



Caring for a Premature Baby: What Parents Need to Know

- Premature birth occurs in about 11 to 13 percent of pregnancies in the US.
- Almost 60 percent of twins, triplets, and other multiple deliveries result in preterm births.

It is important to recognize that preterm deliveries, even if late preterm, should never be done for the convenience of the mother or obstetrician. Research has shown that late preterm babies have significantly greater risk for negative outcomes, and all efforts should be made to have babies reach full term. *See Let Baby Set the Delivery Date: Wait until 39 Weeks if You Can* ([/English/ages-stages/prenatal/delivery-beyond/Pages/Let-Baby-Set-the-Delivery-Date-Wait-until-39-Weeks-if-You-Can.aspx](#)).



Characteristics of Babies Born Premature

While the average full-term baby weighs about 7 pounds (3.17 kg) at birth, a premature newborn might weigh 5 pounds (2.26 kg) or even considerably less. But thanks to medical advances, children born after twenty-eight weeks of pregnancy, and weighing more than 2 pounds 3 ounces (1 kg), have almost a full chance of survival; eight out of ten of those born after the thirtieth week have minimal long-term health or developmental problems, while those preterm babies born before twenty-eight weeks have more complications, and require intensive treatment and support in a neonatal intensive care unit (NICU).

How Your Premature Baby Looks

- The earlier your baby arrives, the smaller she will be, the larger her head will seem in relation to the rest of her body, and the less fat she will have.
- With so little fat, her skin will seem thinner and more transparent, allowing you actually to see the blood vessels beneath it. She also may have fine hair, called lanugo, on her back and shoulders.
- Her features will appear sharper and less rounded than they would at term, and she probably won't have any of the white, cheesy vernix protecting her at birth, because it isn't produced until late in pregnancy. Don't worry, however; in time she'll begin to look like a typical newborn.
- Because she has no protective fat, your premature baby will get cold in normal room temperatures. For that reason, she'll be placed immediately after birth in an incubator (often called an isolette) or under a special heating device called a radiant warmer. Here the temperature can be adjusted to keep her warm.
- After a quick examination in the delivery room, she'll probably be moved to the NICU.

How Your Premature Baby Acts

- You also may notice that your premature baby will cry only softly, if at all, and may have trouble breathing. This is because her respiratory system is still immature.
- If she's more than two months early, her breathing difficulties can cause serious health problems, because the other immature organs in her body may not get enough oxygen. To make sure this doesn't happen, doctors will keep her under close observation, watching her breathing and heart rate with equipment called a cardio-respiratory monitor.

- If she needs help breathing, she may be given extra oxygen, or special equipment such as a ventilator; or another breathing assistance technique called CPAP (continued positive airway pressure) may be used temporarily to support her breathing. [Back to top](#)

Preemie Parents: How to Cope with the Stress

As important as this care is for your baby's survival, her move to the special-care nursery may be wrenching for you. On top of all the worry about her health, you may miss the experience of holding, breastfeeding, and bonding with her right after delivery. You won't be able to hold or touch her whenever you want, and you can't have her with you in your room.

To deal with the stress of this experience, ask to see your baby as soon as possible after delivery, and become as active as you can in caring for her. *See [How You Can Participate in the Care of Your Baby in the NICU \(/English/ages-stages/baby/preemie/Pages/How-You-Can-Participate-in-the-Care-of-Your-Baby-in-the-NICU.aspx\)](#).*

- **Spend as much time with her in the special-care nursery as your condition—and hers—permit.** Even if you can't hold her yet (until she's stable), touch her often. Many intensive care units allow parents to do skin-to-skin care for their babies once the infants don't require major support to their organ systems.
- **You can also feed her as soon as your doctor says it's OK.** The nurses will instruct you on either breast- or bottle-feeding techniques, whichever is appropriate for the baby's needs and your desires.
 - **Some premature babies may initially require fluids given intravenously or through a feeding tube that passes through the mouth or nose into the stomach.** But your breast milk is the best possible nutrition, and provides antibodies and other substances which enhance her immune response and help her resist infection.
 - **In some cases, if it's too difficult for your premature baby to nurse at the breast, you can pump breast milk for feeding through a tube or bottle.** Once you are able to start breastfeeding directly, your baby should nurse frequently to increase your milk supply. Even so, mothers of premature babies sometimes find it necessary to continue using a breast pump in addition to feeding frequently to maintain a good milk supply. *See [Providing Breastmilk for Premature and Ill Newborns \(/English/ages-stages/baby/breastfeeding/Pages/Providing-Breastmilk-for-Premature-and-Ill-Newborns.aspx\)](#) and [Tips for Freezing & Refrigerating Breast Milk \(/English/ages-stages/baby/breastfeeding/Pages/Storing-and-Preparing-Expressed-Breast-Milk.aspx\)](#).*
- **You may be ready to return home before your newborn is, which can be very difficult, but remember that your baby is in good hands, and you can visit her as often as you'd like.** You can use your time away from the hospital to get some needed rest and prepare your home and family for your baby's homecoming, and read a book for parents on caring for preterm babies (<http://shop.aap.org/Newborn-Intensive-Care-What-Every-Parent-Needs-to-Know-3rd-Edition-Paperback>). Even after you've returned home, if you participate in your infant's recovery and have plenty of contact with her during this time, the better you'll feel about the situation and the easier it will be for you to care for her when she leaves the special care nursery.
- **As soon as your doctor says it's OK, gently touch, hold, and cradle your newborn.**
- **Your own pediatrician may participate in, or at least will be informed about, your infant's immediate care.** Because of this, he will be able to answer most of your questions.

Your baby will be ready to come home ([/English/ages-stages/baby/preemie/Pages/Going-Home-With-Your-Premie.aspx](#)) once she's breathing on her own, able to maintain her body temperature, able to be fed by breast or bottle, and gaining weight steadily.

Additional Information:

- [Premie Milestones \(/English/ages-stages/baby/preemie/Pages/Premie-Milestones.aspx\)](#)
- [Health Issues of Premature Babies \(/English/ages-stages/baby/preemie/Pages/Health-Issues-of-Premature-Babies.aspx\)](#)
- [Challenges Faced by Parents of Children with Congenital Heart Disease \(/English/health-issues/conditions/heart/Pages/Challenges-Faced-by-Parents-of-Children-with-Congenital-Heart-Disease.aspx\)](#)

- [Depression During & After Pregnancy: You Are Not Alone \(/English/ages-stages/prenatal/delivery-beyond/Pages/understanding-motherhood-and-mood-baby-blues-and-beyond.aspx\)](#) [Back to Top](#)

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