

ICEA Position Paper

By Elizabeth Kirts & Terriann Shell
Updated 2024

Delayed Bathing

Position

The International Childbirth Education Association (ICEA) encourages evidence-based information for decision making around pregnancy, birth, breastfeeding and new parenting. Recent research has shown that delaying the first bath after birth can have significant impact on the newborn transition and early breastfeeding. Because of this research, we encourage parents and care providers to look at delaying the first bath as an option. This practice is endorsed by regulating bodies and when done right is safe for families and care providers.

Background

With the move to hospitalized birth, it became standard practice to give the first bath fairly soon after birth. Baby would be taken from mom for routine newborn care, bathed and brought back swaddled up and ready to sleep. This practice allowed for the pediatric team to complete their tasks and the OB team to finish up the post-delivery care. This became the “vision of birth. The impact of these practices on mom and baby were not considered for many years. In 1990, an article was published in the Lancet looking at removal of baby from

mom for newborn care and the impact that removal had on breastfeeding. At that same time the push from United Nations International Children’s Emergency Fund (UNICEF) and the World Health Organization (WHO) were forming the Baby Friendly Initiative; looking at birth practices and the effect on breastfeeding began to be studied much more in depth. As practices changed for the better, the bath still remained an early procedure, almost immediately after birth. Whether it was a lack of insight on the effects, or the “gross factor,” the newborn bath was expected to be done right away. Yet, as early as 1998, The Association of Women’s Obstetric, Health, and Neonatal Nurses (AWOHNN), the National Association of Neonatal Nurses (NANN), and WHO recommended that “removal of all vernix is not necessary for hygienic reasons.”

With only preliminary data on the effects of the newborn bath at an early stage, it was dismissed as having little impact and continued to be the standard practice in most hospitals. Meanwhile, skin to skin care immediately after birth was being studied in depth. The recommendation to place baby skin to skin within 5 minutes of birth and to remain there at least one hour and until the first breastfeed is what began the delay in the newborn bath.

Delay the Bath

In 2012, that thinking changed from the newborn bath as a standard care to really looking at when that bath should be done emerged. The WHO gave time parameters stating, “bathing should be delayed until 24

hours after birth. If this is not possible due to cultural reasons, bathing should be delayed for at least six hours. Appropriate clothing of the baby for ambient temperature is recommended. This means one to two layers of clothes more than adults, and use of hats/caps. The mother and baby should not be separated and should stay in the same room 24 hours a day. Around that same time, AWHONN came out with their “Wait for Eight” campaign stating that delaying the bath by at least 8 hours would reduce the instability associated with cold stress.

In 2015, AWHONN pushed this campaign again, encouraging the delay not only for cold stress but also for better stability overall. Their presentation at the annual conference stated that delayed bathing and leaving vernix on the skin would lead to decreases in hypoglycemia, weight loss, jaundice along with better temperature stability and other positive effects due to the antibacterial and antimicrobial properties of vernix.

Vernix and Breastfeeding

In 2012, that thinking changed from the newborn bath as a standard care to really looking at when that bath should be done emerged. The WHO gave time parameters stating, “bathing should be delayed until 24 hours after birth. If this is not possible due to cultural reasons, bathing should be delayed for at least six hours. Appropriate clothing for the baby for ambient temperature is recommended. This means one to two layers of clothes more than adults, and use of hats/caps. The mother and baby should not be separated and should stay in the same room 24 hours a day. Around that same time, AWHONN came out with their “Wait for Eight” campaign stating that delaying the bath by at least 8 hours would reduce the instability associated with cold stress.

In 2015, AWHONN pushed this campaign again, encouraging the delay not only for cold stress but also for better stability overall. Their presentation at the annual conference stated that delayed bathing and leaving vernix on the skin would lead to decreases in hypoglycemia, weight loss, jaundice along with better

temperature stability and other positive effects due to the antibacterial and antimicrobial properties of vernix.

So When Should the Bath Occur?

