



### Question: Why do newborns sometimes receive eye ointment immediately after birth?

**Answer:** Eye ointment is given to newborns to prevent pink eye in the first month of life, called *ophthalmia neonatorum* (ON). The ointment is meant to kill bacteria in the eye—mainly gonorrhea, a sexually transmitted infection. If left untreated, pink eye from gonorrhea can cause serious eye damage and blindness in as little as 24 hours.

### Question: What causes newborn pink eye?

**Answer:** Pink eye can be caused by viruses, bacteria, chemicals, and blocked tear ducts. The most common cause of newborn pink eye is chlamydia, a sexually transmitted infection. The most serious type of newborn pink eye is from gonorrhea, which now causes less than 1% of cases. Other bacteria (like staph and strep) from the mother, hospital, or home environment cause 30%–50% of cases—these cases are easily treated and not serious.

### Question: Is erythromycin eye ointment effective at preventing newborn pink eye?

**Answer:** Researchers have found that erythromycin is about 80% effective at preventing pink eye from gonorrhea and might also offer some protection against pink eye from chlamydia. Evidence suggests that erythromycin might be effective at reducing overall bacteria in the eye and protect against pink eye from staph bacteria. However, the growing problem of antibiotic resistance (with gonorrhea, staph, and strep) means that erythromycin is probably less effective at preventing newborn pink eye today.

### Question: Are there any other options?

**Answer:** There are other ways to prevent newborn pink eye.

- The pregnant person can be screened for chlamydia and gonorrhea and treated for a positive test result with antibiotics, along with the sexual partner(s)
- Eye drops of the mother's first milk have been shown to reduce newborn pink eye from staph bacteria.

- The mother could follow a wait-and-see approach, in which antibiotics are used only when necessary to treat an infection. Parents who decline eye ointment should seek immediate treatment for pus-producing pink eye.

### Benefits of Erythromycin Eye Ointment:

- Has been shown to help protect against newborn pink eye from gonorrhea
- May offer some protection against less serious types of newborn pink eye from chlamydia and other bacteria picked up in the hospital and home environment, like staph
- Helps protect the baby if the mother had a negative screening test, but then got a sexually transmitted infection (such as due to a partner's infidelity)

### Risks of Erythromycin Eye Ointment:

- Eye irritation, called chemical pink eye, can occur
- Blurred vision could interfere with bonding by disrupting early eye gazing between the baby and parents
- Erythromycin is only 80% effective at preventing newborn pink eye from gonorrhea and is probably less effective now due to growing bacterial resistance
- Group B Strep bacteria are becoming resistant to erythromycin, and there are also signs of resistance among staph bacteria

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“Given the fact that other options can be used to safely prevent and treat newborn pink eye, parents should have the right to accept or decline routine eye ointment.”

1. American Academy of Pediatrics (2015). Prevention of neonatal ophthalmia. In: Kimberlin DW, Brady MT, Jackson MA, and Long SS, eds. Red Book, 30th Edition: 2015 Report of the Committee on Infectious Diseases.
2. Darling, E. K. and H. McDonald (2010). "A meta-analysis of the efficacy of ocular prophylactic agents used for the prevention of gonococcal and chlamydial ophthalmia neonatorum." J Midwifery Womens Health 55(4): 319-327.
3. Kapoor VS, Whyte R, Vedula SS. Protocol: Interventions for preventing ophthalmia neonatorum. Cochrane Database of Systematic Reviews 2016, Issue 9. Art. No.: CD001862.



## YOUR POSTPARTUM PLAN

Everyone's birth journey is different, and so is their postpartum experience. Think through different scenarios.

