

NEW-BORN HYGIENE BETWEEN "TOO LITTLE" AND "TOO MUCH"

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ABSTRACT:

HYGIENE, A WELL-STRUCTURED BRANCH OF PREVENTIVE MEDICINE, HAS DEMONSTRATED ITS CRUCIAL ROLE IN MAINTAINING AN OPTIMAL HEALTH STATUS OF THE POPULATION SINCE ANTIQUITY. CURRENTLY IN THE POLLUTED AND EXCESSIVELY INDUSTRIALIZED ENVIRONMENT IN WHICH WE LIVE, BOTH DEFICIT AND EXCESS HYGIENE ARE CONSIDERED HARMFUL.

A STUDY STARTED ON A BATCH OF NEWBORN INFANTS REVEALED THE RELATIONSHIP OF DIRECT PROPORTIONALITY IN THE CORRECT ACQUISITION OF HYGIENE RULES WITH THE SOCIO-ECONOMIC AND EDUCATIONAL LEVEL OF THE FAMILY AND INVERSELY PROPORTIONAL TO THE RISK OF GERM INFECTION ACQUIRED THROUGH DIRECT SKIN CONTACT OR FECAL ORAL TRANSMISSION.

KEYWORDS: NEWBORN, HYGIENE, INFECTION.

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Hygea was called the goddess of health and cleanliness in Greek mythology. She was watching for people's health, preventing illness, relieving suffering or pain. She demonstrated the role of healthy eating in disease prevention, set up public baths showing people how to use them. She was the daughter of Asclepius, the god of medicine and Panacea's sister, the goddess of healing, of curative medicine. The representation of the goddess in the sculpture was that of a woman with a snake wrapped around her and a cup in her hand, the symbol of the serpent and the cup crossed the time and its significance is now attributed to pharmacies and pharmaceuticals products.

The legends help us look retrospectively and appreciate that the basics of ancient medicine have been put together with the primacy of hygiene rules.

Hippocrates, the father of medicine, who liberated it from the domination of the gods, the superstition or the intransigence of the gods. He is the first to highlight the importance of hygiene in maintaining an optimal state of health, and relies on the role of natural factors (water, sun, air) in cultivating and maintaining the well-being of the body.

In our time, hygiene is an elemental prophylaxis for disease prevention; hygiene education has to start from a very young age (from the baby) to life.

Presently, hygiene is a branch of preventive medicine that studies the action of different environmental factors on people's health, has the purpose of disease prevention, the efficient use of resources by the population in order to reduce its exposure to risk factors capable of causing illness⁹.

The newborn and the infant have somatic and physiological features requiring special care.

As soon as the newborn appears in the world, its hygiene needs to be kept in some rigorous parameters¹⁰.

Vernix caseosa is a cheese-like white substance that covers the newborn is best revealed in the flexion folds and is composed of sebaceous secretions, petechial cells that have been accumulated. It has a protective role of the newborn skin from the macerating action of amniotic fluid, moisturizer, lubricant, softening the act of birth and has a protective role in the case of a newborn hemolytic syndrome; giving thermal protection, insulating the baby's skin and preventing heat loss. WHO recommendations are to postpone the newborn's first bath at 24 hours at birth to allow Vernix caseosa to fully replenish.

The bath requires correct and complete hygiene of entirely newborn, realized daily, with water at 37-38 ° C, hypoallergenic gels, dermatocosmetics that preserve the lipid skin layer and does not aggress skin¹¹.

Insist on sensitive areas - flexion folds, retro-auricular area. The genital region is given a special attention to both sexes, with easy reduction of foreskin in boys and inspecting the folds from the vulvar region to the girls, the perianal region of both genders will be carefully cleansed. The ear pavilion is cleaned with a towel without the use of ear plugs that can push the posterior cerumen and form wax or epithelial plugs adhering to the eardrum¹².