There is no set time that it should happen. Many parents are delaying that first bath past the hospital stay and doing it at home when they feel ready. The minimum time recommended falls between 6-8 hours after birth (WHO, AWHONN, Save the Children). It is suggested that the bath be done with the parents involved so that they can learn the process and limit separation. Additionally, it is important to get baby back in a skin-to-skin position immediately after to minimize effects from the cold.

Contraindications

There are times when the newborn bath is recommended immediately. If the mom is HIV positive or has a hepatitis virus then a bath is done to limit transmission to others who come in contact with the baby. In some facilities, a bath is also done with chorioamnionitis or significant meconium staining. It is recommended that health care providers use gloves when handling an unbathed baby.

In Summary

Delaying bathing for at least 8 hours after birth protects the newborn’s skin from bacterial invasion, keeps their skin conditioned, keeps their blood sugar stable since bathing might lower their temperature and often causes the baby to cry, both of which can promote hypoglycemia. Delaying the first bath encourages the establishment of breastfeeding along with the bonding that mothers get which being skin-to-skin with your newborn promotes.

References

Akinbi, H. T., Narendran, V., Pass, A. K., Markart, P., & Hoath, S. B. (2004). Host defense proteins in vernix caseosa and amniotic fluid. *American Journal of Obstetrics and Gynecology*

DiCioccio, H, Ady, C, Bena, J, & Albert N (2019) Initiative to Improve Exclusive Breastfeeding by Delaying the Newborn Bath JOGNN Vol 48 Issue 2 pgs 189-196

Delay Diana V. Lipka, RN, BA, MPA, RNC-OB , "Wait for Eight": Improvement of Newborn Outcomes by the Implementation of Newborn Bath Mother/Baby and Lactation, Baycare/ Saint Joseph's Women's Hospital, Tampa, FL

Liberth, M. & Fontan, J (2018) Benefits of Delayed Bathing JOGNN vol 47 Issue 3 pgs S30-S31

Marcia K. Schulz, RNC, MS , Mother/Baby and Lactation, Baycare/ Saint Joseph's Women's Hospital, Tampa, FL (2012) AWOHNN Convention [Preer G¹](#), [Pisegna JM](#), [Cook JT](#), [Henri AM](#), [Philipp BL](#). [Breastfeed Med](#). Delaying the Bath and In-hospital Breastfeeding Rates. Dec;8(6):485-90. doi: 10.1089/bfm.2012.0158. Epub 2013 May 2.

Narendran V. Hoath SB. The Biology of Vernix Caseosa. J Neonatol. > 2002;16:9–17

[Righard L¹](#), [Alade MO](#). [Lancet](#). Effect of Delivery Room Routines on Success of First Breast-feed. 1990 Nov 3;336(8723):1105-7.

Smith, E. Delaying the First Bath 2013 Perinatal Professionals Conference

Visscher, M. O., Utturkar, R., Pickens, W. L., LaRuffa, A. A., Robinson, M., Wickett, R. R., Hoath, S. B. (2011). Neonatal skin maturation--vernix caseosa and free amino acids. *Pediatr Dermatol*, 28(2), 122-132. doi: 10.1111/j.1525-1470.2011.01309."

WHO Maternal, Newborn, Child and Adolescent Health Review Committee

Mardini J, Rahme C, Matar O, Abou Khalil S, Hallit S, Fadous Khalife M-C. Newborn's first bath: any preferred timing? A pilot study from Lebanon. *BMC Res Notes*. 2020;13:430. 10.1186/s13104-020-05282-0

Anderson J. An Organization-Wide Initiative to Implement Parent-Performed, Delayed Immersion Bathing. *Nurs Womens Health*. 2021;25:63-70. 10.1016/j.nwh.2020.11.006

Wisniewski JA, Phillipi CA, Goyal N, Smith A, Hoyt AEW, King E, et al. Variation in Newborn Skincare Policies Across United States Maternity Hospitals. *Hosp Pediatr*. 2021;11:1010-9. 10.1542/hpeds.2021-005948