**Love and fear in the neonatal intensive care unit (NICU): a meeting of knowledge, skill, technology, compassion, community, culture and ethics.**

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This presentation will serve a dual purpose. Firstly, to present a complex and tragic case study (de-identified) involving a 26 year unmarried Pakistani maid and her newborn baby girl, seen in a tertiary women’s and children’s hospital in the Middle East. Secondly, to share the different challenges faced by a consultation liaison psychiatrist in providing compassionate care to the mother and infant whilst balancing principles of medical ethics in a context that is religiously, and thus Islamic in spirit, and culturally driven.

The mother, whose pregnancy was concealed, was found unconscious and bleeding on the kitchen floor of her sponsor’s home. The neonate was located, unresponsive, still attached to the placenta, in a vegetable box on the floor of the kitchen pantry. One ambulance conveyed the mother to the obstetric hospital, where she received a blood transfusion and was transferred to the women’s prison when medically stable. The paramedics commenced resuscitation on the neonate who was rushed to another hospital’s emergency department where her breathing and heart beat were established, and then to the neonatal intensive care unit where she underwent therapeutic brain cooling and was maintained on intensive life support.

As consultation liaison psychiatrist to the newly opened NICU of a newly-opened hospital, staffed by individuals from over 90 nationalities, the author had the privilege of being involved in the care of this dyad. The paper will describe the management of this complex situation, informed by developing a shared understanding of the infant’s medical condition, relevant Islamic law and ethics, the local cultural and legal context, and a consideration of the infant’s and mother’ physical and psychological needs. Resolution was facilitated with the involvement of multiple professionals, including neonatologists, social workers, nursing staff, psychiatrist, neurologist, hospital lawyer, interpreters, an ethics committee, administrative staff and prison officials and guards. Multiple learnings from this situation will be shared, including an understanding of potential consequences of unplanned, illegal pregnancies for women and their infants and how a supported multidisciplinary team can work together to make a positive difference in complex, tragic situations.