



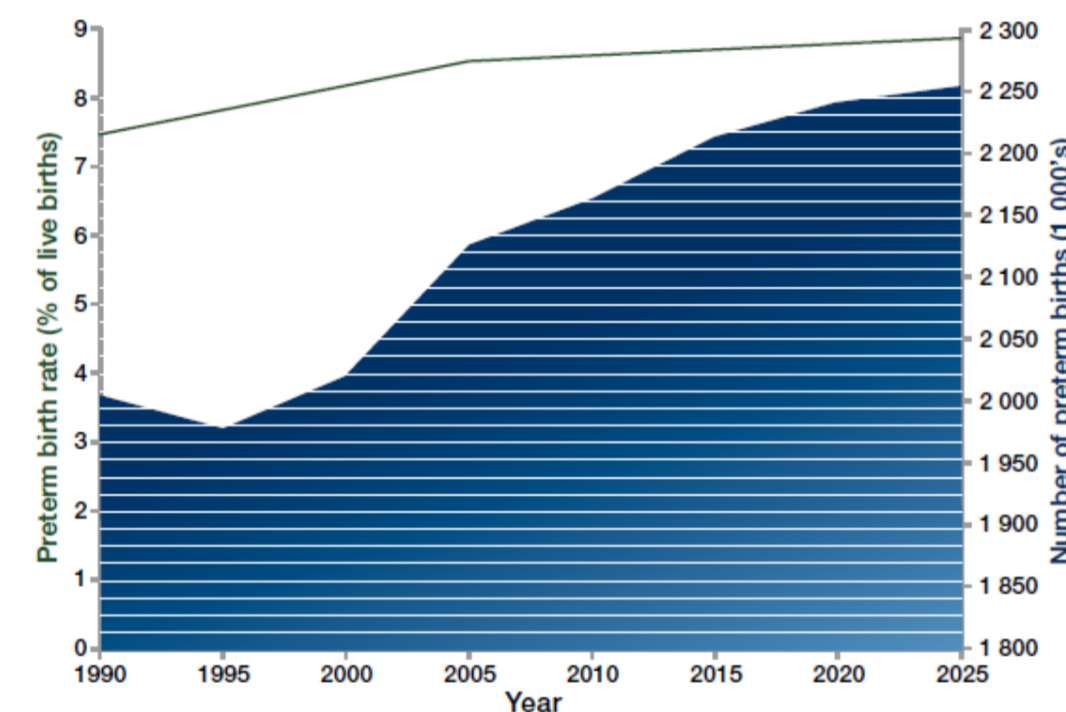
PRETERM BIRTH VERSUS NEONATAL PAIN CHALLENGES FOR ORGANIZATIONS AND HEALTH TEAMS

MARIA DULCE DAMAS DA CRUZ, MD¹; ANANDA MARIA FERNANDES, PHD²



Background: Preterm birth rates have increased in nearly all countries, WHO estimated 15 million preterm births, with 1 million deaths directly relating to prematurity. Premature births pose difficult challenges to parents, doctors and society at large, as premature babies often face a higher risk of lifetime disability, requiring lifelong care and medical support.

Figure 2.6: Time trends in preterm birth rate for regions with adequate data (Developed, Latin America and Caribbean) projecting to 2025 assuming the average annual rate of change from 2005 to 2010 is maintained



Source: March of Dimes, PMNCH, Save the Children, WHO. Born Too Soon: The Global Action Report on Preterm Birth. Eds CP Howson, MV Kinney, JE Lawn. World Health Organization. Geneva, 2012.