### ASK YOURSELF...

- *What's your postpartum plan?*
- *Who do you have around to support you?*
- *What does that support look like?*
- *Will you need help with pets, other children, meals, housekeeping?*

## NORMAL



- Vaginal soreness
- Incision soreness
- Nervousness about bowel movements
- Hemorrhoids
- Vaginal discharge
- Postpartum contractions/after-pains
- Colostrum and/or leaking breasts
- Breast changes/heaviness
- "Baby Blues" around 5-7 days postpartum



## WARNING

- Excess bleeding (soaking a pad an hour, losing large clots)
- Chest pain and shortness of breath
- Fever
- Pain in your legs
- Headache, dizziness, and vision changes
- Streaks or lumps in your breasts, especially if you're feverish
- Pain with urination
- Prolonged sadness and anxiety

**CALL YOUR CARE PROVIDER IMMEDIATELY**



## SUPPORT TIPS

- Partners and support networks play a big role
- Support lessens risks for Postpartum Mood Disorders
- Encourage them to settle in and bond with baby
- Take baby while they nap
- Limit unnecessary visitors
- Make sure household tasks are taken care of
- Proper nutrition for you and them
- Hydration
- Help them get up and move around as needed
- Encourage sleep!
- If something is "off" you may notice before they do, contact provider and support network
- Have doula and care provider contact info handy
- Consider hiring a postpartum doula to help not only your partner but the whole family!

## RESOURCES

Postpartum Support International  
Postpartum Stress Center

### PSI Helpline:

1-800-944-4773

#1 En Español or #2 English

OR TEXT: 503-894-9453

[M]OTHERBOARD RESOURCES

# THE FOURTH TRIMESTER



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# THE FOURTH TRIMESTER

Adapted from Katie Amodei, Parent Map, 2010

## ALL BABIES ARE BORN “A BIT TOO EARLY”

Humans birth their babies a bit on the “early” side when compared with other mammals. James McKenna, Ph.D., professor of anthropology at Notre Dame University, believes this is because when primitive women evolved to stand up on two legs, the shape of the female pelvis became narrower. This resulted in human babies being born three to four months earlier, before their heads grew too large to pass safely through the birth canal.

Many mammal babies can walk, even run when they’re born, but human babies are born with immature nervous systems. A human newborn’s brain is only about 25 percent of its adult weight at birth, while most other mammals are born having 60 percent to 90 percent of their adult brain size. This could be why babies can’t easily regulate their breathing, body temperature, and heart rate.

## YOUR BABY’S FOURTH TRIMESTER

“When babies are first born, they don’t have the brain maturity to deal with the outside world,” says Jennifer McArthur, co-director of the Northwest Association for Postpartum Support. “They depend on their parents for basic survival, but also for soothing, because they just don’t know how to soothe themselves until they are about 4 months old.”

Some experts say human babies need the first three months of life to give their brain and central nervous system the time needed to mature. This is called the **FOURTH TRIMESTER**.

## SOOTHING YOUR BABY

Harvey Karp, M.D., assistant professor of pediatrics at UCLA and author of *The Happiest Baby on the Block*, discovered that colic is basically nonexistent in several cultures around the world.



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“I studied the Kung San tribe of South Africa and discovered that their babies very rarely cry. Mothers soothe and calm their babies very quickly. They carry them all day long while walking miles a day,” says Karp. “They also nurse their babies 50 to 100 times a day, and sleep with their baby on top of them.”

Karp says the American approach of having a newborn sleep in a separate room from his parents does not work well for babies. Based on his research, Karp created a method that he says can reduce or eliminate, crying and colic symptoms in young babies.

“All infants are born with an ‘off’ switch for crying,” Karp explains. “Inside the uterus they get constant holding and rocking, and the noise in there actually is louder than a vacuum cleaner. Then suddenly they are born and it’s quiet and still. So the best way to activate a baby’s calming reflex is to emulate the movements and noises that babies experience inside the uterus. But you have to do it exactly right.”

## DR KARP’S “5 S’S”

- **SWADDLING:** Tight swaddling provides the continuous touching and support the fetus experienced while still in the womb.
- **SIDE OR STOMACH POSITION:** Karp recommends placing a baby on her left side to help with digestion, or on her stomach to provide reassuring support. Once the baby is sleeping peacefully, you can turn her onto her back, which experts say is the safest sleep position in preventing Sudden Infant Death Syndrome (SIDS).
- **SHUSHING SOUNDS:** These sounds imitate the continual whooshing sound made by the blood flowing through arteries near the womb. Karp recommends parents run a vacuum cleaner or hair dryer a safe distance from the baby until she falls asleep, then leave a fan or another form of white noise on while she sleeps.
- **SWINGING:** Every movement mom made while baby was in utero created a swinging motion in the womb. Rocking, swinging movements, car rides and using an infant swing can all help soothe a baby.
- **SUCKING:** Sucking has its effects deep within the nervous system. It triggers the calming reflex and releases natural chemicals within the

brain. This can be accomplished by allowing the baby to suck on the breast, a bottle, a pacifier or even a finger.

