

Kangaroo Care in the NICU

What is Kangaroo Care?

KANGAROO CARE (KC) is the name given to placing a baby skin-to-skin on their mother or father's chest. This helps you and your baby bond and feel closer to each other. This also provides comfort to your baby, helps your baby sleep, and be more stable. This gives the baby a sense of security similar to what a kangaroo mother gives the joey. There are no physical risks to the preterm babies.

Why Kangaroo Care?

Kangaroo care was first done in Bogota, Columbia as a way to send premature babies' home with their parents sooner. The idea of KC was then taken to Sweden. There it was used to help parents spend time holding their infant.

Kangaroo care has been studied in Sweden and the United States. It has been found to be safe and helpful to the premature baby. Studies have shown that babies doing KC gain weight more quickly, breathe better, go home sooner, and have better brain growth. It can also help in starting breastfeeding earlier and can help babies digest milk better. Parents who have done KC have enjoyed the time they have spent so close to their baby. For many it is the first time they have felt like parents since the birth of their child. Overall, KC is the best place for babies to be.

Can my baby have Kangaroo Care?

Any baby who is medically stable is able to do KC. The baby may be on oxygen or other breathing support. Your baby's nurse will work with you to decide when your baby is ready to try KC. Babies who weigh less than 1000 grams can only come out of their incubator during KC. They are not able to keep themselves warm unless they are in contact with your skin. These babies should also wear a hat when doing KC.

How is Kangaroo Care done?

Parents, with the help of nurses, will decide when KC can be done. The baby must be stable before KC starts. Baby is dressed only in a diaper. Baby is placed head up between mother's breasts or father's chest – skin-to-skin. A blanket should be used to cover the baby's back. Your baby's heart rate and oxygen levels will be watched during KC; they often improve. If your baby is ready, breastfeeding may be done during KC sessions. Discuss this with your baby's nurse.

Ideally, KC should be done for at least one hour so the baby can have one full sleep cycle. If the baby has trouble being moved and does not recover within 15 minutes they will gently be moved back to bed. KC can be tried another day when the baby tolerates being handled better.

What should I do to prepare for Kangaroo Care?

Wear a loose-fitting shirt that opens down the front. Use the washroom if you need to. Remove your bra. Wash your hands. Have a drink of water close. Your baby's nurse will help you place the baby on your chest.

What are the benefits of KC?

For you:

- the chance to be close, with skin-to-skin contact
- increased milk production
- decreased chance of postpartum depression

For your baby:

- better weight gain
- fewer apnea spells
- skin-to-skin contact with you
- better sleep
- better brain development

When you KC your baby, your body makes milk to protect your baby

- Your body is able to recognize germs that are on or around your baby
- Your body then starts making cells to fight those germs
- Those germ-fighting cells move into your breast milk
- When your baby gets your breast milk, it helps them to fight those germs
- The more often you KC your baby, the easier it is for your body to do all this

How long should we do KC?

Ideally, we suggest doing KC for at least 2 to 4 hours every day. It can be done longer if both the baby and the parent are comfortable. Babies born early should get KC every day for up to 12 months. Baby born near their due date should get KC every day for up to 3 months.

When doing KC at home, always be sure that your baby will be safe. It should be done during the day in a seat such as a large chair that is safe for both you and your baby. You should not plan to sleep with your baby. Make sure that your baby is secure on your chest.

Some parents have said...

"I used to be worried of what I would see or hear in the nursery, but as I learned to feel my baby get stronger in the KC position, I started to visit the baby more often because it was not a scary place anymore."

"I used to feel my baby had to be monitored by the machines or it might die without it. But as I saw and felt my baby doing well on my breasts, I now know the machines are there to help the nurses when I'm not here to put the baby in this KC position."

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