

Early arrival:  
when a baby  
comes too soon

While most pregnancies last between 37 and 42 weeks, it's not unusual for babies to arrive earlier. If a baby is born before the end of the 37th week, it's considered premature or pre-term. About eight in every hundred babies born in Australia are premature.

Babies arrive prematurely because:

- there are problems with the placenta or cervix
- it's a multiple pregnancy
- the waters have broken
- the mother has high blood pressure or diabetes
- the mother has an infection, particularly in the urinary tract.

There's also a higher risk of premature labour in women who haven't had regular antenatal care, but often the cause is unknown. If you have any symptoms of labour before 37 weeks, contact your midwife, doctor or hospital immediately.

It's safer for premature babies to be born in large, well-equipped hospitals with staff specially trained to care for small babies (especially those born before 33 weeks). If you live in a country area, it is important to go to the hospital as soon as possible so that you can be transferred to a hospital better equipped to handle a premature baby.

The chances of survival depend on how early the baby arrives and how quickly expert care is available. Before 26 weeks of pregnancy about 60 out of 100 babies will survive birth. By 28 to 30 weeks of pregnancy 98 out of 100 babies will survive birth.

The risk of a disability depends on how premature the baby is. About 40 per cent of babies born at 24 weeks have a risk of a moderate or severe disability such as cerebral palsy, blindness, deafness or an intellectual disability. Babies born close to the end of pregnancy usually have no long-term problems.

Because their organs aren't fully developed, premature babies may experience:

- **Lung problems** Premature babies often need help to breathe because their lungs aren't fully developed. Steroid injections are often given to women before a pre-term birth to reduce the risk of lung and other problems in pre-term babies.
- **Apnoea** This means the baby stops breathing. It happens because the part of the brain that controls breathing isn't fully developed. Premature babies are monitored closely so they can be helped to restart breathing if it stops.
- **Difficulty feeding** If babies can't suck, they may need feeding through a tube until they're ready to suck and swallow.
- **Trouble staying warm** Premature babies' natural thermostats haven't developed properly so they can't control their own body temperature. They may need to be cared for in a humidicrib or under special overhead heaters until they are mature enough to regulate their own temperature.
- **Jaundice** The baby's skin may be yellow because the liver is still not working properly. For more information, see *After your baby is born* on page 86.

### Will my baby survive?

Normally, each extra week spent growing in the womb increases a baby's chance of survival dramatically. The earlier the baby is born, the greater the risk to survival. Babies born before 32 weeks of pregnancy are more likely to survive if they have specialised medical and nursing care in a neonatal intensive care unit.

If your baby is born early, it's really good for you and your partner to hold your baby in close, skin-to-skin contact for long periods regularly. It's called "kangaroo care". Your stable body temperature helps to regulate your baby's temperature more smoothly than an incubator and, because your baby doesn't have to use a lot of energy to stay warm, they grow and develop faster. Kangaroo care helps

you build your relationship with your baby, and helps you feel closer to them. It can also help you establish and maintain your milk supply. Pre-term babies grow better on breastmilk.

Before 24 weeks, the chance of survival is very small and intensive care is not routinely given to babies born this early. If it looks as though your baby might be born before 24 weeks, your doctor will discuss this with you. It's important to be involved in the decision about whether or not to try to save your baby. To help you decide what is best for you and your family, your doctor will give you as much information as possible.

At 24 weeks, the survival rates are still low, but they improve dramatically after that time. By 28 weeks, more than 90 out of a 100 babies born will survive with highly specialised care in a neonatal intensive care unit.

If you want to know more about premature birth and what it might mean for you and your baby, you can read *Outcomes for premature babies: An information booklet for parents*. It's available from your doctor, or visit [www.psn.org.au](http://www.psn.org.au)

If your baby is premature or likely to be born prematurely, you may want to ask:

- where is the best place for my pre-term baby to be born
- what can be done before birth to improve my baby's chances
- what happens after my baby is born
- what if my baby is born in a hospital without a neonatal intensive care unit (NICU)
- can I breastfeed my baby
- how long will my baby be in hospital
- how will my pre-term baby develop in the long-term
- where can we find more information about pre-term birth?

"I was having twins and went into labour at 28 weeks. Looking back, I can remember lying in the ambulance going to the nearest hospital which had specialised care, and I was calm. I didn't panic. Somehow I think nature programs you to cope in these difficult situations. You just do what you have to do. Of course, after it was all over, I cried for a whole day. The twins were very sick at first, and they were monitored carefully for the first three years, but they're fine now." Carol