## YOUR FOURTH TRIMESTER

The postpartum period also brings hormonal changes, stress, and sleep deprivation for you too. We need to take care of ourselves. Life after baby will never be the same, so we need to find compassion and grace accept our “new normal.”

### TAKING CARE OF YOURSELF

- **SLEEP WHEN BABY SLEEPS:** Housework and responsibilities can wait. Being sleep deprived makes everything else in life next to impossible to manage.
- **INVITE USEFUL FRIENDS:** Some friends require more “hosting” than others. In the early days, stick to inviting friends and family over who will do something useful: Cook food, fold laundry, do dishes, clean up, entertain older children, walk the dog, etc.
- **LISTEN TO YOUR BODY:** Try not to push it with returning running around as usual. After birth, your bleeding is a good indicator as to whether or not you overdid it. If your bleeding starts back up again, you were probably on your feet too much and need to rest.
- **WATCH YOUR MOOD:** People usually know about postpartum depression, but many don’t know about other postpartum mood disorders including postpartum anxiety and postpartum OCD. If you feel like what you’re experiencing isn’t normal (or your partner or friends tell you they’re worried) make sure you see a mental health professional.
- **MAKE A PROMISE:** In many ways your life will never be the same. If this feels crushing to you pick one thing from your “former” life that you promise to return to after a year or two. Something that is an important part of who you are (painting, yoga, writing, etc.)
- **KNOW YOUR RIGHTS:** We know that staying home with baby is a



luxury many can't afford. Research what your rights are for paid leave and try to work out a plan in advance.

## FOURTH TRIMESTER RESOURCES

### Books/CDs/DVDs

[The Happiest Baby on the Block](#), by Harvey Karp, M.D.

[The Happiest Baby on the Block DVD](#) and The Happiest Baby on the Block “Super-Soothing” Calming Sounds CD.

[The Fourth Trimester: And You Thought Labor Was Hard](#), by Amy Einhorn

[The Fourth Trimester](#), by Brenda Eheart

[Sleeping with Your Baby: A Parent's Guide](#), by James J. McKenna, Ph.D.

[The 7 Stages of Motherhood: Making the Most of Your Life as a Mom](#), by Ann Pleshette-Murphy

## TIPS FOR EFFECTIVE SWADDLING

Double-swaddling keeps a baby's arms and legs tightly wrapped. To do it, try:

- Swaddling with one receiving blanket, then another on top
- Swaddling once with a receiving blanket then putting the swaddled baby in an infant sleep sack
- Using a swaddling product such as SwaddleMe by Kiddopotamus

## Postpartum Support International Helpline

1-800-944-4773

#1 En Espanol or #2 English

OR TEXT: 503-894-9453



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TAKE CARE OF YOURSELF  
You can't fill others up from an empty cup.



# Mothering the New Mother

*The support of family and friends is so valuable to a new mother. Here are some suggestions for ways you can help the new family.*

- ♥ Goal for the new mother: no shopping, no house cleaning, no laundry, no meal preparation for 2 weeks. Her work is to take care of herself and her baby, and to enjoy time with her new family.
- ♥ Be understanding if the new family is hesitant to have lots of visitors, especially in the first 72 hours after birth.
- ♥ The idea of entertaining house guests is overwhelming. When you visit, let the new family know you've come to listen or to help out and you don't expect to be entertained.
- ♥ Sometimes a new mother needs alone time. Other times she might really enjoy socializing. Offer to take a walk with her and the baby or offer to watch the baby while she gets some fresh air.
- ♥ Help the new mother enjoy a bath or a shower (aromatherapy or herbs are especially soothing). Someone can clean the tub for her before each bath or watch the baby while she showers.
- ♥ Ask the new mother or her partner to put a list of chores on the fridge, then when you visit you can pick something to help out with.
- ♥ Help her keep plenty of healthy snacks on hand. Or even better, organize meals to be brought to the new family.
- ♥ Remind the new family what a great job they are doing.

