

**Clinical Image**

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**Not every separation is ugly: Umbilical cord clamping****\*Corresponding Author: Anuja Sapkal**

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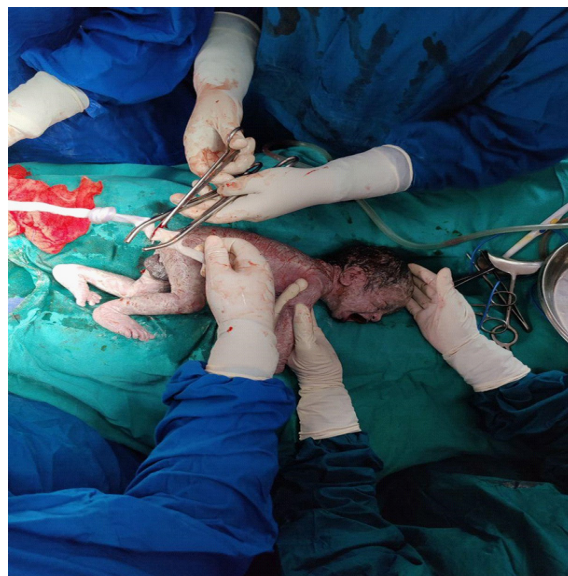
**Description**

The most important step during the delivery of a child is the third stage of labor known as umbilical cord clamping. In this step the newborn is separated from the placenta and mother as shown below (Figure1).

The timing of cord clamping plays a very vital role. As per WHO, early cord clamping is done within 1 minute of birth. It increases the risk of anemia, hypoxia, and infections. It is advised only when the newborn is in asphyxia and needs resuscitation. Clamping of the cord within 1 to 3 minutes or when pulsations of the umbilical cord stop are known as delayed cord clamping [1,2]. Delayed cord clamping is considered to have a good performance, is safe, doable and highly effective without any adverse effects in both term and preterm newborns [3]. It protects the baby from the risk of development delayed cognitive, and psychomotor abilities.

**References**

1. WHO. Guideline: Delayed umbilical cord clamping for improved maternal and infant health and nutrition outcomes. Geneva: World Health Organization. 2014.
2. McDonald S, Middleton P. Effect of timing of umbilical cord clamping of term infants on maternal and neonatal outcomes (Review). Cochrane Database Syst Rev. 2008.
3. Chiruvolu A, Tolia VN, Qin H, Stone GL, Rich D, Conant RJ, et al. Effect of delayed cord clamping on very preterm infants. Am J Obstet Gynecol. 2015; 213: 676-676.e7.



**Figure 1:** Shows umbilical cord clamping.

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