



Maternity Department

Patient information leaflet about skin-to-skin contact

Skin-to-skin contact helps your baby to adjust to life outside the womb and helps you to develop a close, loving relationship with your baby. There are so many benefits to having skin contact with your baby!

What is skin-to-skin contact?

Skin-to-skin contact is usually referred to as the practice where your baby is dried and laid directly on your bare chest after birth, both covered in a warm blanket and left for at least an hour, or until after the first feed, and for as long as you wish. Skin-to-skin contact can also take place any time after you've left hospital, particularly if your baby needs comforting or calming.

No matter how you are feeding your baby, skin-to-skin is really important and can help babies and mothers in many ways.

Why is skin-to-skin contact with my baby important?

It will help:

- Calm and relax both you and your baby;
- Regulate your baby's heart rate, breathing and temperature, helping them to better adapt to life outside the womb:
- Stimulate digestion and an interest in feeding;
- Promote bonding and your baby's brain development;
- Enable colonisation of your baby's skin with your friendly bacteria, thus providing protection against infection;
- Stimulate the release of hormones to support mothering instincts and breastfeeding;
- Give breastfeeding a great start.

If you express following a period of skin-to-skin contact, your milk volume will improve, and the milk expressed will contain the specific antibodies tailored to your baby's needs.

Skin-to-skin contact is also vital in neonatal units, where it is often known as 'kangaroo care', helping parents to bond with their baby, as well as supporting better physical and developmental outcomes for the baby.

Additional benefits for babies who are in the neonatal unit:

- Improves baby's oxygen saturation;
- Reduces baby's cortisol (stress) levels particularly following painful procedures;





- Encourages pre-feeding behaviour;
- Assists with growth
- May reduce hospital stay.

What happens during skin-to-skin contact?

When you hold your baby in skin-to-skin contact after birth it initiates strong instinctive behaviours. You will experience a surge of maternal hormones and begin to smell, stroke and engage with your baby.

Babies' instincts after birth will drive them to follow a unique process, which if left uninterrupted will result in them having a first breastfeed.

If your baby is enabled to familiarise themselves with your breasts and achieve self-attachment it is very likely that they will recall this at subsequent feeds, resulting in fewer breastfeeding problems.

After birth, when your baby is placed skin-to-skin on your chest it will usually:

- Initially cry briefly a very distinctive birth cry;
- Enter a stage of relaxation, where baby will display very little movement as they recover from the birth:
- Start to wake up, opening their eyes and showing some response to your voice;
- Begin to move, initially little movements, perhaps of the arms, shoulders and head;
- As these movements increase your baby will draw up their knees and appear to move or crawl towards the breast;
- Once they have found the breast, they will tend to rest for a little while (often this can be mistaken as the baby being not hungry or not wanting to feed);
- After a period of rest, the baby will start to familiarise with the breast, perhaps by nuzzling, smelling and licking around the area. This familiarisation period is important and can last for some time, so should not be rushed. Sometimes it is tempting to help baby to attach at this time but try to remain patient to allow them to work out how best to attach themselves.
- Finally, baby will self-attach and begin to feed. It may be that you and baby need a little help with positioning at this stage.
- Once baby has suckled for a period of time, they will come off the breast and often both you and baby will have a sleep.





Most term healthy babies will follow this process, providing it is not interrupted by anything, for example taking the baby away to weigh, or the mother going for a shower.

Interrupting the process before the baby has completed this sequence or trying to hurry them through the stages may lead to problems at subsequent breastfeeds. If you have been given a lot of analgesia during labour, your baby may be drowsy, and this process can take longer.

If you are unable to have skin-to-skin contact immediately after birth for any reason, then we will encourage your birthing partner to have skin-to-skin and for you to start skin contact as soon as you are able to.

For further information about skin-to-skin, please speak to your midwife.