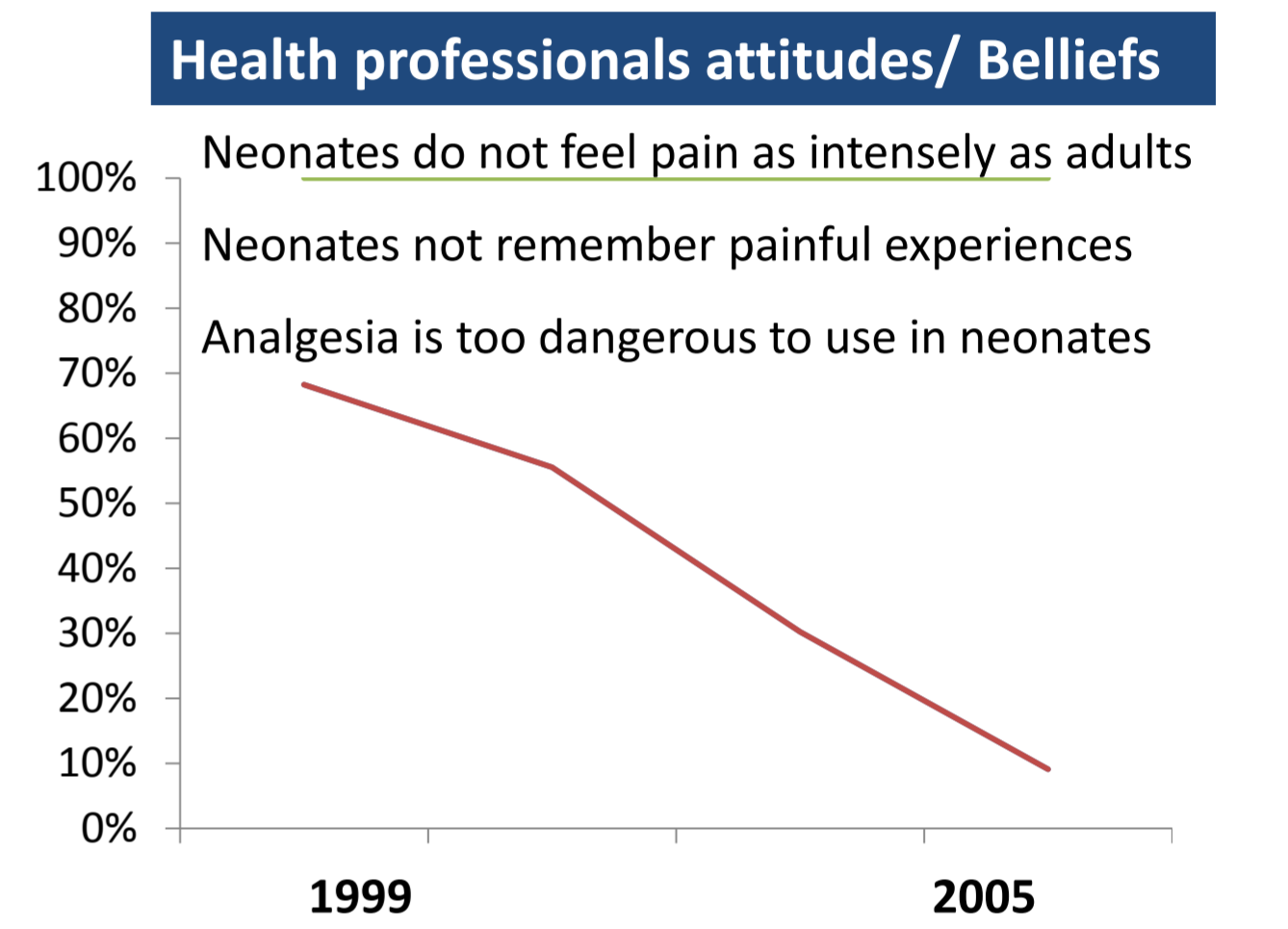
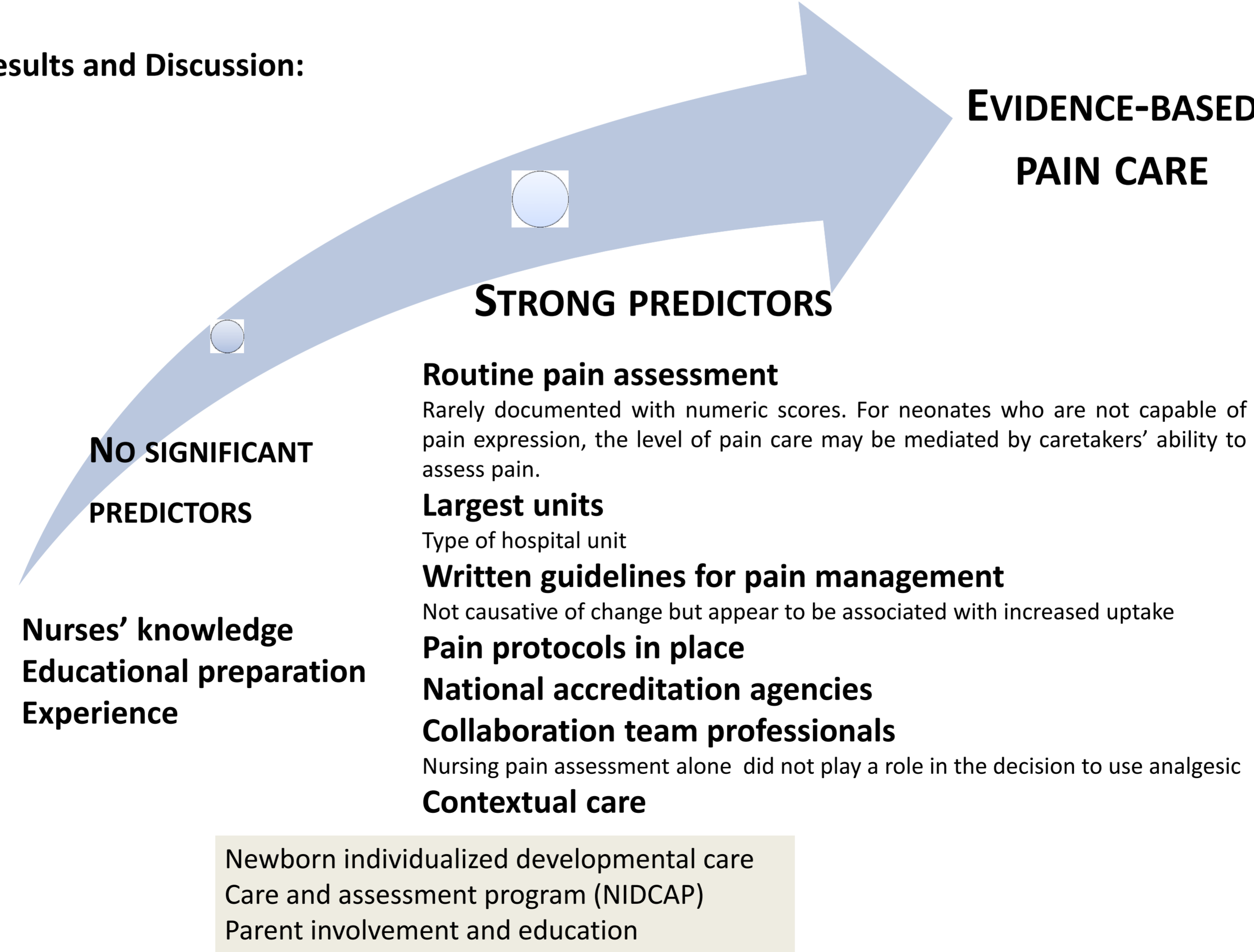
Newborn babies are admitted into a Neonatal Intensive Care Unit (NICU). The NICU combines advanced technology and trained healthcare professionals to provide specialized care. During hospitalization each preterm was exposed to an average of 12 painful procedures daily and 79,2% of these procedures were performed without specific analgesic. The effective pain management is crucial to minimize the association between pain and negative physiologic, emotional and psychological consequences. There is a wide and recent variety of published literature regarding the importance of assessing and reducing pain in infants during procedures and demonstrating the efficacy of various pain reduction strategies. Most neonatal units do not regularly undertake pain assessments, do not have an articulated policy to guide pain management for infants during procedures, and do not routinely use effective pain reduction strategies during procedures.

