

Information about the Interview

Inviting for...



- Nurses with additional qualification in a tactile-kinesthetic method such as baby massage, rhythmic massage or kinesthetic-infant handling
- With professional experience in a neonatal intensive care unit

What about?



- For a professional interview on the topic: tactile-kinesthetic methods to promote feeding tolerance and stool excretion in the small premature baby



With whom?

- Natalie Hurst, NICU Nurse
- Qualification in Cranio-Sacral Therapy, Rhythmical embrocation to Wegman/Hauschka (IFAN), Kinesthetics infant handling
- Student of the Early Life Care Program in Salzburg-Austria
- Working as a Neonatal Intensive Care Nurse at the University Children's Hospital Tuebingen, Germany

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EXPERTS' INTERVIEW

*Tactile–kinesthetic
methods to promote
feeding tolerance and
stool excretion in the
small premature infant*



**PARACELSUS
MEDIZINISCHE
UNIVERSITÄT**

early life care  **ST. VIRGIL**

Developing Nursing Care

Dear nursing expert,

as part of my master's thesis, which I am writing at Paracelsus Medical University Salzburg in the Early Life Care program, I would like to ask you as an expert about your experience and knowledge on the topic. The topic of the master thesis deals with

Tactile-kinesthetic methods to promote enteral food build up and meconium excretion in the small premature infant.

From the literature review on the use of tactile-kinesthetic methods, such as massage or kinesthetic infant handling to promote gastrointestinal passage in the preterm infant under 1500g (VLBW=Very Low birth weight), no evidence-based statement can currently be derived. Therefore, I would like to use a qualitative research approach to capture your expertise as a neonatal nurse specialist with training in tactile kinesthetic methods. The aim of the expert interview would be to make your knowledge visible in order to possibly derive recommendations for action from it and to research it further.

Problem description

Rapid enteral feeding of small preterm infants with very low birth weight (VLBW) reduces the incidence of intestinal mucosal atrophy and promotes the secretion of digestive enzymes and growth factors (Thoene & Anderson-Berry, 2021; Walsh, Brown, Copperthwaite, Oddie, & Mc Guire, 2020). Early enteral feeding reduces the window of parenteral nutrition, and thus the risk for the occurrence of catheter sepsis (Embleton & Simmer, 2014). However, the immaturity of the intestine, as well as any concomitant diseases, pose challenges for enteral nutritional buildup in the preterm infant. Slowed gastrointestinal passage, indicated by increased gastric residuals, vomiting, abdominal tension, and delayed excretion of meconium, can delay enteral nutritional buildup. (Mihatsch, Franz, Lindner, & Pohlandt, 2001; Shim, et al., 2007; de Pipaón Marcos, et al., 2012).

One Nursing intervention in such cases is abdominal massage (AM), which could partially show positive effects on the mentioned parameters (Seiedi-Biarag & Mirghafourvand, 2020). However, in VLBW, negative effects, such as the occurrence of volvulus without malrotation (VWM), were described after AM (Karkaneh, et al., 2020). This represents a life-threatening event for the premature baby (Schmittenbecher & Kosch, 2021), which is why AM has been discontinued in some clinics (Yarkin, Maas, Franz, Kirschner, & Poets, 2019). Since the efficacy of measures such as enemas, intestinal tubes, and application of laxative drugs has also not been confirmed, and negative side effects are discussed (Kamphorst, Sietsma, Brouwer, Rood, & van den Hoogen, 2016; Burchard, et al., 2022), it seems reasonable to research safe tactile-kinesthetic nursing methods to improve the gastrointestinal passage.

Research question

The hypothesis is that the occurrence of VWM is related to the way AM is performed and that a gentler performance could prevent VWM from occurring. Furthermore, that tactile-kinesthetic nursing intervention without direct abdominal stimulation, like whole-body massage could have similar effects on food tolerance and meconium excretion as direct abdominal stimulation.

What is your assessment to the topic?

- Which tactile-kinesthetic methods do you use to improve nutritional food build-up and stool excretion?
- What is the background of the using method?
- What effects have you observed with the method you use?

I would be very pleased to hear your expertise on the topic and sincerely invite you for an interview in person or via video conference. I would be very pleased to hear from you via email (natalie.hurst@med.uni-tuebingen.de)

Kind regards Natalie Hurst

Protection of your data

The interview will be audio-recorded and then transcribed anonymously. The audio recording will then be deleted. Only your professional training data will be used (job title, experience in neonatology, specialization). Your name and the location of the clinic where you work will not be recorded to preserve your anonymity. The interview will only be assigned to the respective European country.