Effect of Lullabies on Babies Growth and Development, Vital Signs and Hospitalization Times in the Neonatal Intensive Care Units

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Abstract: Objective: This study was carried out with an experimental design in order to determine whether the lullaby, which was listened from mother's voice and a stranger's voice to the babies born at term and hospitalized in neonatal intensive care unit, had an effect on saturation values (SpO2), peak heart rate (PHR), respiration, fever, growth and development and hospitalization times of the infants. Method: Data from the study were obtained from 90 newborn babies who were hospitalized in Neonatal Intensive Care Unit of Zonguldak Maternity And Children Hospital between September 2015-January 2016 and who met the eligibility criteria. Lullaby concert was performed by choosing one of the suitable care hours. SpO2, PHR, respiration, fever, growth and development and hospitalization times of the infants were recorded by the researcher on "Newborn response follow-up form" at pre-care and post-care. Vital signs of babies every day, weight, height and head circumference measurements at admission, weakly rated at an output. Results: In the experimental and control groups, like weight, height and head circumference anthropometric measurements were not found statistically significant difference intensive care units admission and output times. Hospitalization times on babies who listen to lullaby mother's voice revealed statistically significant difference according to babies who listen to lullaby stranger's voice. Before care and after care were examined, SpO2 rates of babies who listen to lullaby mother's voice revealed statistically significant higher difference according to babies who listen to lullaby stranger's voice and control group babies. Before care on PHR of babies in three groups were not found the statistical difference, but aftercare, it was found that statistically lower (normal range) on babies who listen to lullaby mother's voice according to babies who listen to lullaby stranger's voice. Before care in three groups were not found the statistical difference on respiration values of babies, but aftercare, it was found that statistically lower (normal range) on babies who listen to lullaby stranger's voice according to babies who listen to mother's voice and control groups. Before care and after care were examined, fever signs did not reveal statistically significant difference in three groups. Conclusion: Lullaby concerts as being normal ranges of vital signs of infants and also helping to shorten hospitalization times should be preferred in the neonatal intensive care units.

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