

## New Blood

Outer Womb – Robin Lim, C.P.M  
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### Talking Points

**Robin Lim** is an internationally-recognized midwife, well-known author and talented poet. Her non-profit Indonesian birthing and educational clinics **Bumi Sehat** have saved hundreds of lives and delivered thousands of babies over the last decade, serving the poor and medically disenfranchised citizens of Bali and, far away, in the tsunami-ravaged province of Aceh, Sumatra. After 13 years of service and frequent financial challenges, “Ibu” (Mother) Robin and her organization remain indefatigably committed to changing the world, one gentle birth at a time.

- ❖ Did you know that at the time of birth, up to one-third of a baby’s blood supply is traveling from the placenta via the umbilical cord to the baby? When a baby’s umbilical cord is clamped early the baby is missing out on all of this blood.
- ❖ If parents realized that this much blood was still transferring from the placenta to the baby would they allow early cord clamping or would they insist on delayed cord clamping?
- ❖ What would happen if the hospital robbed a mother or other adult of 1/3 of their blood supply without consent?
- ❖ “A mountain of research points to the fact that by simply delaying the clamping and cutting of babies’ umbilical cords, our newborn children would suffer less trauma, fewer inner cranial hemorrhages, and have higher stores of iron at 4 months of age (and even up to 6 and 8 months).” (30)
- ❖ The nutrients, oxygen, and stem cells present in the blood ensures that the bodies’ tissues are properly vitalized and nourished which translates to “improved health, heightened immunity, increased intelligence and potential longevity.” (31)
- ❖ If the umbilical cord has not been severed the baby must stay with the mother during this time allowing for skin-to-skin contact.
- ❖ If an intervention by definition is an action that intervenes or interferes why isn’t severing the early severing of the umbilical cord considered an intervention? However, in medical text delayed cord severance has been called an “intervention.”

- ❖ “Immediate umbilical cord clamping and cutting began being customary in the 1960s when an unproved hypothesis that immediate cord severance would prevent jaundice arose among physicians.” Yet many babies who have had their cords immediately severed need phototherapy for pathological jaundice.
- ❖ Another argument for immediate cord clamping and cutting is an increased concentration of hemoglobin. This hasn’t harmed babies and is not a significant argument.
- ❖ Immediate cord severance wasn’t questioned when it was introduced, no research was conducted, it was just convenient.
- ❖ “The research proves that immediate or early umbilical cord severance is detrimental to our newborn children,” why aren’t more people insisting on this practice being questioned? (31)
- ❖ “In 1995 the American Academy of Obstetricians and Gynecologists (ACOG) released Educational Bulletin #216, which recommended immediate cord clamping in order to obtain cord blood for blood-gas studies in case of a future lawsuit. They did this because deviations in blood-gas values at birth can reflect the presence or lack of asphyxia. Lack of asphyxia at birth is viewed as proof in a court of law that a baby was healthy at birth. After receiving an unpublished letter from Dr. George M. Morley, ACOG withdrew bulletin #216 in the February 2002 issue of its journal, Obstetrics and Gynecology. This action released them of the liability that resulted from it. But if ACOG has withdrawn its erroneous instruction to doctors to immediately clamp and cut babies’ umbilical cords, why does the practice continue?” (32)
- ❖ Midwife Robin Lim operates education and childbirth centers in Indonesia and the Philippines where nearly 7,000 babies have safely come into the world in high-risk, low-resource settings. All of these babies enjoyed delayed umbilical cord clamping and cutting or non-cord severance. The babies have not experienced any ill effects despite this practice.
- ❖ Non-cord severance is referred to as full lotus birth. “Full lotus birth is simply allowing the umbilical cord and placenta to stay intact, until the cord naturally dries and falls away, with no violence... Normal lotus birth happens anytime we see trinity of the baby, cord and placenta.” (32)
- ❖ “Delayed umbilical cord clamping and cutting makes it possible for babies to be bright and energetic.” (33) This has allowed the babies born at the center to have a 100% breastfeeding rate upon discharge. “Babies subjected to immediate cord severance suffer from newborn anemia, and all their bonding and breastfeeding activities are impaired.” (33) Again, immediate cord clamping denies a baby one-third of their blood supply.
- ❖ Because stem cells are valuable, hospitals sell babies’ blood for transfusions and for research. Other just throw out this valuable blood in addition to robbing the child of it.
- ❖ Robin asks, “If adults may only donate up to 10% of their blood, why are doctors taking up to 33% of our babies’ blood, without their consent?” (33)

## Resources

Full references for each article are available at <http://pathwaystofamilywellness.org/references.html>

Robin Lim’s Foundation: <http://www.bumisehatfoundation.org/>

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