



PLUM BITES

SUMMER 2013



Wishing you a peaceful summer with
lots of sun for your toes!

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Best of the Web

*Every issue we bring you some
of our favourite birthy news
bites from around the web.*

Learn more about vernix

[Benefits of Vernix - It's Amazing
Stuff!](#)

[Don't Wash That Baby: Why Many
Believe Newborn Baths Should Be
Postponed](#)

**NEW Online
Childbearing Resource**

What's New at Plum?

AMY KELLY RETURNING...

After some time off to care for her son and baby daughter (born in March 2013), Amy Kelly RM is returning to practice with Plum at the beginning of July. We are so excited to welcome her back to our team. Please take a moment to check out her bio and photo below.



GROUP CARE IN CUMBERLAND

Beginning in July we will be offering Group Care sessions in Cumberland (in addition to our ongoing Comox groups). We are happy that our Group Care sessions are growing and so pleased to be able to offer you two convenient locations.

You can learn more about [Group Prenatal Care on our website](#), or call the office at 250.890.0832 if you are interested in participating.

REMEMBER THIS STORY?

Remember the great story about Katie's impact on an older sibling who re-enacted her baby sister's birth using a leopard-skin clad Playmobil jungle woman as midwife Katie?

Here's a photo for those of you who can't quite picture it:

This new resource for high quality childbirth information resembles a public Pinterest board supporting informed choice and physiological birth. Developed in part by Dr. Michael Klein (Professor Emeritus, Departments of Family Practice and Pediatrics, University of British Columbia), the site offers parent and expert reviewed links on topics ranging from prenatal tests to breastfeeding (and everything in between). The site is still in its infancy, so if you know some great resources to suggest, you can do so now, and bookmark the resource for later reference when the boards start to fill up with valuable info.

<http://www.birthsource.info/>

Plum Babies



Visit our [website](#) for photos

March 2013

Cairo, 7 Lb 8oz

Everett, 6 Lb 12oz

Claire, 9 Lb 2.5oz

Zoe, 7 Lb 8oz

Brianna Clara Joanne, 8 Lb

Lillian, 6 Lb 14oz

Eno, 7 Lb 2oz

Ocean, 7 Lb 13oz



Welcome Back Amy

Midwife Amy Kelly returns to Plum Midwifery in July. All of our clients will have a chance to meet her over the coming weeks. For our friends and past clients, read on to learn more about Amy.

It's a rare gift in life to be able to do what you love. Now that my son Seamus is 4 and Tallulah is 2, I am happy to once again be a midwife and to be serving families in the Comox Valley.

My background outside midwifery was based in community activism and women's health with experiences ranging from co-ordinating the Laurentian University women's centre, volunteering at The McGill Sexual Assault Crisis Centre and Volunteering at the Aboriginal Mother's Centre Society.



April 2013

Rueben, 7 Lb 14oz
Hektor, 5 Lb 1oz
Luca, 7 Lb 5oz
Zora Cassiopeia, 7 Lb 4 oz
Jason, 8 Lb 1oz

May 2013

Treyden, 7 Lb 11oz
Vaughn, 8 Lb 1.5oz
Pheora, 9 Lb 3 oz
Kevin, 8 Lb
Noah, 6 Lb 2oz
Hanifa, 7 Lb 10oz
Evelynn, 6 Lb 11oz
Chloe, 8 Lb
Juniper & Orianna
6 Lb 12oz & 5 Lb 7oz

We want to feature your beautiful babe!

Click [here](#) to email us a photo of your little one!

"Like" Plum?

We invite you to come on over and check out our Facebook page. You will find Plum news, interesting articles and news stories. **We would be thrilled if you would drop us a line, share your baby photos, post questions and help us make it a vibrant space for everyone who "likes" us.**

My studies took place at McGill University in Montreal and Laurentian in Sudbury Ontario. BC has always been my home so I made the inevitable return in 2006. Now I am happy to call the Comox Valley home as well. Looking forward to all the new and familiar faces at Plum Midwifery in July.

Sincerely,

Amy Kelly

Like us on Facebook 



Newborn Procedures: Bathing

In this on-going Plum Bites series on Newborn Procedures, we will address the many procedures you can expect to be offered when your baby arrives.

If there is one newborn baby care procedure that many families never consider, it's bathing a newborn. Yes, our little guys can make a pretty messy entrance into the world and bathing to remove the products of birth may seem a logical choice; however, there are drawbacks to this routine procedure which might affect the decision to delay or even refuse a formal bath.

