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اگر نیاز به ترجمه دارید، لطفا با شماره 01932 723553 تماس بگیرید.

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اگر آپ اِس کا اُردو زبان میں ترجمہ چاہتے ہیں، تو براہِ کرم اِس فون نمبر 01932 723553 پر رابطہ کریں

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यदि आपको अनुवाद की ज़रूरत है तो कृपया इस नंबर पर फोन करें: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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Delayed Cord Clamping

Women's Health and Paediatrics

Ashford and St. Peter's Hospitals NHS Foundation Trust is committed to providing the highest quality care for all mothers and babies, with our midwifery, obstetric, neonatal and theatre staff working closely together to support you and address any concerns you may have.

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.
If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.

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What is delayed cord clamping?

The umbilical cord joins the baby to the placenta during pregnancy. After birth, the baby's umbilical cord will be clamped and cut to separate the two.

There is increasing evidence that babies benefit from a delay before clamping the cord, allowing time for extra blood to flow from the placenta into the baby. This is called delayed cord clamping (DCC) and is now advised for almost all babies.

What are the benefits of DCC?

DCC is recommended worldwide by the World Health Organisation. Delayed cord clamping allows extra time for blood to travel from the placenta to the baby.

If the cord is clamped immediately, there is a sudden drop in baby's blood pressure due to the movement of blood into the lungs when the baby takes their first breaths. DCC allows blood from the placenta to replace the blood in the circulation, keeping the blood pressure more stable. DCC also increases the amount of iron transferred to your baby which is an essential element for brain development.

What happens at my delivery?

After your baby is born, he/she will be dried, wrapped and assessed. If your baby is well, your midwife or obstetrician should wait at least 1 minute before clamping and cutting the cord. The aim is for babies to start breathing before the cord is clamped. This should not affect skin to skin at birth.

We would aim to provide this for up to 3-5 minutes. Even if you have an injection to deliver your placenta, DCC can still take place. DCC can also happen as part of a Caesarean section and baby can be held up for you to see them after the DCC has finished.

What happens if my baby is premature or sick?

Preterm and sick babies benefit more from receiving DCC as it gives babies more blood volume and improves blood pressure. This helps to protect a premature or sick baby's fragile organs.

It has been shown in studies to decrease the risk of some complications linked with prematurity, including bleeding into the brain, infections in the gut, needing a blood transfusion and death.

If your baby is very premature, they may be placed into a plastic bag and onto a heated mattress. We can also use a platform called Lifestart to make sure your baby's breathing is supported during DCC.

Every effort should be made to make sure that all babies receive at least 1 minute of DCC. Sometimes this is not possible so an alternative procedure called cord milking can be done. This has been shown to be beneficial over immediate cord clamping but is less beneficial than DCC.

Are there any risks?

There is a small increased risk of jaundice in babies who have received DCC due to increased blood volume, but this is usually mild and can be easily treated by placing your baby under a blue light (phototherapy).

Are there some babies that can't have DCC?

DCC is now regarded as safe for most deliveries. However, it may be technically difficult to perform in some situations such as maternal bleeding, twins with complications or if the cord is very short.

If you have any questions, your midwife will be happy to talk about this further. It is recommended that you consider DCC as part of your birth plan and discuss this at delivery with your midwife.