*Know that your love and support are essential and greatly appreciated  
(even if the new family is too tired to express it!)*



# YOUR BABY birth toolkit



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## YOUR CARE TEAM

### PEDIATRICIAN:

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

### LOCAL CHILDREN'S HOSPITAL:

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

### MIDWIFE OR PHYSICIAN:

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

### DOULA OR OTHER SUPPORT:

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

### KNOWN HEALTH CONDITIONS:

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## CALL IMMEDIATELY



#### JAUNDICE -

Yellow skin and eyes. Can be normal or warrant closer attention.



#### BLUE LIPS/BODY -

Blue hands/feet are normal. Blue lips and core is not normal, indicating poor oxygen.



#### LESS WET/POOPY DIAPERS -

Dehydrated, feeding issues, call lactation support and care provider ASAP.



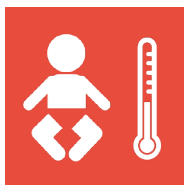
#### TROUBLE BREATHING -

Nostrils flared, tummy sucking in, working hard to breathe.



#### VOMITING -

Forceful, baby in pain, bloody stool, bloating, especially if vomit is green.



#### FEVER -

Armpit temp over 99° F call provider for further comfort and care instructions.

# SAVE YOUR LIFE:

## Get Care for These POST-BIRTH Warning Signs

Most women who give birth recover without problems. **But any woman can have complications after giving birth.** Learning to recognize these POST-BIRTH warning signs and knowing what to do can save your life.

### POST-BIRTH WARNING SIGNS

**Call 911**  
if you have:

- ☐ **P**ain in chest
- ☐ **O**bstructed breathing or shortness of breath
- ☐ **S**eizures
- ☐ **T**houghts of hurting yourself or someone else

**Call your healthcare provider**  
if you have:

(If you can't reach your healthcare provider, call 911 or go to an emergency room)

- ☐ **B**leeding, soaking through one pad/hour, or blood clots, the size of an egg or bigger
- ☐ **I**ncision that is not healing
- ☐ **R**ed or swollen leg, that is painful or warm to touch
- ☐ **T**emperature of 100.4°F or higher
- ☐ **H**eadache that does not get better, even after taking medicine, or bad headache with vision changes

**Trust your instincts.**  
ALWAYS get medical care if you are not feeling well or have questions or concerns.

**Tell 911 or your healthcare provider:**

"I gave birth on \_\_\_\_\_ and  
(Date)  
I am having \_\_\_\_\_."  
(Specific warning signs)

**These post-birth warning signs can become life-threatening if you don't receive medical care right away because:**

- **Pain in chest, obstructed breathing or shortness of breath** (trouble catching your breath) may mean you have a blood clot in your lung or a heart problem
- **Seizures** may mean you have a condition called eclampsia
- **Thoughts or feelings of wanting to hurt yourself or someone else** may mean you have postpartum depression
- **Bleeding (heavy)**, soaking more than one pad in an hour or passing an egg-sized clot or bigger may mean you have an obstetric hemorrhage
- **Incision that is not healing, increased redness or any pus** from episiotomy or C-section site may mean you have an infection
- **Redness, swelling, warmth, or pain** in the calf area of your leg may mean you have a blood clot
- **Temperature of 100.4°F or higher, bad smelling vaginal blood or discharge** may mean you have an infection
- **Headache (very painful), vision changes, or pain in the upper right area of your belly** may mean you have high blood pressure or post birth preeclampsia

**GET HELP**

My Healthcare Provider/Clinic: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Hospital Closest To Me: \_\_\_\_\_





### Q & A

**Question:** Why do we give Vitamin K to newborns? What are the benefits and risks?

**Answer:** Vitamin K is given to prevent a rare but possibly deadly brain bleed in the first 6 months of life. The benefit is protection against bleeding in the brain and stomach. The risks of the shot include pain at the injection site, bruising, and swelling.

**Question:** What is Vitamin K?

**Answer:** Vitamin K is a vitamin we need to clot blood. We do not make Vitamin K ourselves, and we get most of our Vitamin K from plants. Babies are born with very small amounts of Vitamin K. There is very little Vitamin K in breast milk. Babies who are exclusively breastfed have low Vitamin K levels until they start eating solid foods at around six months.