⁹ Bloomfield SF, Exner M, Fara GM, Nath KJ, Scott EA, Van der Voorden C (2009). "The global burden of hygiene-related diseases in relation to the home and community". International Scientific Forum on Home Hygiene

¹⁰ Green VW. Cleanliness and the health revolution. New York: Soap and Detergent Association; 1984. Available from: URL:http://www.sdahq.org/about/order_formjs.html

¹¹ Larson E. Social and economic impact of infectious diseases—United States. Clin Performance and the Quality of Health Care 1997;5:31-7

¹² Alam N, Wojtyniak B, Henry FJ, Rahaman MM. Mothers' personal and domestic hygiene and diarrhoea incidence in young children in rural Bangladesh. Int J Epidemiol 1989;18:242-7

At the end of the bath, oils or protective creams are used. Besides the daily bath to any defecation or change of diaper, the perianal and genital toilet with hypoallergenic soap and water is made¹³.

Abuse of degreasing, antiseptic, emollient substances can cause allergic reactions, atopic dermatitis, eczema or eczematid¹⁴.

After the age of one month, will be used the same periodicity of the bath.

Practically, the rhythmic routine in hygiene must go into the elementary education of each child.

MATERIAL AND METHOD

A study carried out on 88 newborn babies highlighted the following: 39 of the cases (44.32%) were not washed daily, 75% of the mothers performed the daily hygiene incorrectly, 20 mothers (only) used adequate hygiene products (22.74 %).(Figure 1)

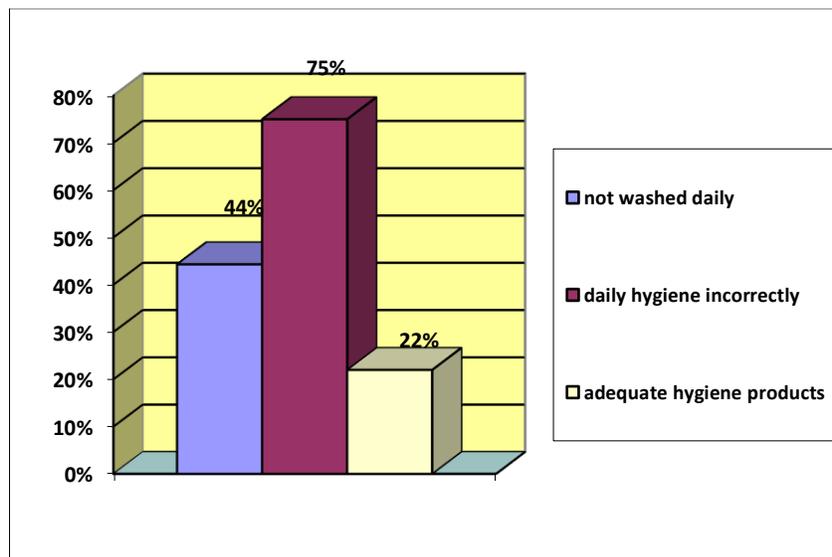


Figure 1

In the respondent range, 17 patients were hospitalized in the first 8 days of postpartum, at which the umbilical plague was not healed.

¹³ Feachem RG. Interventions for the control of diarrhoeal diseases among young children: promotion of personal and domestic hygiene. Bull World Health Organ 1984;62:467-76; Haggerty PA, Muladi K, Kirkwood BR, Ashworth A, Manunebo M. Community-based hygiene education to reduce diarrhoeal disease in rural Zaire: impact of the intervention on diarrhoeal morbidity. Int J Epidemiol 1994;23:1050-9.

¹⁴ Keswick BH, Berge CA, Bartolo RG, Watson DD. Antimicrobial soaps: their role in personal hygiene. In: Aly R, Beutner KR, Maibach H, editors. Cutaneous infection and therapy. New York: Marcel Dekker, Inc.; 1997. p. 49-82; Hall GS, Mackintosh CA, Hoffman PN. The dispersal of bacteria and skin scales from the body after showering and after application of a skin lotion. J Hyg (Camb) 1986;97:289-98; Hartmann AA. Daily bath and its effect on the normal human skin flora quantitative: and qualitative investigations of the aerobic skin flora. Arch Dermatol Res 1979;265:153-64.

