

A Quasi-Experimental Study to Assess Consequences of Early Versus Delay Umbilical Cord Clamping on Maternal and Neonatal Outcomes in Beni-Suef city

Abstract

Background: Timing of an umbilical cord clamping is considering as challenging undertaking for improving maternal & neonatal quality outcomes. **Aim:** To compare the effects of early versus late umbilical cord clamping on maternal & neonatal Outcomes in Beni-Suef city. **Design:** A quasi-experimental study conducted with a purposive of 150 predominantly Upper Egyptian laboring women were eligible collected from labor ward in Beni-Suef General hospital. **Tools:** A Structured Interviewing Questionnaire Sheet and Maternal & Fetal Outcome Sheet were used. **Results:** No significant difference between DCC & ECC groups in relation to estimated maternal postpartum blood loss, maternal hemoglobin, hematocrit levels and needs for blood transfusion, moreover, the effects of late cord clamping on neonate reported that rise in hematocrit & hemoglobin level at birth, especially among late cord clamping group. The late cord clamping was negatively correlated with treatment with phototherapy, admission to the NICU, respiratory distress, jaundice requiring phototherapy, with need for resuscitation, polycythemia and prevent incidence of anemia. **Conclusion:** Deferred times for umbilical cord clamping didn't increase the risk of maternal post-partum hemorrhage, duration of the 3rd stage of labor or the need for manual removal of the placenta, however, it significantly increased neonatal hemoglobin, hematocrit, and bilirubin, polycythemia, and transient tachypnea in the newborn. **Recommendations:** Institutionalization of DCC in all governmental hospitals & medical educational settings and do not extend time of DCC to decrease risk of DCC such as (hyperbilirubinaemia, polycythaemia, & transient tachypnea).

Keywords: Early, delay, umbilical cord clamping, maternal' outcomes, neonatal outcomes.