

NEWBORN JAUNDICE

(Hyperbilirubinemia)

What is jaundice?

Jaundice is a yellowish coloring of the skin and the whites of the eyes. Most newborns have some mild jaundice. Jaundice is a temporary condition and is not –serious for most newborns. Jaundice usually becomes visible between the second and third day of life. It resolves with the right amount of feedings. For a few newborns jaundice can be the sign of a serious problem and will need treatment. All newborns should be watched for increasing jaundice.

What newborns are most at risk for developing jaundice?

- Newborns who have different blood types from their mothers
- Newborns with a lot of bruising to their scalp or face from the birth
- ✤ Newborns born less than 37 weeks of gestational age
- Newborns of diabetic mothers
- Newborns who may not feed well in the first few days of life
- Newborns of Asian decent

Breastfeeding does not cause jaundice but jaundice is more likely to be seen in breastfeeding newborns. The benefits of breastfeeding outweigh most risks of jaundice. If you worry that your newborn is not getting enough breastmilk you may want to discuss your concerns with a health care provider or a lactation consultant.

What causes jaundice?

Jaundice is caused by a high level of bilirubin in the blood. Everyone's blood contains bilirubin. During pregnancy, the mother's liver removes extra bilirubin from the baby's blood. After birth, it takes a while for the baby's liver to do the job. Until this happens, the bilirubin is stored in the skin, giving it a yellow color. After 3-5 days the baby's liver begins to work better and removes the bilirubin from the blood. The extra bilirubin is then removed from the body by bowel movements.

What might you see with elevated levels of bilirubin?

- Yellow tint to the skin or whites of the eyes
- Poor feeding
- Sleepy or sluggish behavior
- Dark yellow urine
- Dark (black or deep green), sticky stools after three days of life
- Fever of 100.4°F (8°C) or above (taken under the arm or axillary)



What tests will be done?

Before your baby leaves the hospital, a nurse will do a bilirubin check with a measuring device on the skin. If the level is too high, a blood test may be ordered to find out the level of bilirubin in the blood. Too much bilirubin may be dangerous to a newborn's brain and require treatment.

How is jaundice treated?

Treatment depends on the level of bilirubin. The most common treatment is frequent feedings to help your baby stool more often and get rid of more bilirubin. Also, exposure to a special light, known as phototherapy, can be used. Your baby's health care provider may recommend phototherapy. In the hospital the newborn will sleep under a phototherapy light and on a special lighted bed between feedings. Occasionally a newborn will go home with phototherapy. The newborn will need close medical follow up until the bilirubin levels are normal.

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