7 cases out of 17 (41.18%) presented omphalitis (due to local hygiene), the microbial etiology being varied: 3 were with *Pseudomonas aeruginosa*, 2 with hemolytic *staphylococcus aureus*, 1 with *Proteus*, 1 with *E. Coli*, all children requiring antibiotic therapy. (Figure 2)

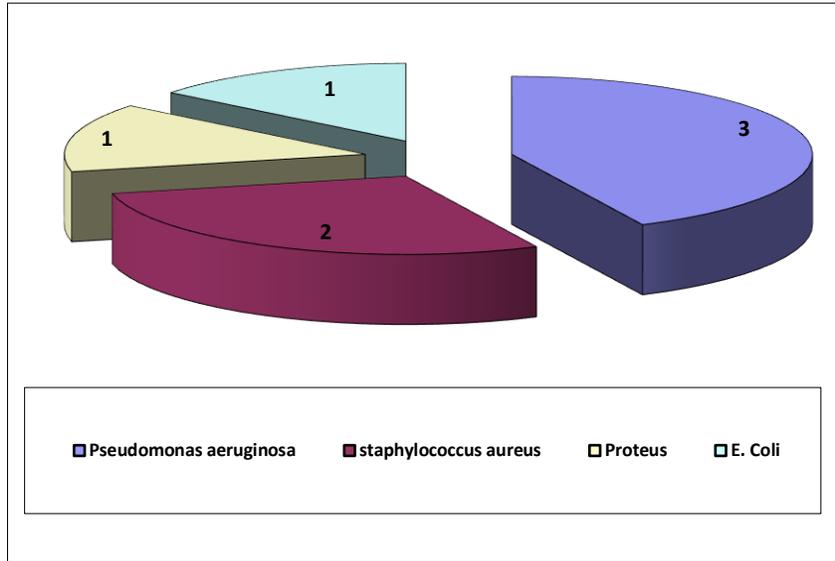


Figure 2

The socio-economic and cultural degree of mothers was another suggestive parameter. Of the 88 mothers, 24 had higher education, 27 secondary studies; the remaining 37 had a maximum of 8 grades (30) or were illiterate. (Figure 3)

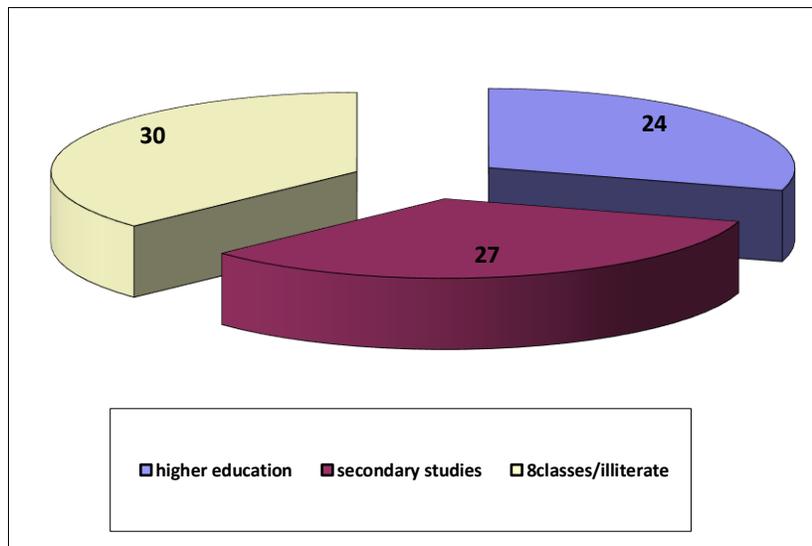


Figure 3

Among those with c, about 33.3% (8 mothers) did not perform the daily cleaning ritual correctly, compared to 44.4% (12 mothers) with medium studies or 78.37% - 29 mothers from the group with more less than 8 classes and here unschooled ones. (Figure 4)

