

# Delayed cord clamping Information for patients, relatives and carers

## What is delayed cord clamping?

The umbilical cord connects the baby to the placenta, providing blood, oxygen, nutrients and stem cells. After a baby is born the umbilical cord is clamped and cut. This can be done immediately or it can be delayed. The exact definition of "delayed" can vary, but we define it as waiting one minute after the baby is born before clamping or clamping once the cord has stopped pulsating. Sometimes it is also called 'optimal cord management'.

# What are the benefits of delayed cord clamping for term and preterm infants?

Delayed cord clamping allows some of the blood in the placenta and umbilical cord to flow back into the baby when they are born. For this short period they get additional oxygen, blood and stem cells. Research has shown that immediate cord clamping should be avoided, and that delayed cord clamping is beneficial for both premature and term infants.

Delayed cord clamping has been shown to increase iron levels in all babies, which helps with their growth and development. It also increases the amount of stem cells, which helps with their growth and development of their immune system.

In premature babies, particularly those that are less than 32 weeks it has been shown to be even more beneficial and reduce the risk of serious outcomes like death and brain bleeds. Delayed cord clamping could reduce mortality by up to one-third. We don't know the exact reason for this, but we think that the smoother transition of the circulation and blood pressure to the baby right after birth helps stabilise the baby.

#### What we will do

Delayed cord clamping is a simple process. The baby is delivered and then we time one minute or feel the cord until it stops pulsating. Then we clamp the cord and cut it. We can do this whether the baby is delivered vaginally or by caesarean-section. If appropriate, the birthing partner can still cut the cord if they want to.

For preterm babies, the neonatal team have specialist equipment they use to start stabilisation and to support breathing while the baby is still connected to the placenta.

# When we don't use delayed cord clamping

The umbilical cord may need to be clamped immediately in some situations; for example, if the baby is born in poor condition with a low heart rate and needs immediate help. It is also not recommended in some other circumstances such as certain types of twin-pregnancy, if mum is very unwell prior to delivery or in certain conditions such as maternal HIV infection with a high viral load.

### How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3313 0088** (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or **020 3312 7777** (St Mary's and Western Eye hospitals). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:

Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street London W2 1NY

Email: ICHC-tr.Complaints@nhs.net

Telephone: 020 3312 1337 / 1349

#### Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team: <a href="mailto:imperial.communications@nhs.net">imperial.communications@nhs.net</a>

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