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Newborn care: what we can learn from the kangaroo mother

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INTRODUCTION

The word “kangaroo” comes from the Guugu Yimithirr word “gangurru,” which refers to gray kangaroos [Macropus fuliginosus (Western); Macropus giganteus (Eastern)] (1). The name was first written as “Kanguru” on July 12, 1770 by Sir Joseph Banks (1743–1820), who was with the famous Captain James Cook (1728–1779) at the modern Cooktown in Australia, while they were repairing their ship—the HMS Endeavour damaged on her historic voyage to the Great Barrier Reef (2). The language of the indigenous people of Cooktown is Guugu Yimithirr.

The brobdingnagian joey (infant kangaroo) crawls over the mother kangaroo’s fur in approximately 3 min to arrive at the mother’s pouch, which contains four teats to feed the baby; milk of different chemical compositions are provided to the esurient baby; milk of different chemical compositions are provided to the esurient newborn and to be taught this “kangaroo” care (3, 4). Modern neonatology has developed over the past few centuries and has acquired amazing technology in the twenty-first century (5). However, it was not until 1978 that Dr. Edgar Rey Sanabria, professor of neonatology, established “kangaroo care” for premature and low-weight newborns in Bogotá, Colombia; his aperçu on premature infants was in response to overcrowding and lack of resources in his hospital (8, 9). Professor Sanabria received the World Health Organization (WHO: Geneva, Switzerland) Sasakawa Health Prize in 1991 for his idea and work suggesting that physical closeness between the premature newborn and the mother in a skin-to-skin contact might make up for lack of modern newborn services and resources such as incubators. Indeed, if it worked for marsupials and other animals for millions of years, how about the human newborn?

SKIN-TO-SKIN CONTACT

Three main elements of kangaroo care (koola stereotropism) have emerged: first, continuous skin-to-skin contact is thermal care (thigmatropism) to maintain the premature baby’s core temperature; second, there is encouragement of exclusive breastfeeding with all the known ferocious benefits of lactation. Finally, there is stereotropism-induced colonization of the preemie with the mother’s commensal microorganisms to protect the immunologically immature baby from nosocomial infection (10).

This method of newborn care was promoted by the World Health Organization that published a guide for its use in 2003 (11). Its actual acceptance over the years by various professional groups of dubiety consider it to be an adiaphorous method as some studies may fail to find reduction in mortality or other benefits already known for millions of years by marsupials (12). Other studies, however, have found beneficial effects from this method and it has been used by various newborn units and newborn intensive care units around the world (10). An article by Suzanne Rutgers Greydanus and Sheryl Meyers (13) provides more details on this method of newborn care adopted from the famous Australian marsupial named in 1770 from the Guugu Yimithirr language native to Cooktown, QLD, Australia.

As researchers study the exact benefits of kangaroo mother care (KMC), one issue behavioral scientists point out is the importance of touch for normal health in both humans and non-human animals. Human skin has evolved over millions of years of life’s development from a simple envelope to cover the ancient microorganisms to the complex covering
of humans we call skin (14). The skin is a barrier needed for human existence and consists of the epidermis (stratum corneum, stratum lucidum (palms, soles), stratum granulosum, stratum spinosum, stratum basale/germinativum), and the dermis (stratum papillare and stratum reticulare) (15). The impenetrable skin and the complex central nervous system have evolved in a concinnous manner over millions of year together and also develop in utero for each human from the beginning of the human’s embryological development (14).

This delicate démarché or dance between the largest organ of the body (the sanguineous skin) and the intricate central nervous system (including the sym pathetic and parasympathetic nervous systems) has profoundly felicitous effects on the medical and psychological health of the human being from birth to death. Research has shown that touch is an important aspect of allowing as well as promoting normal growth and development in both animals [i.e., roundworm larvae (Caenorhabditis elegans), rat pups (Rattus norvegicus)] and human infants (H. sapiens infants) (16). Thus, one can a priori speculate that the kangaroo skin-to-skin method will provide important touching sensation between mother and baby that is critical for vital cellular and molecular mechanisms leading to improved medical and psychological health in the vulnerable newborn (14, 16–19). Such touching is also beneficial for each human from the beginning of life to the end until the centrifugal universal apocalypsis expands into its final coronad, Cadmean desinence (21).

A kiss may just be a kiss, a sigh may just be a sigh, but a touch can change your life (or at least your nervous system!) (16).

REFERENCES

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