What are some reasons not to bathe?

A newborn's skin is extremely sensitive, not just to temperature, but also to touch. Before birth, the only touch the baby knew was the gentle waves of amniotic fluid that swirled around it, caressing its body, a very sharp contrast to the vigorous scrubbings of a washcloth. Aggressive sensory stimulation can overload the newborn baby's sensory system.

A bath will **lower the baby's body temperature** which may then prompt hospital staff to insist on placing the baby in a warmer until its temperature rises sufficiently rather than allowing skin-to-skin contact with the mother.

Even if a baby's temperature isn't compromised, a bath in the first hours after birth takes away from important bonding time and can have a negative impact on breastfeeding. Why? Because a baby's instincts to crawl to the breast - the whole sequence of newborn

behaviors, in fact - is in part connected to the baby's sense of smell. In the [***Impact of Birthing Practices on Breastfeeding***](#), Linda Smith explains:

"The newborn's sense of smell is especially acute in the first hours, triggering breast-seeking behaviors and movements. Washing or bathing the mother or baby removes olfactory cues that support breastfeeding and attachment, and thus should be avoided."

The sense of smell, and particularly the smell of amniotic fluid on the baby and a similar smell at the mother's breast, appears to be one factor unlocking the sequence of instinctive behaviors including the "breast crawl": the instinctual movements of the newborn toward the breast in the first hour or so after birth. [**Groundbreaking research**](#) by Righard in 1990, showed a marked difference in "breast crawl" behaviors between babies who were removed for bathing and measurements than babies who weren't.

Finally, some of the very goop we are cleaning off baby during a first bath is extremely useful. Vernix, the creamy, cheesy coating on a baby's skin at birth develops during the third trimester to protect baby's skin from the watery environment of the womb. However, vernix does more than act as a protective barrier from liquids while in the uterus. It acts as an antioxidant, skin cleanser, moisturizer, temperature regulator, and a natural, safe antimicrobial for the new baby post delivery.

Modern science recognizes the benefits of vernix. A study regarding the significance of vernix ([**Antimicrobial Properties of Amniotic Fluid and Vernix Caseosa are Similar to Those Found in Breast Milk**](#)) revealed that a number of immune substances were present in both amniotic fluid and vernix samples, and tests showed that these substances are effective in deterring the growth of common perinatal pathogens- group B. Streptococcus, K. pneumoniae, L. monocytogenes, C. albicans and E. coli.



Notice the vernix on the shoulder, upper arm, forehead and in facial creases.

Think of it this way: The bath washes the natural protective coating rich with natural flora, emollients, proteins, and antimicrobials from the newborn's skin. In washing it off, we leave the newborn's skin open to colonization from microorganisms. We allow the skin to dry out, and we in turn, apply manufactured, less adequate moisturizers to compensate. We also, no matter how well we attempt to dry a wet baby off, leave the skin damp at a time when temperature regulation is vital. To compensate, we bundle and cap the baby. This compensation eliminates important skin-to-skin contact that is important in proper flora building and crucial olfactory (scent) bonding, and the initiation of breastfeeding.

What do experts say about baby's first bath?

The California Department of Public Health (to name one of many health authorities) recommends in its *Model Hospital Toolkit*:

"Babies are usually most ready to breastfeed during the first hour following birth. For the normal newborn this should occur prior to such interventions as: the newborn bath, glucose sticks, foot printing, and eye treatments.

*During the first day of life, **skin-to-skin time and breastfeeding should take priority over other routine events such as infant bathing, pictures, and visitors.**" {emphasis added}*

The **WHO recommends, in an international context**: "Ensure warmth by delaying the baby's first bath to after the first 24 hours." The study above on the benefits of vernix also suggests that baby's first bath be delayed at least twenty-four hours after birth.

Finally, a WHO collaborating centre for training and research in newborn care in India has set-forth a **protocol for newborns** that says "Do not wipe off vernix," and "Do not bathe the newborn." The protocol also states that you should wait at least six hours to wash the baby.

What are your options?

Following the recommendations above, ideally the first bath would be delayed at least 6-24 hours after birth. In the mean time, vernix can be massaged into the skin to provide long-lasting natural moisture or the baby can be gently towed off (ideally while on the mom's chest). Generally, in the routine handling and cuddling of the newborn after birth, the vernix is absorbed into the skin quite quickly.

