



## **The Significance of Skin Contact and Bonding**

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### **Brief Biography**

Specialist pediatric nurse, IBCLC and carrier consultant  
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### **Brief description**

For a long time we have known about the significance of skin contact and bonding. Unfortunately this knowledge is not sufficiently observed on many neonatal intensive care units. This lecture shows through pictures and case studies - how easy and helpful it is to bond – even premature infants.

### **Abstract**

For a long while, the opinion prevailed that the apparent passivity of the newborn was associated with his relevant undemanding nature. However, scientific studies and empirical knowledge show us that just the opposite is the case. With his birth, a human being experiences a profound change in his environment. A series of instinctive behaviors make orientation possible for him. Every experience, which does not conform to the pattern of expectation, leads to disorientation. In the still-malleable brain of the premature and newborn infant, such irritations can leave permanent damage. Thus it is important in dealing with these children that the child has adequate experiences promptly. Hormones play a significant role. Since the first signals of the child are solely directly at communication with his parents, physical closeness to them takes on a decisive significance.

### **Skin Contact on the Neonatal Unit**

If we are going to pay attention to evidence-based knowledge we must promote skin contact: kangarooing - lots of it, for long periods and direct skin to skin contact!  
From this approach, the idea and development of the kangaroo pouch developed: a simple and practical piece of clothing which improves kangarooing and makes its easier. I will show you this item of clothing and its possibilities, using a number of pictures from the daily routine on the unit



### **Primary Bonding on the Neonatal Unit**

It was considerably more difficult and more complex to implement primary bonding than to improve skin contact. Bonding of normal newborns in the delivery room may be recognize and oft also well-established. Bonding of premature and ill newborns was and is very controversial and overlaid with prejudices and anxieties.

Our experiences after about a year were, however, quite good. The babies often use the extended initial contact for the first contact with the breast which greatly eases the start of breastfeeding/lactation for all. The babies are more peaceful and more stable. Afterwards, the mothers seem to come more often and to stay longer. Using case studies, I will present the implementation of primary bonding in our neonatology unit to you.