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Impact of Skin-to-Skin Care on Infants

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Skin-to-skin care is a beneficial low-cost intervention that should be included in hospital education programs and protocol when appropriate after the birthing process through the first year of life because of the proven valuable outcomes to the infants and families. Studies showed that skin-to-skin care showed a rise in physiological functions of temperature, oxygen saturation were increased; respiratory distress was decreased and heart rate stabilized. Behavioral status showed no significant response to the intervention of skin-to-skin care and nursing perspective provided insight on the challenges within implementation with the patients and medical staff as well as the need for education between everyone involved.

**Background**

Skin-to-skin care is early, continuous and prolonged skin-to-skin contact. Also known as kangaroo care (KC), this therapeutic procedure is when an infant is placed upright and directly on the mother’s chest. The goal of skin-to-skin care is to promote parent-infant bonding and facilitate lactation while maintaining physiologic stability and minimize energy expenditure (Ohgi et al., 2002).

**Methods**

- Search in Cinhal and Ebsco host
- Keywords: kangaroo care, infants, clinical outcomes, viability
- Time frame limited to 2009-2015
- All peer-reviewed articles
- Authors limited to nurses and medical professionals

**Sample**

- Five peer-reviewed research articles
- Found at West Chester University
- Our population consisted of all articles that related to skin-to-skin care effects on infants in any healthcare setting

**Purpose & Aims**

- To assess the effect of skin-to-skin care on infants
- Physiological effects
- Behavioral status
- To assess the nurses’ clinical perspectives
- Recognize barriers to the intervention

**What We Learned**

Three common themes were found including skin-to-skin cares’ impact on the physiological benefits and behavioral development of the infant as well as the perspectives of the nurses working with the infants and families.

**Results**

Skin-to-skin care is early, continuous and prolonged skin-to-skin contact. Also known as kangaroo care (KC), this therapeutic procedure is when an infant is placed upright and directly on the mother’s chest. The goal of skin-to-skin care is to promote parent-infant bonding and facilitate lactation while maintaining physiologic stability and minimize energy expenditure (Ohgi et al., 2002).

**Discussion**

- Nurses provided insight to the barriers faced in clinical settings against properly implementing skin-to-skin care.
- A rise in temperature regulation and oxygen saturation was found. Respiratory distress was shown to decrease and heart rate variability was found to stabilize.
- No significant impact was shown for behavioral development.

**Next Steps**

- Future research which studies the long term effects of skin-to-skin.
- Research of the practicality of skin-to-skin care in a variety of health care settings.
- Increased education for staff related to the benefits of mother and baby and increased resources for patient education.

**Limitations**

- Limited to participates a small samples of hospitals.
- Nursing perspective was only taken from a small number of nurses which may not be representative of others opinions.
- Ill infants were not included in the studies.

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