Delayed cord clamping not beneficial for preterm infants

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(HealthDay)—Delayed cord clamping does not result in lower incidence

of death or major morbidity in preterm infants, according to a study published online Oct. 29 in the *New England Journal of Medicine* to coincide with the Vermont Oxford Network 2017 Annual Quality Congress, held Oct. 26 to 30 in Chicago.

William Tarnow-Mordi, M.B.Ch.B., from the University of Sydney, and colleagues randomly assigned fetuses from women who were expected to deliver before 30 weeks of gestation to immediate clamping of the umbilical cord (≤10 seconds after delivery; n = 782) or delayed clamping (≥60 seconds after delivery; n = 784).

The researchers found that there was no significant difference in the primary composite outcome of death or major morbidity between the delayed-clamping and immediate-clamping groups (37 versus 37.2 percent) at 36 weeks gestation age. However, the mortality risk was lower in the delayed-clamping group (6.4 percent) versus the immediate-clamping group (9 percent) in unadjusted analyses, but this difference was insignificant after adjustment for secondary outcomes. Incidence of chronic lung disease and other major morbidities did not differ between the groups.

"Among preterm infants, delayed cord clamping did not result in a lower incidence of the combined outcome of death or major morbidity at 36 weeks of gestation than immediate cord clamping," conclude the authors.

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