Hospital for Children, Egmore, Madras. This unit is situated in the Women and Children Hospital.

Miss Crasta was responsible for the successful implementation of the plans of the Institute and she developed a special cot for nursing premature babies known as "Sorrento Cot" suitably modified to suit the Indian conditions. The model was later adopted by UNICEF.

She was one of the receipients of the National Award for Nurses in 1972.

This article is based on the nursing techniques of premature babies as practised in the premature unit of the Institute.