In the event that you are still in the hospital when you are ready to go ahead with baby's first bath, you could consider packing your own chosen natural baby wash in your hospital bag as an alternative to hospital soaps.

Be aware that if you do choose to delay bathing your newborn or refuse a formal bath entirely, hospital staff may insist that it is required, which is not the case. Any and all procedures can be

refused, even those considered hospital policy. In some instances, a waiver must be signed. In the case of a homebirth, this is a non-issue, but it is important to note that in the case of a waterbirth, the water temperature should be warm enough to sustain the baby's temperature.

Most importantly, discuss your wishes with your entire care staff at the hospital where you deliver your baby and make sure your partner is aware of your wishes, because in all likelihood, you will be so caught up in pushing out a baby and the excitement that goes along with it, that postponing the first bath could easily slip your mind. Inquire ahead of time as to what the hospital's protocol is and make sure that your wishes are known by everyone who will come into contact with your little one.

Newborn Bath With A Difference

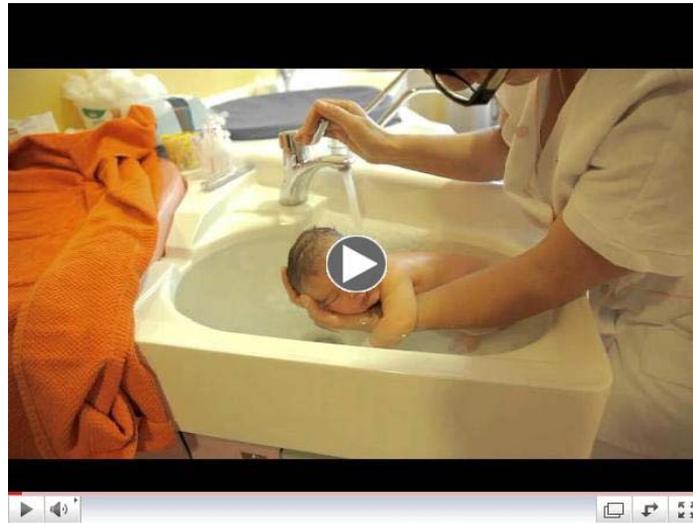
It's interesting to note that not all baths are created equal. In the 1975 book *Birth Without Violence*, French obstetrician Frederick Leboyer, popularized gentle birthing techniques to help ease the transition from the womb to the outside world. In particular, he advocated for the practice of immersing newly-born infants in a small tub of warm water - known as a "Leboyer bath".

The Leboyer bath is generally taken about an hour after birth (or any time when it is possible) in order to reintroduce the baby into a watery environment, as a reminder of the womb, but it can take place at any time during the first three days postpartum when the mother feels ready for it. Mother and baby are to be immersed into a warm bath together. Lights need to be dimmed and the room should be comfortably warm.

Mothers will need some assistance, so it is a good idea to have someone around to lay out some towels and clothes, and hand the baby to the mother after she has gotten into the bath. The bath has an immediate relaxing effect on the baby: the baby may open his eyes or even smile, fall asleep. It has been shown

*to have positive physical effects, pinking up the baby and relaxing any muscle tension. The event will take about 15 to 20 minutes, depending on the baby's reactions.***

Watch the amazing reaction of this baby to a gentle bath in the first days of life outside the womb:



Thalasso Bain Bebe par Sonia Rochel

******<http://www.authenticparenting.info/2011/10/leboyer-bath.html>

Hannah Evangeline's Birth

Our clients share their journeys into the realm of parenthood, where they find their expectations defied and lives forever changed.

Dearest Baby Girl,

On March 20th, 2013 - the first day of spring - the birds announced your arrival with their wild calls and their musical wings. John, the next-door neighbour, told me that he knew when you were born because of the way the birds surrounded the house and called out so

loudly. He, along with your grandparents, aunts and uncles, cousins and friends, from Port Hardy all the way to St. Johns, had all been sitting tight. You were taking your sweet time. Two weeks after your due date; you had put the world on hold.

Things began, on Tuesday, March 19th, after a morning of dancing to the *Happiest Day* - a playlist of early 1990s pop music. I called your Auntie Becky in Winnipeg to tell her that, "I think I'm going to have this baby and I can't stop dancing to Mariah Carey!"

