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Provide mother side resuscitation and avoid the harmful intervention of early cord clamping

Early cord clamping at birth has become an established obstetric practice for no clear reason. It is known to be harmful to the neonate with serious harm to the compromised neonate, but it was only recently agreed that the intervention is early cord clamping and delayed cord clamping is close to a natural transition for the neonate. Early cord clamping was already common practice (with the unproven view that it would reduce maternal haemorrhage) when neonatal resuscitation became established practice. While ventilation of the apneic neonate is a logical intervention, there is no physiological rationale for early cord clamping. Early cord clamping is an additional intervention without any purpose, but with significant evidence of harm by causing hypovolemic, hypoxia, increased after load and a reduced preload of the heart. A range of approaches to provide mother side ventilation and resuscitation will be presented. These ranges from simple ambu bag and mask on the delivery mattress after a normal delivery by a midwife to a modified mobile resuscitation trolley with all the equipment of the standard room side trolley. This allows the mother side resuscitation of the severely asphyxiated neonate delivered by caesarean section and the care of the very low birth weight infant. The change in delivery room practice and the training and cooperation between obstetric and neonatal staff will be presented. Preliminary results of the new approach are presented.

Biography

David James Riddell Hutchon has 28 years of experience as a Consultant Obstetrician. In 2003, he realized that clamping the umbilical cord quickly after birth severely disrupted neonatal circulation and interfered with transition. He has published and lectured extensively on the subject and co-operating with UK and international colleagues developed equipment and ways of providing neonatal resuscitation at the side of the mother without clamping the cord. He has co-authored a chapter on neonatal care immediately after birth, co-authored two Cochrane systematic reviews, and has organized five international conferences on the subject of mother side neonatal resuscitation.

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