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NOTE PREVIEW ARTICLE

REBUILDING THE PRENATAL OF WOMEN MOTHERS OF RISK NEWBORNS: NOTE PREVIEW

RECONSTRUINDO O PRÉ-NATAL DE MULHERES MÃES DE RECÉM-NASCIDOS DE RISCO: NOTA PRÉVIA

LA RECONSTRUCCIÓN DEL PRENATAL DE MUJERES MADRES DE RECIÉN NACIDOS EN RIESGO: NOTA ANTERIOR

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ABSTRACT

Objective: understanding the trajectory of women who underwent prenatal care and had their children in the Neonatal Intensive Care Unit. **Method:** a descriptive exploratory study of a qualitative approach with mothers who had children in the Neonatal Intensive Care Unit. Data collection will be through semi-structured interview. The data produced will be submitted to Analysis Technique of Thematic Content. The project was approved by the Research Ethics Committee, CAAE: 31103114.2.0000.5346. **Expected results:** in addition to the contribution to the construction of knowledge in neonatal nursing, it is expected to improve prenatal care, parturition and birth. It seeks quality care in these areas, in order to facilitate the birth of a child without complications, contributing for the improvement of neonatal morbidity and mortality rates. **Descriptors:** Prenatal Care; Nursing Care; Neonatal Intensive Care Units; Newborn.

RESUMO

Objetivo: compreender a trajetória de mulheres que realizaram o pré-natal e tiveram seus filhos internados na Unidade de Terapia Intensiva Neonatal. **Método:** estudo descritivo exploratório com abordagem qualitativa, com mães que tiveram os filhos internados na Unidade de Terapia Intensiva Neonatal. A coleta de dados será por meio de entrevista semiestruturada. Os dados produzidos serão submetidos à técnica de Análise de Conteúdo Temática. O projeto foi aprovado pelo Comitê de Ética em Pesquisa, CAAE 31103114.2.0000.5346. **Resultados esperados:** além da contribuição para a construção do conhecimento em enfermagem neonatal, espera-se a melhoria do acompanhamento pré-natal, parto e nascimento. Busca-se a assistência qualificada nesses âmbitos a fim de propiciar o nascimento de uma criança sem complicações, contribuindo para a melhoria dos índices de morbimortalidade neonatal. **Descritores:** Cuidado Pré-Natal; Cuidados de Enfermagem; Unidades de Terapia Intensiva Neonatal; Recém-Nascido.

RESUMEN

Objetivo: comprender la trayectoria de las mujeres que se sometieron a la atención prenatal y tenían a sus hijos en la Unidad de Cuidados Intensivos Neonatales. **Método:** un estudio descriptivo exploratorio con un enfoque cualitativo, con madres que tenían hijos en la Unidad de Cuidados Intensivos Neonatales. La recolección de datos será a través de entrevista semi-estructurada. Los datos producidos serán sometidos a la técnica de Análisis de Contenido Temático. El proyecto fue aprobado por el Comité de Ética en la Investigación, CAAE: 31103114.2.0000.5346. **Resultados esperados:** además de la contribución a la construcción del conocimiento en enfermería neonatal, se espera que para mejorar la atención prenatal, parto y el nacimiento. Buscando a una atención de calidad en estas áreas con el fin de facilitar el nacimiento de un hijo sin complicaciones, lo que contribuye a la mejora de las tasas de morbilidad y mortalidad neonatal. **Descriptores:** Cuidado Prenatal; Cuidados de Enfermería; Unidades de Cuidados Intensivos Neonatales; Recién Nacido.

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INTRODUCTION

In recent years, Brazil has advanced in childbirth care policies and the birth, but the reduction of maternal and infant morbidity and mortality remains a challenge for the country. In the interest of reducing the number of maternal and infant complications and premature birth, prenatal is a means quite effective, contributing to the development of healthy pregnancy and birth. Data from the Information System on Live from Rio Grande do Sul (SINASC/RS) indicate that in the period 2011 the city of Santa Maria-RS, had a total of 3.540 live births (NV - born alive), including 361 low NV weight 70 NV very low birth weight, 41 deaths and 18,4% of NV were born prematurely. The vaginal parturition rate was of 34,7%, cesarean parturition was of 65,3%. With regard to prenatal consultations, it amounted to 62,3% of pregnant women with seven or more visits¹.