At around 11:00am, my low belly started to ache and tingle. That tingle led to the first surges, which rose and fell throughout the day. Unsure of whether they were contractions that needed professional attention, we called the *Plum* pager. Cat, the midwife on-call, said they sounded like the early stages of labour. We were due for a check up at the hospital, so we decided to pack a bag and meet her there, just in case we couldn't make it back in time for a home birth. Alert and excited, I called your grandma Evangeline who, though away from home at a meeting, had her bags packed and was ready for the call. She hopped on the next Horseshoe Bay ferry, and was at our house in Royston by 6:00pm. At this point the surges were regular and, according to stats, due for the midwives attention. Cat came at 9pm and checked to see where things were at, but still no internal signs of imminent labour - 2cm dilated. I was sure you were on your way, but the midwife suggested having a nice long bath, dinner and the recommended dosage of 2 Tylenol and 2 Gravol, which seemed a little excessive at the time. Based on this, I suspected you would take your time and that we would have a long night a head of us. Your dad measured my progress, kept the woodstove burning and your grandma boiled extra water on the stove, in the event the hot water tank couldn't keep up. Your dad was by my side all night: easing my back pain with deep pressure and comforting me with a low chant that kept us calm and focused.

At the break of dawn, it felt like it was finally time. Peter called the pager and Katie and Cat arrived shortly after with their birthing instruments and experienced hands. I was 5 cm dilated and from the outside, we saw all the signs that things were progressing. The surges were more frequent and more intense, requiring focused breathing. I moved from the yoga ball, to our bed, to the swing just to find that

sweet spot! It was so nice to move my body and change position. If one comfort measure didn't work then there seemed to always be another option. Your father followed me - hands on back, hands on feet, working those acupressure points, and then we moved to the swing. We had built the swing to take some of the pressure off my tired legs and to support my upper body. I could relax and sway side to side on the fabric held securely by Peter's ropes and climbing carabiners, which were well anchored in the rafters of that old farmhouse.



It was here that the water(s) broke. Just like in the movies, a powerful rush of water came gushing out between my legs...

But things did not progress, and instead, at 6:30am the surges slowed down. Surprised by the pause, we took advantage and had glorious nap. Then at 7:45am the powerful surges started up again. For the next 2 hours, after much hard work and constant encouragement, there was still little progress and I was exhausted. I remember locking eyes with Katie and shaking my head, telling her I needed to change course. She gave us our options: to go to the hospital for an epidural and possible interventions or we could do another internal check and

try a procedure, here at home, to guide the head into the right position. I trusted Katie and was comfortable at home, so we stayed put.

After the check at 10:00am, you were sunny side up (posterior) and sideways (transverse). Katie worked her science and her wisdom and my body opened up! She coached me through the next few contractions in a lunge position on the left side and then on the right. Then she coached Peter in what we called the *shake down* - a vigorous hip shake while on all fours. Feeling pressure at all ends, the last stage unfolded. Katie said we should move back to the bedroom because I was going to have this baby and our *standing room only* bathroom would not suffice.

We were focused: I knelt on the bed and grasped onto Peter and Katie took position - unsure of what direction you would land. You found your way down the birth canal, baby girl, and pushed hard against the gates! I felt *the ring of fire, the uncontrollable urge to push*, and two surges later you came out with a full twist. We were so amazed that we didn't notice the placenta come sliding out behind you. This was an incredible moment, breathing in sync with your dad - bearing down together. Then we heard your powerful cry and finally held you in our arms. You had dark hair and a long and lean body. We couldn't take our eyes off you. You were perfect!



When we tell the story today, we laugh and say we birthed you together because of how sore we both were. It made sense that I was sore but your daddy complained of having sore bum cheeks for a week.

I slept well that afternoon and night with you at my breast; and when I couldn't hold you any longer your dad and grandma took their turns. It was a dreamy 48 hours, even without drugs. We barely left the bedroom. And despite it being the beginnings of spring, the skies sent a blanket of snow to tuck us in a little while longer. We stayed in that cocoon for a week. The midwives and our families came and went and made sure we were all healthy and well fed.



Now you are three months old and we still go back into *the cocoon* when we want to escape into our own world. This place is warm and safe; and reminds us of your beautiful birth.

Enamored Mama

We have felt so well cared for by Katie and Cat and the midwifery team at Plum. We felt privileged to have you participate in our birth - that we were able to give our baby girl such a peaceful and loving place to enter into this world. We couldn't have imagined (or accomplished) this without your wisdom and guidance.

We are truly honored to celebrate Hannah Evangeline and her birth story with you. Thank you!

Thank you to our clients. You are why we love what we do--even at 3:00 in the morning.

Sincerely,

Joanne, Emma, Katie & Cat.

Plum Midwifery

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