

Description

Infant Bathing

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Published in The Practising Midwife Volume 25 Issue 03 March 2022
https://doi.org/10.55975/BLZH8646

Introduction

As well as being a sensory organ, the skin performs several important functions including moisture retention, thermoregulation, vitamin D synthesis and protection from chemical, mechanical and thermal injury.[1] The skin's ability to fulfil these functions is dependent upon its pH level remaining balanced and its hydration being maintained, as disruption of these properties can result in skin complaints such as cradle cap, nappy rash, atopic dermatitis, baby acne and candidiasis (thrush).[2] Newborn babies' skin is known to be particularly sensitive and this fragility needs to be taken into consideration when giving parents advice about appropriate products and techniques to use when bathing their new baby.

Considerations

The first thing to consider is that very young babies do not need daily baths, and limiting bathing to a baby's face, neck, hands and genitals (otherwise known as topping and tailing) is often sufficient.[3] However, if parents express a preference for bathing their infants, advise them not to submerge their baby's head, and to limit bath time to 5–10 minutes to avoid impairing the delicate neonatal stratum corneum (the protective outermost epidermal layer).

Practice Point 1

Offer to demonstrate topping and tailing prior to discharging new parents from your care.

Babies and infants must never be left unattended in the bath, so all bathing apparatus should be assembled beforehand: a clean baby bath/bowl, warm water, cotton wool or a clean muslin, a clean towel, a nappy and clean clothing. To prevent hypothermia, bathing environments should be kept warm, and babies' skin should be gently patted dry prior to them being dressed. There is a lack of consensus about the optimal timing of a baby's first bath, although the World Health Organization (WHO) suggests waiting 24 hours after birth, or at least six hours if cultural practices mandate the first bath taking place sooner.[4]

Cleansing agents are not recommended for use when bathing babies in the early postnatal period.[2] Plain, warm water is the preferred medium for bathing neonates,[2] although mild cleansers with a neutral pH (5.5–7.0) have also been

mentioned in some clinical guidance.[5] It is also recommended that bathing products containing sodium lauryl sulphate are avoided when choosing cleansing agents for babies,[6] because they strip the skin of sebum (an oily substance secreted by the sebaceous glands which moisturises and protects the skin) and increase its susceptibility to dryness and subsequent injury.

Practice Point 2

Emphasise the importance of ensuring that bathing water is warm and not hot. Between 37–38 °C is the ideal water temperature and bath water should always be mixed thoroughly to prevent any hot spots.

Skin complaints

Some babies are genetically predisposed to developing a common skin complaint known as atopic dermatitis (eczema), a chronic condition that causes the skin to become scaly, itchy, dry and red. For babies with darker skin tones, the affected skin may also become darker than their normal complexion (hyperpigmentation). Eczema tends to flare up when harsh cleansing agents or over-exposure to water damage the skin's protective barrier,[2] yet while applying topical emollients (moisturising treatments) may provide benefits to susceptible infants, there is a lack of evidence about the safety of using oils to treat or prevent infant skin dryness.[6] **TPM**

Practice Point 3

Recommend that parents limit bath time to 5–10 minutes to preserve skin integrity.

Practice Point 4

Advise parents that there is no evidence that topical application of olive oil and sunflower oil prevents dry skin, but that emollients may have benefits for babies with eczema.

References

1. Structure and functions of the skin. Health and Safety Executive. https://www.hse.gov.uk/skin/professional/causes/structure.htm. Updated May 5, 2021. Accessed January 17, 2022.
2. Lavender T, Bedwell C, O'Brien E, Cork MJ, Turner M, Hart A. Infant skin-cleansing product versus water: A pilot randomized, assessor-blinded controlled trial. BMC Pediatr. 2011;11(35). doi:10.1186/1471-2431-11-35.
3. Washing and bathing your baby. National Health Service. https://www. nhs.uk/conditions/baby/caring-for-a-newborn/washing-and-bathing-your- baby/. Updated September 15, 2021. Accessed January 17, 2022.
4. World Health Organization. WHO Recommendations on Newborn Health: Guidelines approved by the WHO Guidelines Review Committee. Geneva: World Health Organization; 2017.
5. Brandon D, Hill CM, Heimall L, et al. Neonatal Skin Care: Evidence- Based Clinical Practice Guideline. 4th ed. Washington DC: Association of Women's Health, Obstetric and Neonatal Nurses; 2018:1-147.
6. Scanlan R. What parents and professionals need to know about newborn skincare. Royal College of Midwives. https://www.rcm.org.uk/ news-views/rcm-opinion/newborn-skincare/. Published 2018. Accessed January 17, 2022.

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Date Created
1st March 2022