

Saving the Littlest!

Maham Nadeem*

*Riphah International University, Pakistan.

Received August 09, 2022; Accepted August 15, 2022; Published August 18, 2022

ABSTRACT

This letter-to-the-editor gives us a sneak-peak of preterm births in Pakistan. Pakistan, being a low-income country struggles with poor maternal and child health outcomes. Therefore, multiple contributors put mothers and babies at a greater risk. The most vulnerable preemies belong to rural areas, where poor maternal nutrition and limited health care accessibility have raised the number of preterm births in the country. Despite the efforts regarding neonates in local hospitals, the entire nation faces major challenges pertaining maternal and child health. Health professionals being observant of their oath, to save mothers and children are unable to cater the situation with limited resources at hand. This requires special attention and interventional strategies to achieve substantial improvement in the health sector of Pakistan. However, public health enforcement laws regarding child healthcare needs instant implementation across the country to increase survival rate of premature babies.

Keywords: Neonatal morality, Preemies, Preterm birth, Mother and child health, Kangaroo mother care

Pakistan remains among the dangerous low-middle-income nations for childbirth. Preterm births fueled by a massive health equity gap in Pakistan put women and babies at a greater risk. Globally, preterm birth acts to be a substantial contributor to under-five mortality. A baby born at less than 37 weeks of gestation requires antenatal hospitalization and becomes the leading cause of neonatal mortality. As UNICEF reports, an estimated 860,000 premature births are recorded each year in Pakistan [1].

Approximately 102,000 babies die due to complications including respiratory distress, congenital malformations, and sepsis [2]. Another contributor includes the under-served masses having poor nutrition and limited health accessibility. Women of these areas with low BMI were at a higher risk of preterm birth [3]. Also, the past practice of separating the sick babies from their mothers led to poor neonatal health outcomes.

Many programs were integrated into the Pakistani health system without systematic evaluation of newborn components. Despite the efforts, why newborn survival is still lagging? This remains a questionable matter for all of us. Were the health policies inadequate or their implementation was incomprehensive? Given the circumstances, UNICEF along with Ministry of National Health Services, Regulations, and Coordination took the initiative to spread awareness regarding prematurity crisis in the country during November 2021 which acted as a driving force for improvising mother and child care [3]. The theme

was “Zero Separation Act Now! Keep parents and babies born too soon together”.

Kangaroo mother care became increasingly popular and gaining pace among the health professionals working for preterm babies in Pakistan [4]. An approach in which the baby is kept close to the mother’s chest wrapped in a blanket. Being a pharmacist at Medicare Hospital, Rawalpindi, I came across families who shared an unspoken connection through their maternal wins and losses. Under the supervision of Dr. Imran, I observed the scaling up of kangaroo mother care (KMC) among critically ill babies in neonatal intensive care unit. Many babies benefitted from this approach due to physical and emotional closeness with their mothers in comparison to babies who were kept in the incubators alone, as shown in the **Figure 1**.

Corresponding author: Maham Nadeem, Riphah International University, Pakistan, Tel: +92-324-5317171; E-mail: mahamndm15@gmail.com

Citation: Nadeem M. (2023) Saving the Littlest! Arch Obstet Gynecol Reprod Med, 6(1): 175-176.

Copyright: ©2023 Nadeem M. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.



Figure 1. Preterm baby kept with the mother, following kangaroo mother care approach, for better health outcomes.

Despite the efforts regarding neonates in the local hospitals, we still face challenges like unstable political insurgency, raised poverty, and hard-to-reach rural masses [4]. Poor nutrition of pregnant females requires special attention and interventional strategies to achieve substantial improvement level. Health professionals being observant of their oath to save mothers and children are unable to cater the situation with limited resources at hand [5].

However, public health enforcement laws regarding child health care needs instant implementation across the country to increase survival rate of premature babies. Community-based awareness and basic health centers equipped with KMC might serve the purpose, but a lot more is required to improve the quality of care for mothers and newborns in the country. Hopefully, we will ace it in not too distant future!

REFERENCES

1. UNICEF (2022) Global goals for health and wellbeing cannot be achieved without reduction in preterm births and child deaths.
2. Khan A, Kinney MV, Hazir T, Hafeez A, Wall SN, et al. (2022) Newborn survival in Pakistan: A Decade of Change and future implications. Health Policy Plan 3: iii72-iii87.
3. UNICEF (2021) Preterm Birth Complications is one of the Main Causes for Under Five Child Mortality in Pakistan.
4. UNICEF (2017) Kangaroo Mother Care helping preterm babies survive.
5. Furdon SA (2022) Prematurity. Practice Essentials, Background, Pathophysiology.