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Neonatal unit focuses on the human touch in providing care

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It seems an odd contrast: a prom photo of a young, smiling couple taped to the glass of an incubator sheltering a small, squirming newborn no bigger than your hand.

But for Coastal AHEC's Fernando Moya, M.D., medical director of New Hanover Regional Medical Center's Neonatal Intensive Care Unit, encouraging these kinds of contrasts - a family photo here, a special pillow there - gets at the heart of helping premature infants develop in a nurturing, family-focused environment.

"We not only need to build up the sophistication of what we provide medically, but we need to assertively incorporate more of the family," said Dr. Moya.

With more than 30 honors and awards for his research and pediatric education work, including being named Physician of the Year in 1999 at Houston's Memorial Hermann Children's Hospital, Dr. Moya, a national authority in neonatal medicine, has over the past two years not only increased neonatal care technology at NHRMC, which provides the region's only NICU, but has shed new light on the role of human touch in caring for premature infants.

To this end, Dr. Moya and the Neonatal ICU staff have implemented a developmental team of multi-disciplinary health care professionals to address the developmental and family needs of babies in their care. NICU Registered Nurses and Respiratory Therapists are dedicated to providing family-centered, developmentally supportive care and are delighted at the support Dr. Moya has shown for this care delivery model.

"Developmental needs include things like proper positioning and handling of babies by modifying the physical environment of the NICU, including decreasing sound levels and light exposure, and getting parents more involved in the care of their infant," said developmental psychologist Donna Vaught, who co-chairs the team.

As with most pre-term babies, creating womb-like conditions in the incubator is paramount. First steps for NICU team of nurses, doctors and a respiratory therapist include making space for a preemie to stretch, ball up, push and burrow. Proper positioning and support begins in the delivery room and continues throughout the infant's, often lengthy, stay in the NICU.

"The major focus of our developmental team to date has been on position," Vaught said. "In utero, our muscles develop because we move our limbs and push off the boundary of the mother's abdominal wall."

Absent these surfaces during incubation, babies can develop problems eating, sleeping and moving, not to mention feelings of isolation because they lack human contact, she said.

To fill this need, Dr. Moya and the developmental team introduced various positioning devices into the NICU, including the hour-glass-shaped "Froggy," the "Snuggle u\Up," and the widely used "Zaky."

The brainchild of Yamile Jackson whose son, Zachary, was under Dr. Moya's care at Houston's

Memorial Hermann Hospital, the Zaky infant pillow mimics in size, weight and touch a human hand and forearm. Uniquely, it's also designed to carry a mother's scent.

"The purpose of these products is to provide boundaries and containment," Vaught said. "In a sense we're simulating the womb."

Positioning preemies and involving parents isn't a practice alone confined to the incubator, however.

"A big part of positioning babies is encouraging 'kangaroo care,' or skin-to-skin contact between the infant and its parents," she said. "You take the baby and place it against the mother's or father's bare chest."

An RN is always close by to support and encourage parents as they cuddle their fragile baby. Parents often hold their babies for hours at a time, Vaught said.

"Research has found that infants who receive developmental care have a decreased number of intraventricular hemorrhages, ventilator days and hospital days," she said.

"We want to provide care where we engage parents more and help them during what is a very tense and stressful time," said Dr. Moya. "To me the developmental team is all about the human factor."

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