

## Skin-to-skin at birth : safest transition for both mother and baby

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Research conducted during the last 40 years has showed the importance of immediate skin-to-skin contact between mother and baby at birth. It is not only a *“soft, nice thing to do”* but the *“best and safest transition to extrauterine life”*. All mothers and babies should experience the benefits of this immediate and non-interrupted contact.

### What is skin-to-skin at birth?

The baby is immediately placed on his mother’s nude abdomen and remains there without interruption for at least one to 2 hours.

This should happen for all babies, born vaginally or by caesarean section.

### How do we get the baby skin-to-skin at birth?

- The baby is placed directly on the mother’s nude chest, without drying. Skin-to-skin is immediate (directly from the mother without going to a warmer).
- Newborn is completely nude (no diaper, blanket, ...).
- Baby is expanded as much as possible on the mother, to get as much skin contact as possible. This helps hormones to be activated, to avoid pressure on the chest, and to facilitate breathing.
- Baby is dried after he is placed on the mother, especially back and head, to avoid evaporation.
- All wet blankets are removed. Newborn is then covered with only one warm and dry blanket to avoid overheating.
- At caesarean section, partner holds baby’s thigh or buttock directly on baby’s skin to prevent from falling.
- Baby is not weighed before the end of this 1-2 hour period or preferably before the end of his first feed.



Picture by Dumas, Gatineau, Québec, Canada, with permission



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## **How do we know baby is safe?**

- Healthcare professionals check his breathing, color and tone regularly. Parents examine their baby as they are close to him : breathing, skin coloration, responsiveness to stimulation.
- When baby is placed correctly, his nose and mouth secure free airways.
- Baby should always be free to spontaneously lift head to correct breathing.
- When baby is born by caesarean section, the partner holds baby's thigh or buttock directly on baby's skin to prevent from falling.

## **Why do we place baby skin-to-skin?**

Many researches have showed it is the safest transition from the uterus. We know that it helps baby to adapt more rapidly to this new life outside the womb, to maintain his energy, and to reduce his stress of being born.

*As examples, we know that :*

- baby and mother stay warmer together
- baby's stress hormones are decreased so he is calmer and more alert and he cries less
- baby breathes better, deeper and slower
- baby has a better blood sugar level
- mother's placenta is expelled faster
- baby's first sucking is facilitated
- baby recognizes his mother's odour
- baby loses less weight
- exclusivity and duration of breastfeeding are enhanced
- when skin-to-skin, baby has less pain when he receives his shot of vitamin K within the hour after birth
- mother and baby bond faster as baby is more alert and receptive
- mother feels better as her maternal hormones are increased and stress hormones decreased.

## **Why not wait for skin-to-skin contact when the mother is back in her room?**

Research has showed that if skin-to-skin is not immediate with the mother, those benefits are not present. A 2 hour separation at birth followed by reunion of mother and baby does not compensate for the lack of skin-to-skin at birth.

## **During a caesarean section , why not placing the baby on the partner instead?**

Research has showed many benefits of immediate skin-to-skin at birth for the mother and the baby but not for the partner. We know however that skin-to-skin contact after the initial contact with the mother is beneficial for the baby. Both mother and partner are encouraged to keep baby skin-to-skin very often and for long periods for the first days.

**Offer your baby the best and safest welcoming in his new life out of the womb!**

**Place him skin-to-skin with mother immediately at birth for an uninterrupted period of 1-2 hours**