Aims:

- (1) Generation of ideas for articles to be discussed.
- (2) Articles posted two weeks prior to the club.
- (3) Held on the first Tuesday of each month.
- (4) Findings from the journal club will be disseminated to the team.
- (5) Where appropriate guest speakers will be invited to attend. These aims are achieved by clear advertising and generation of ideas within the nursing team prior to the journal club.

This is a non-hierarchical club where all grades of staff attend we have strong links with the university as part of one of the first Academic Health Science centres in the country, which enables the opportunity for academics and practitioners to share ideas and work together. In the future the journal club will be opened up to all Nursing staff and allied health professionals to enable the sharing of information and knowledge and improve collaboration (Hunt and Topham, 2002).

502**PRETERM BIRTH: MANAGEMENT OF MATERNAL STRESS**

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Background: Management of stress is a very important factor of coping positive and negative life events. In this study mothers of preterm infants with different gestational age were examined in terms of their stress strategies.

Methods: The management of stress positive strategies (abatement/hostility, diversion and control), negative strategies, searching for social support and avoidance of stress was assessed by SVF 120 in mothers of preterm infants (born between 28 and 33 weeks of gestation) within the first three days after delivery. Socio-demographic data were recorded.

Results: 16 mothers (aged 32±6 years) of preterm infants (gestational age 30.7±1.4 weeks; birth weight 1637±250g) have participated in the study

by now. With decreasing gestational age maternal management of stress with diversion ($p=0.010$), control ($p=0.040$), searching for social support ($p=0.034$) and avoidance of stress ($p=0.026$) increased. Maternal management of stress with abatement/hostility and negative strategies was independent of the gestational age.

Conclusion: The results show, that the maternal management of stress at preterm birth depends on the gestational age. These differences should be taken into account in the care and support of mothers of preterm infants in order to improve mother-child interaction.

Learner objectives: Management of maternal stress, gestational age, mother-child interaction

503**PLASMA ENDOTHELIN-1 LEVELS IN PRETERM NEWBORNS WITH CONGENITAL PNEUMONIA**

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Objective: Increased pulmonary vascular resistance in preterm newborn infants with **congenital pneumonia** is suggested, and endothelin-1 plays an important role in pulmonary vascular reactivity in newborns.

Methods: We determined plasma (second sample) levels of endothelin-1 in 12 preterm newborns with **congenital pneumonia** and 15 without **congenital pneumonia** (gestational ages: 28,20 ± 1,22 and 28,01 ± 1,12 weeks, respectively). Blood and a second blood sample taken 18 to 40 h after birth were used for endothelin-1 determination by enzyme immunoassay.

Result: Plasma levels ET-1 concentrations were higher than second sample ET-1 levels in both groups ($P < 0.001$). There was a significant positive correlation between second sample ET-1 and SNAPPE II ($r = 0.32$, $P = 0.01$). There were no correlations between plasma ET-1 levels first sample and second sample ET-1 concentrations and 5-min Apgar score < 5 . Duration of mechanical ventilation had a significant positive correlation with second sample ET-1 ($r = 0.478$, $P = 0.02$). Plasma level ET-1 levels did not differ between control and **congenital pneumonia** (10.02 and 14.20 pg/mL, respectively, $P = 0.90$). Second sample ET-1 levels