Whereas there are public policies that ensure adequate prenatal care, added to existing policies in the country, the problem may be related to early prenatal care, the achievement of best practices, the characteristics of mothers and their newborns².

Prenatal care quality is an important strategy in reducing maternal and perinatal mortality since pathologies during pregnancy and postpartum period can be diagnosed early and treated and/or controlled in order to prevent complications with regard to the binomial mother and son. It should be developed in an individualized way and always looking for quality and solvability of the process of health care for the woman and the fetus^{3,4}.

Regarding the morbidity and mortality of newborns (NB) admitted to the Neonatal Intensive Care Unit (NICU) of a teaching hospital from 2002 to 2006, 63,2% of infants had some kind of complications at birth. The main mode of delivery was cesarean, representing 59,6% and 67,4% of infants were born prematurely. It is noteworthy that 80% of women admitted risk newborns of mothers had six or more prenatal consultations.⁵

The implementation of health programs has been encouraged by the Ministry of Health in this sense the Program for Humanization of Prenatal and Birth (PHPN), has contributed to the reduction in rates of prematurity. However, the program's coverage and adhesion of pregnant women to prenatal appointments still need to be improved, since they are poor in much of the country⁶.

As a strategy for reducing child mortality in the neonatal period, it emphasizes the importance of largely prepared through continuing education on prenatal care and newborn nurses, based on the appropriate technical and scientific knowledge⁷.

It is believed that nursing care in prenatal enables the development of health education actions, so that the complaints are reduced in this period. Thus, the prenatal is a time of close of nursing with the pregnant woman, making it possible to perform preventive care for mother and newborn.

Thus it was formulated the following research question: "What is the trajectory of women who underwent prenatal care and had their children hospitalized in a Neonatal Intensive Care Unit?"

OBJECTIVES

- Understanding the trajectory of women who underwent prenatal care and had their children admitted to the Intensive Care Unit Neonatal/NICU;

- Characterizing the route of prenatal women and their newborns at risk for clinical and sociodemographic characteristics;

- Describing the route developed by women mothers, since the discovery of the pregnancy until the birth of a newborn's risk.

It is a descriptive-exploratory study of a qualitative approach. In qualitative research works with the universe of meanings, motives, beliefs and values, comprises the description and analysis of reality in different ways, to represent the experiences lived by the people or the experience of a particular phenomenon⁸.

Study subjects will be about 15 mothers who had their children admitted to the NICU. The inclusion criteria are: mothers of newborns admitted to the NICU of risk in the data collection period; have carried out the delivery at the institution; have brought with prenatal care at least six visits as recommended by the Health Ministry and exclusion criteria: mothers with cognitive problems that impede the effectiveness of the interview.

The study setting will be the ICU of the University Hospital of Santa Maria (HUSM). This is characterized as a teaching hospital and tertiary health care that is in reference to all the central region of Rio Grande do Sul.

Data collection will be given by means of semi-structured interviews, in order to give voice to the study subjects, triggered from the statement "Talk about its history since the discovery of pregnancy until birth". The

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interview will be recorded, and will be held a pregnant woman's license photograph to have all the prenatal and data together in one collection records data production will be through the Thematic Content Analysis³.

This research will follow the ethical principles of human research. The participation of teenage mothers in the study, to these will be presented a term of nod and legal guardian with a free and informed consent form. The project was approved by the Research Ethics Committee of the Federal University of Santa Maria, on the Presentation of Certificate number to Ethics Assessment (CAAE): 31103114.2.0000.5346.

EXPECTED RESULTS

Besides the contribution to the construction of knowledge in neonatal nursing, it is believed the implication of improved prenatal care, parturition and birth. In addition, we seek a qualified assistance in these areas in favor of promoting the birth of a child without complications, contributing to the improvement of neonatal morbidity and mortality rates.

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