HOW PAIN MANAGEMENT CAN BE IMPROVED? AIM OF THIS STUDY: IDENTIFY PREDICTORS WHICH IMPROVED PAIN MANAGEMENT IN PRETERM INFANTS

Methods: The following databases were searched: MEDLINE, EBSCHO, B-On (last ten years). No language restrictions were applied. References from studies identified in the search and reviews of the topic were hand searched for additional articles. Unpublished studies and studies published in abstract form only were not included. Most studies were excluded by examination of title or abstract.

Key words: management pain, neonate, newborn, practice change, organizational factors

Results and Discussion:



Conclusion: Health professionals working in neonatal care have a responsibility to ensure that best evidence is utilized in the assessment, management and reduction of pain in hospitalized newborn infants. Changing the behavior of health care professionals is complex and challenging.

While we have growing evidence base, knowledge does not appear to be efficiently translated into practice. Effective interventions can take a long time to become common practice. Promoting the evidence-based practice findings is important to increase professional care involvement.

Future research directions: Effective **KNOWLEDGE TRANSLATION** could help to bridge this know-do gap in global health.

¹ PhD Student, Professor Adjunto, Escola Superior de Enfermagem, Universidade de Évora dcruz@uevora.pt

² Professor Doutor, Professor Coordenador, Escola Superior de Enfermagem de Coimbra

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