

Delayed cord clamping protects newborn babies from iron deficiency

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Waiting for at least three minutes before clamping the umbilical cord in healthy newborns improves their iron levels at four months, according to research published in the British Medical Journal today.

Delaying cord clamping is not linked to neonatal jaundice or other adverse health effects and should be standard care after uncomplicated pregnancies, adds the study.

[Iron deficiency](#) and [iron deficiency anaemia](#) are major public health problems in young children around the world and are associated with poor neurodevelopment. Young children are at particular risk due to their high iron requirements during rapid growth.

While established research indicates that delayed cord clamping could prevent iron deficiency there are conflicting results regarding the risk of neonatal jaundice and other health problems.

So the authors led by Ola Andersson, consultant in [neonatology](#) at the Hospital of Halland in Sweden, and Magnus Domellöf, associate professor of paediatrics at Umeå University, investigated the effects of delayed cord clamping, compared to early clamping, on the iron status of infants at four months of age in a Swedish county hospital.

Four hundred full term infants born after low-risk pregnancies were involved in the study. Some had their umbilical cords clamped after at least three minutes and others had them clamped in less than ten seconds

after delivery.

The results show that babies who experienced delayed clamping had better [iron levels](#) at four months of age and there were fewer cases of neonatal anaemia.

The researchers estimated that, for every 20 babies having delayed clamping, one case of iron deficiency would be prevented, regardless of whether the baby also had anaemia. Furthermore, delayed cord clamping was not associated with any [adverse health effects](#).

The authors conclude that delayed cord clamping "should be considered as standard care for full term deliveries after uncomplicated pregnancies."

In an accompanying editorial, Dr Patrick van Rhee, consultant paediatrician at the University of Groningen in the Netherlands, says that enough evidence now exists to encourage delayed cord clamping.

He says: "The balance of maternal risks and infant benefits of delayed cord clamping now clearly favours the child. How much more evidence is needed to convince obstetricians and midwives that it is worthwhile to wait for three minutes to allow for placental transfusion, even in developed countries?"

Provided by British Medical Journal

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