

Together



NHS

Greater Glasgow
and Clyde

Jaundice and Your Newborn Baby



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What is Newborn Jaundice?

Jaundice is the name given to yellowing of the skin and whites of the eyes and is very common in newborn babies.

It is usually harmless and clears up in most babies in 10 to 14 days.

A small number of babies may develop very high levels of jaundice which can be harmful if not treated.

There are two types of jaundice seen in newborn babies:

- Physiological which is caused by natural processes and is the most common.
- Pathological which is caused by underlying causes and is less common.



Babies more likely to Develop Jaundice

Some babies are more likely to develop jaundice:

- Babies born early (less than 38 weeks gestation).
- Babies who have brothers or sisters who needed treatment for jaundice as a baby.
- Babies who have signs of jaundice in the first 24 hours.

Please tell staff if any of these apply to you.



How do I Check my Baby for Jaundice?

Jaundice usually occurs in the first week of life. However, if your baby is not yet 24 hours old and appears jaundiced you should seek to get immediate advice from the ward staff.



Check your baby for jaundice during bathing, nappy changes or skin to skin when you can see their whole body.

- Jaundice tends to appear from the top down starting on the face and forehead to the rest of the body.

Changes in skin colour may be more difficult to see if your baby has black or brown skin. Yellowing of the skin may be more obvious in areas such as:

- In the whites of the eyes.
- The gums or roof of the mouth.
- On the soles of the feet.
- On the palms of the hands.

If you are at home and think your baby is jaundiced:

- Ask advice from your midwife or GP.

If you are concerned your baby is **unwell** seek immediate advice from:

- NHS 24 on 📞 111.

What is the Treatment for Jaundice?

The health care team can check the level of jaundice in two ways.

- With a monitor called a biliflash that reads the level on your baby's skin. This will tell us if your baby needs a blood test.
- A blood test that will tell us the jaundice level.

Not all babies need treatment for jaundice. If your baby needs treatment a blue light called phototherapy will be used to treat jaundice. Phototherapy helps the body to breakdown jaundice in the skin.

There are different types of phototherapy:

- We may place a phototherapy mat under your baby in their cot.
- We may wrap a phototherapy mat around them like a blanket.

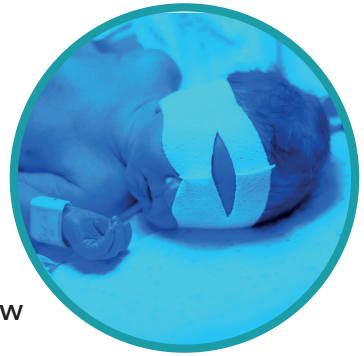
Your baby may have phototherapy in the postnatal ward beside you. Occasionally they may need to have treatment in the Neonatal Unit. We will always discuss this with you.



Caring for my Baby Receiving Phototherapy

If your baby needs to start phototherapy:

- They will usually stay beside you in the postnatal ward on a phototherapy mat or wrapped in a phototherapy blanket.
- Your baby will have eye shields to protect their eyes from the blue light.
- The staff will give you advice on how to feed your baby.
- The staff will support you to breastfeed or express whilst your baby is having treatment.
- Your baby must have enough fluid as bilirubin is passed in the urine and stool. We need to make sure your baby has enough milk to have regular wet and dirty nappies. The midwives and medical team may recommend extra feedings.
- Your baby needs to receive the phototherapy light as much as possible to bring down the jaundice level.
- Your baby will need additional blood tests so we know when we can stop the phototherapy treatment. Your baby will need at least one blood test after treatment stops to check the jaundice level is staying low. This is called the “rebound” level.



If your baby needs additional treatment for jaundice in the Neonatal Unit, we will always discuss this with you.

At Home



Your community midwife will check your baby for jaundice. Please ask for advice if you are concerned your baby is jaundiced. Your baby may need to have repeat tests for jaundice to check if they need treatment.

- Your midwife may ask you to return to the hospital with your baby for a repeat jaundice test.
- If you are at home and your baby needs treatment you will come back to the postnatal ward for phototherapy.
- It is important that your baby has enough milk. Your midwife may recommend extra feeds.
- Ask your midwife for advice if you are concerned about your baby's feeding.

At home please ask your midwife, GP or NHS 24 on 📞 111 for advice.

Prolonged Jaundice

If your baby has jaundice for more than 14 days we call this prolonged jaundice.

This occurs slightly more in babies who are breastfed.

Babies born at term, gaining weight and thriving will normally need no treatment.

However in a very small number of babies there may be an underlying cause and they may need more tests.

Please ask your midwife, health visitor or GP for advice if your baby is:

- Born at term, still jaundiced and over 14 days old.
- Has pale coloured stools or dark urine.
- Not gaining weight.

The health care team may ask you to return to the clinic for jaundice tests and review by the neonatal team. If this is required the staff will arrange an appointment for you.



Further Information



Newborn Jaundice



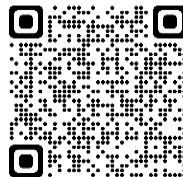
Scan for more information

Skin to Skin Care



Scan for more information

Feeding your Baby



Scan for more information

Further Support

If you would like an interpreter please speak to the health care team. Please also tell them if you would like this information in any other format such as:

- Large print.
- Audio.
- Electronic.
- Another language.

We hope that the information in this leaflet meets your needs. However if you need further support please speak to the health care team they are happy to help.

Contact Details

Maternity Unit, Queen Elizabeth University Hospital
1345 Govan Road,
Glasgow G514TF

☎ 0141 201 1100

Princess Royal Maternity
16 Alexandra Parade
Glasgow G31 2ER

☎ 0141 211 5400

Royal Alexandra Hospital
Corsebar Dr, Castlehead
Paisley PA2 9PN

☎ 0141 314 7294