



Why it is Better to Give Birth between 4 and 6 a.m. than at Other Times of the Day and Night

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Did you know that the health status of a newborn in vaginal birth depends on several factors, among which the timing of day-time and/or nighttime birth is important? In this article, I want to offer you my opinion on why warm-blooded animals such as monkeys, cows, horses, sheep, pigs and many others give birth mostly in the early morning, usually before sunrise. By the way, in natural conditions, humans as representatives of primates also give birth to children mostly in the early morning. The fact that this fact is not accidental is also indicated by the biblical description of the place and time of day when the virgin Mary gave birth to the prophet Isa. It follows that the prophet was born in the cold "Cave of the Manger" in the early morning before the rising of the star of Bethlehem.

Previously, scientists have explained the birth of baby animals and newborns in humans by the fact that darkness protects pregnant animals and women during physiological labor from unwanted attention from predators. This explanation seems quite reasonable, unless you know that predators themselves, such as lions, tigers, leopards, wolves, hyenas and dogs also give birth to cubs early in the morning. Since predators do not seek to hide in the dark from their prey, it is clear that it is not fear for their lives and the life of the cubs they give birth to that caused the pattern of predators giving birth to cubs in the early morning. It follows that it is not only the desire of animals and humans to hide from enemy eyes that explains the advantageousness of giving birth in the early morning.

Indeed, the choice of early morning for the birth of newborns in humans and cubs in warm-blooded animals is not accidental. Since the main purpose of this process in the animal world is the successful continuation of the species (animals and mankind), there is no doubt that early morning births are the best way to accomplish this task. In my opinion, the most important factor in the successful continuation of the human (and warm-blooded animal) species during physiological labor in the early morning is the low body temperature of pregnant women (and animals) between 4 and 6 a.m. The fact is that body temperature in warm-blooded animals and humans is not constant. Their body temperature changes cyclically throughout the days and nights throughout their lives. In this regard, it is usually said that there is a diurnal rhythm of body tem-

perature [1]. In this regard, the mother's body temperature may be about 36.1 °C (97 °F) between 4 and 6 a.m. and about 37.2 °C (99 °F) between 6 and 8 p.m. In turn, the body temperature of the fetus inside the mother obeys exactly the same diurnal rhythm.

Consequently, between 4 and 6 a.m., the mother and her fetus have the lowest body temperature. This gives reason to believe that every day early in the morning in the body of the mother and her fetus develops a period of physiological hypothermia, during which their temperature is on average 1.1 °C lower than at other times of the day and night. Since, according to Arrhenius' law, a 10°C decrease in temperature reduces the rate of chemical reactions by a factor of 2 (i.e. 100%), cooling the fetal body by 1.1°C reduces the intensity of its metabolism by an average of 11%. It is for this reason that during morning physiologic hypothermia, fetal brain cells have, on average, an 11% lower rate of their metabolic rate and an 11% higher resistance to intrauterine hypoxia. That's why every pregnant woman's daily developing period of morning physiologic hypothermia is a natural way to protect her fetus' brain from hypoxic damage during vaginal delivery, eliminate stillbirth, and preserve high mental capacity in the children born!

So, intrauterine hypoxia is an important factor in stillbirths and encephalopathies of newborns during vaginal delivery in warm-blooded animals and humans [2-5]. Since ancient times, humans have delivered healthier newborns early in the morning because it is early in the morning that their bodies develop a period of natural morning hypothermia, which increases fetal resistance to intrauterine hypoxia. As the calculation has shown, in the morning the resistance of fetuses to hypoxia is higher on average by 11% than at other times of the day and night. Proof that the proposed explanation for the benefits of morning vaginal delivery is correct is that the use of therapeutic hypothermia in obstetrics and gynecology is increasing every year [6].

In view of the above, I wish every pregnant woman to give birth during a period of physiologic hypothermia and to accept the use of therapeutic hypothermia in order to give birth to a living, healthy and intelligent child.

Bibliography

1. Kittrell EM and Satinoff E. "Diurnal rhythms of body temperature, drinking and activity over reproductive cycles". *Physiology and Behavior* 42.5 (1988): 477-484.
2. Urakov A and Urakova N. "Fetal hypoxia: temperature value for oxygen exchange, resistance to hypoxic damage, and diagnostics using a thermal imager". *Indian Journal of Obstetrics and Gynecology Research* 7.2 (2020): 232-238.
3. Urakov AL and Urakova NA. "Intrauterine hypoxia: causes, mechanisms, symptoms, diagnosis, compensation, prevention". *Journal of Gynecology and Obstetrics Problem: JOGP* 2.1 (2020): 100015.
4. Urakova N., et al. "Aerobic brain metabolism, body temperature, oxygen, fetal oxygen supply and fetal movement dynamics as factors in stillbirth and neonatal encephalopathy. Invention review". *Azerbaijan Pharmaceutical and Pharmacotherapy Journal* 22.2 (2023): 105-112.
5. Shabanov P., et al. "Low fetal resistance to hypoxia as a cause of stillbirth and neonatal encephalopathy". *Clinical and Experimental Obstetrics and Gynecology* 51.2 (2024): 33.
6. Beykmirza R., et al. "Development, implementation, and evaluation of neonatal thermoregulation decision support web application". *BMC Medical Informatics and Decision Making* 23.1 (2023): 227.