



# The Golden Hour: Getting the Best Start with Your Newborn

By Dr. Bob Sears

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**When that tiny baby is placed into your arms, he or she is the ultimate reward for your nine months of careful preparation. You may not know that what you and others around you do in that very first hour of your baby's life can have a significant—even lifelong—impact on the bond you have with your baby. In this article I will show you how to best prepare for that golden hour, how to maximize the bonding experience, how to defer hospital procedures that may interfere with bonding during that first hour and how to communicate those needs to your medical caregivers in a way they will be receptive to. You've spent nine long months doing everything right. Let's get that very first hour of baby's life right too.**

*Out with the old, in with the new*

Birthing centers have long understood the importance of maternal-infant bonding right after birth. Some hospitals are also following suit and changing their policies and procedures to promote the attachment process. But many are still stuck in the dark ages and focus mainly on the medical side of a newborn's health, placing nature and nurture on the backburner. A baby is born, the doctor hands him to a nurse who takes the baby to a warming table, examines him, gives him a Vitamin K shot, puts antibiotic ointment into his eyes, administers the Hepatitis B vaccine, takes him over to the sink for a good scrub down,

puts on a diaper, swaddles the baby in a blanket and *then* takes the baby over to the proud parents so they can finally hold their new bundle of joy. This out-of-date approach interferes so profoundly with a baby's healthy transition into this world that the American Academy of Pediatrics created a new policy for how newborns should be cared for in the first hour after birth. You can find this policy by going to [www.AAP.org](http://www.AAP.org) and searching "breastfeeding and the use of human milk" under the AAP policy section. Here is how a newborn, and the new parents, should be treated:

- Healthy infants should be placed immediately onto the mother's abdomen or chest when they are born and remain in direct skin-to-skin contact until the first feeding is accomplished
- The nurse should perform the first physical assessment while the baby remains on the mother's chest
- Weighing, measuring, bathing, eye ointment and any injections or blood tests should wait until after the first feeding
- The baby should remain with the mother throughout the recovery period

There is a world-wide movement created by the World Health Organization called The Baby Friendly Hospital Initiative which helps to implement these changes. Over one hundred American hospitals and birth centers have become "baby friendly" so far, with many more to follow suite.



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## *Why the first hour is so important*

Many amazing changes take place in a new mother during and right after the birth process. The work of labor generates changes in your brain chemistry that increase your desire for nurturing. Skin-to-skin contact with baby and suckling at the breast release mothering hormones that are the basis for mother's intuition. These hormones also cause the uterus to contract, shrink and stop bleeding. Research has shown that having a first breastfeeding within the first hour of life improves infant survival and prolongs the duration of exclusive breastfeeding.

Allowing the new mom and baby to enjoy the first breastfeeding together and experience the intimacy of skin-to-skin contact before anything else is done eases baby's transition from the womb into the world. It stabilizes baby's heart rhythm, body temperature and breathing. The baby just spent many months wrapped in the security and warmth of your womb, hearing the sound of your voice, heartbeat and breathing. Continue this symbiotic relationship as best as you can right away to minimize the shock to baby. Spending that first hour enveloped in each other's presence lets you both know that everything is right with the world. It awakens the mother inside you, bonds the baby to his primary caregiver and sets the stage for the coming hours, days and years. Dad can also get involved by placing his hands on baby,

talking quietly, letting baby gaze at his face and spending time holding baby after the first feeding is done.

## *Bonding during unplanned medical emergencies*

Of course, these policies assume that the baby comes out kicking and screaming. If the baby needs some extra stimulation and attention to get him breathing and crying, this is best done on the exam table. After a few minutes of stabilization, though, mom and dad need to jump right into the bonding process. The evidence is clear that babies thrive most when kept in close, skin-to-skin contact with mom from the very beginning. This "kangaroo care" is best for all babies and can be vital to the survival of babies born prematurely.

Women who have a planned or unplanned C-section won't be in the ideal position for intimate bonding right away. But there are ways that a mom can get her hands on her baby within the first five minutes. When the baby first comes out, he'll be taken to a warming table for a quick assessment. If the baby looks good, there's really nothing more that needs to be done that can't wait a while. Parents can ask the nurse to bring the baby over and lay him on mom's chest so bonding can begin if the mom is awake and willing. This can be done while the obstetricians finish their work. Dad can sit down right next to mom and keep his hands



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on the baby too. Dads can really step up and take charge of that baby and keep him at mom's side until she is settled into the recovery room and ready to nurse.

### *Make your desires known ahead of time*

Find out ahead of time what your hospital's routine procedures are for the hour after birth. Make sure your obstetrician and labor support nurse know about your preferences, indeed your rights, as a new parent early during labor. Even better, discuss your plans with your OB at a prenatal visit. There's no harm at all in delaying the medical interventions that a healthy newborn needs for an hour or so. Since you may meet resistance from some hospital staff who are used to doing things the old fashioned way, arm yourself with a printed copy of the AAP's newborn policy. Tell the staff you want, and your baby needs, your "golden hour."

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Dr. Bob Sears is a pediatrician and author in the Sears Parenting Library. His latest work, *The Portable Pediatrician: Everything You Need to Know About Your Child's Health*, provides a complete guide to every pediatric checkup and illness from birth through adolescence.