



ORIGINAL ARTICLE

Decrease of premature mothers' stress levels in the intensive care unit[☆]



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Abstract

Objective: To determine the effectiveness of the 'Creating Opportunities for Parent Empowerment' (COPE) programme in reducing stress levels in mothers of preterm infants in the neonatal intensive care unit (NICU).

Methods: Clinical trial performed in Colombia, including mothers of infants younger than 34 weeks of gestation, hospitalized, without a history of premature delivery. The mothers with psychiatric illnesses, language disorders, history of use of psychoactive substances and whose newborns had a congenital malformation were excluded. A group intervened with the COPE programme and a control group with the usual institutional management were formed. Block randomisation and masking was used for mothers and evaluators. The parental stress scale was applied: NICU; Shapiro–Wilk normality test, Wilcoxon test and covariance analysis (ANCOVA) with a significance level of $p < .05$, 95% CI.

Results: 66 mothers were enrolled. The two groups were similar in their demographic characteristics and in the initial stress level score. The control group increased the final stress score in two categories and the intervention group decreased final values in all categories. The initial and final scores of the overall general stress level showed a significant decrease ($p < .01$), but when comparing with the ANCOVA analysis there was no significant difference ($p = .4$).

Conclusions: The COPE programme reduces the level of maternal stress, strengthening aspects during hospitalisation, such as: emotional support, strengthening their role as caregivers and interaction with their babies and the development of a friendly environment in the NICU.

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PALABRAS CLAVE

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madre-hijo

Disminución del nivel de estrés en madres de prematuros en la unidad de cuidados intensivos**Resumen**

Objetivo: Determinar la eficacia del programa «*Creating Opportunities for Parent Empowerment*» (COPE) en la disminución del nivel de estrés en madres de prematuros en la unidad de cuidado intensivo neonatal (UCIN).

Métodos: Ensayo clínico realizado en Colombia en el cual se incluyeron las madres de recién nacidos menores de 34 semanas de gestación, hospitalizados, sin antecedentes de hijos prematuros. Se excluyeron las madres con enfermedades psiquiátricas, trastornos del lenguaje, antecedentes de consumo de sustancias psicoactivas y cuyo recién nacido tuviera malformación congénita. Grupo intervención con el programa COPE y grupo control con el manejo usual institucional. Asignación aleatoria por bloques y enmascaramiento para madres y evaluadores. Se aplicó la Escala de Estrés Parental: UCIN. Se realizó la prueba de normalidad Shapiro Wilk, el test de Wilcoxon y análisis de covarianza (ANCOVA), con un nivel de significación de $p < 0,05$ e IC del 95%.

Resultados: Participaron 66 madres. Los dos grupos fueron similares en sus características demográficas y en la puntuación del nivel de estrés inicial. El grupo control aumentó la puntuación final de estrés en dos categorías y el grupo intervención disminuyó valores finales en todas las categorías. La puntuación inicial y final del nivel de estrés general total mostró disminución estadísticamente significativa ($p < 0,01$), pero al realizar la comparación mediante el análisis ANCOVA no hubo diferencia significativa ($p = 0,4$).

Conclusiones: El programa COPE disminuye el nivel de estrés materno, fortaleciendo aspectos durante la hospitalización como son: el apoyo emocional, el fortalecimiento de su rol como cuidadoras, la interacción con sus bebés y el desarrollo de un ambiente amigable en la UCIN.

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What is known?

We know from several studies that mothers of hospitalised preterm infants suffer high levels of stress, and that if this stress is not appropriately managed it can lead to mental disorders, principally anxiety and maternal depression, which affects the development of their children.

What does the paper contribute?

This study offers results on the efficacy of an educational programme to reduce stress levels in premature mothers, bearing in mind emotional support, strengthening their carer role and their interaction with their babies.

Implications of the study

For clinical practice, it is essential that healthcare personnel in neonatal intensive care units intervene in reducing the stress levels caused by hospitalisation,

which has a negative effect on the mother's mental health, and consequently on the wellbeing of the preterm infant.

Through teaching, as part of their academic programmes, student nurses need to learn about these types of interventions to reduce stress levels, and should be able to use them during their training.

Through management, programmes that reduce the parental stress of preterm infants in Spanish-speaking countries should be implemented. These have been shown to reduce days of hospital stay, and consequently reduce costs.

In research, studies must continue to be undertaken that demonstrate the efficacy of interventions in situations of high levels of stress, for mothers of twin births, and of infants with congenital malformations, for example.

Introduction

We know more about the causes of premature births, and great advances have been made in prenatal care, but this has not been sufficient to reduce the number of premature births. On a global level, the incidence of premature births

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