HYPOVOLEMIA RESULTING FROM A TIGHT MUCHAL CORD AT BIRTH William J. Cashore and Robert H. Usher, Reonatal Unit, Royal Victoria Hospital, and Dept. of Pediatrics, McGill University, Montreal.

Infants with tight umbilical cord loops around the neck may shift blood into the placenta as pressure on the cord obstructs the unbilical voin earlier than the umbilical artery. If these infants require cord ligation and transection to deliver the body, significant blood loss may result.

Blood volume determinations (I125 Albumin) have been performed after birth in 11 such infants, with the following results: Blood Volume 75.3 ± 6.4 ml/kg, Red Cell Volume 25.6 ± 4.1 ml/kg, Plasma Volume 49.5 ± 5.1 ml/kg, and Venous Hematocrit 39.0 ± 4.6%. The value for Red Cell Volume is significantly lower (p<0.005) than that found previously in this Unit by Saigal for infants with immediate cord clambing (32.4 ± 2.6 ml/kg). This difference represents a blood loss at birth of 203 (or about 50 ml in a full-term infant) with a resulting decrease in body iron content.

Tight muchal cord accounts for a large proportion of otherwise unexplained cases of neonatal anemia occurring in this hospital. Affected infants are pale and somewhat hypotensive after birth, sometimes with a systelic heart marmur, but otherwise appear to be unaffected by the blood loss.