

Nursing journal finds mothers and babies benefit from skin-to-skin contact

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Credit: Anna Langova/public domain

Research during the past 30 years has found many benefits of skin-to-skin contact between mothers and newborns immediately after birth, particularly with aiding breastfeeding. However, in some hospitals, skin-to-skin contact following cesarean birth is not implemented, due to practices around the surgery. A recent Quality Improvement (QI) project demonstrated that women's birth experiences were improved by

implementing skin-to-skin contact after cesarean surgery.

Women who give birth by cesarean often have more difficulty with breastfeeding, and skin-to-skin contact can make breastfeeding easier by relaxing the mother and baby, enhancing their bond, and helping the baby to latch better. Additional potential benefits of skin-to-skin contact for infants include less cold stress, longer periods of sleep, improved weight gain, better brain development, a reduction in "purposeless" activity, decreased crying, longer periods of alertness, and earlier hospital discharge.

In "A Quality Improvement Project Focused on Women's Perceptions of Skin-to-Skin Contact After Cesarean Birth", Judith Ann Moran-Peters, RN, NE-BC, BC, and her coauthors write about a QI project to implement skin-to-skin contact following cesarean birth and to measure women's perceptions in contrast with previous cesarean births without immediate skin-to-skin contact. This article appears in the August/September 2014 issue of *Nursing for Women's Health*, the clinical practice journal of the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN).

"Nurses working in labor and birth settings should promote the practice of skin-to-skin contact between women and their newborn infants immediately following birth, given the significant health benefits associated with this experience," write the authors. "The moments right after birth represent the ideal timeframe for initiating breastfeeding, which generates important health benefits for the baby."

The authors advise that while there may be several challenges in implementing a protocol for skin-to-skin contact following a cesarean birth, a collaborative group of clinicians can identify and eliminate these barriers. One example is newborns not joining their mothers in a regular room until a significant amount of time has passed after birth.

Additional barriers faced by women who have cesarean surgery include sterile draping from the surgery and mental fatigue from pain and sedation medications. The positive benefits of skin-to-skin contact for newborns and moms call for action to be taken by healthcare providers to minimize barriers and make skin-to-skin contact a priority.

"Nurses can help identify and eliminate barriers to skin-to-skin contact following cesarean surgery and raise this as a priority for improvement," said AWHONN's CEO, Lynn Erdman, MN, RN, FAAN. "The [health benefits](#) of skin-to-skin contact along with breastfeeding are well understood, so expanding this practice to [cesarean births](#) is a natural improvement for practice and patient health."

Provided by Wiley

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