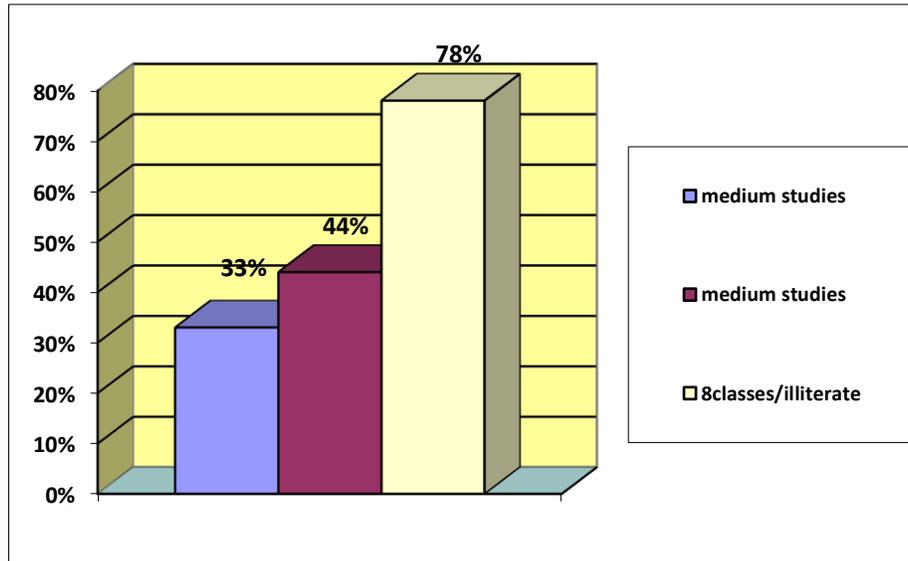


Figure 4

In the group of mothers with higher education, higher socio-economic level was found the "reverse of the medal": exaggerated concern for children's hygiene, excessive use of detergent products, 4 children out of the 24 (16,66%) developed initial contact dermatitis, 2 out of 4 later evolving with atopic dermatitis though atopia was not found in the family inheritance of the children.

DISCUSSIONS

Preferably, all dermatocosmetic products for sensitive skin of children are used, preserving the protective barrier and skin pH, are non-abrasive to avoid microlesiona that create the skin entry site, integrity of the skin, the largest organ to defend and protect the other structures of the human body must be carefully preserved.

In the case of atopy or patent allergies, hygiene products suitable for any skin problem will be used. The risk of atopy / allergy in a child is 12% if the parents were not allergic, rising to 20% if one is allergic, to 40% if they are both allergic and reaching 70% for the same type of allergy of the parents.

In recent years, there are studies in Europe that show an explosion of allergies, strictly related to industrial, technological development, excessive use of home care products or personal hygiene. The European Union has developed, through ECHA (European Chemical Agency), a list of restricted substances called REACH.

CONCLUSIONS

1. The correct hygiene of each child begins with that of his family
2. Various taboos: muffling the child, avoiding the daily bath for fear of cold etc. and lack of information are completely harmful to the beneficial evolution of the child
3. Continuity solutions (unhealed umbilical plaque) and incorrect hygiene create the premise of serious, even fatal potentials - septicemia of the newborn with the entrance gate skin and initial debut as omphalitis.
4. The degree of parental education is directly proportional with correct adherence to hygiene rules and with possible exaggerations and the appearance of possible cutaneous diseases (eczema, contact dermatitis or atopy)
5. All methods of body hardening ensure effective use, a harmonious development of the baby
6. Calling an education for correct hygiene through schools at young ages would have future generations of parents correct and assumed information.
7. The incidence and prevalence of direct transmitted diseases (contact, fecal-oral transmission, etc.) would decrease dramatically with the conscious application of the hygiene of the entire family, not just the child.
8. Antibiotic, harmful, small-age, could be avoided, in many cases, simply by applying proper hygiene.

ACKNOWLEDGEMENTS

All authors equally contributed in the research and drafting of this paper.
All authors report no potential conflict of interest.

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