**Question:** What is Vitamin K Deficiency Bleeding?

**Answer:** A baby who does not have enough Vitamin K can start bleeding spontaneously, without warning. This type of bleeding can happen after birth (early bleed), in the first week of life (classical bleed), and from week two until six months (late bleed).

Late bleeding is the most dangerous kind, because it often starts out as bleeding in the brain. These babies do not have any type of head trauma— they simply start bleeding because they cannot clot anymore.

**Question:** How often does this type of late bleeding occur?

**Answer:** Late bleeds are rare, but they can be prevented with Vitamin K. Late bleeds happen to:

- 4 to 7 babies out of every 100,000 who do not receive any Vitamin K at birth; more common in Asian countries
- 0 to 0.9 babies out of every 100,000 who receive 2 mg of oral Vitamin K1 after birth, at 4 to 6 days, and at 4 to 6 weeks OR who receive 2 mg of oral Vitamin K1 after birth and 1 mg oral Vitamin K1 every week for 3 months
- 0 to 0.4 babies out of every 100,000 who receive 1 mg injectable Vitamin K1 after birth

### Myths vs. Facts

**There are several myths on the internet about Vitamin K:**

**Myth:** You do not need Vitamin K if you have a gentle birth.

**Fact:** Late bleeds can happen to any baby who is exclusively breastfed and does not receive Vitamin K.

**Myth:** The shot causes leukemia.

**Fact:** Research has shown that the shot does not cause leukemia.

**Myth:** You do not need Vitamin K if you use delayed cord clamping.

**Fact:** There is little-to-no Vitamin K in cord blood and taking extra Vitamin K during pregnancy has not been shown to prevent newborn bleeds.

**Myth:** The shot is full of toxins.

**Fact:** The ingredients in the Vitamin K shot are thought to be safe for babies. Also, you can request a preservative-free version of the shot if you like.

**Myth:** One dose of oral Vitamin K1 at birth is just as effective as the shot.

**Fact:** The shot is more effective than a single oral dose. There are two oral regimens that seem to be nearly as effective as the shot. However, there is no FDA-approved oral version in the U.S.

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**The main risk factors for bleeding are exclusive breastfeeding and not receiving enough Vitamin K after birth."**

1. [Mihatsch et al. \(2016\)](#). "Prevention of Vitamin K Deficiency Bleeding in Newborn Infants: A Position Paper by the ESPGHAN Committee on Nutrition. JPN Vol. 63(1).
2. [Puckett and Offringa. \(2000\)](#). "Prophylactic vitamin K for vitamin K deficiency bleeding in neonates." Cochrane Database Syst Rev (4): CD002776.
3. [Shearer \(2009\)](#). "Vitamin K deficiency bleeding in early infancy." Blood Reviews 23(2): 49-59.
4. [Van Hasselt et al. \(2008\)](#). "Prevention of Vitamin K deficiency bleeding in infants." Pediatrics 121(4): e857.





## "THE MAGICAL HOUR"



### BABY'S STAGES OF COMING INTO THEMSELVES

- The Birth Cry
- Relaxation
- Awakening
- Activity
- Rest
- Crawling
- Familiarization
- Suckling
- Sleep



## HAVE ON HAND – FOR YOU

- ☐ Ibuprofen - Over-the-counter medicine for pain and swelling.
- ☐ Peri-bottle - Squirt bottle to dilute urine so it doesn't sting when you pee (hospital or provider should give you this).
- ☐ Adult Diapers - Embarrassment aside, adult diapers have better coverage in the early days with bleeding similar to a heavy period.
- ☐ Sitz Bath - Herbs you can put in the tub or a toilet sitz bath to soothe and promote healing.
- ☐ Stool Softener - Over-the-counter medication to help you strain less the first time you go poo after birth
- ☐ Belly Binder if you've had a cesarean
- ☐ Healthy snacks and water close by at all times



## BREAST/CHEST CRAWL FOR THE WIN

- \* Immediately after birth, place baby on your chest
- \* Soon they will start "rooting," bobbing their head, licking
- \* Help them not fall off your chest
- \* May take 1-2 hours
- \* Colostrum smells similar to amniotic fluid, they may smell their hands for guidance



### QUESTIONS FOR PROVIDER

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