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Ashford Hospital
London Road
Ashford, Middlesex
TW15 3AA
Tel: **01784 884488**

St. Peter's Hospital
Guildford Road
Chertsey, Surrey
KT16 0PZ.
Tel: **01932 872000**

Website: www.ashfordstpeters.nhs.uk

Jaundice in Newborn Babies

Paediatrics Department

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty. If they cannot resolve your concern, please contact our Patient Advice and Liaison Service (PALS) on 01932 723553 or email pals@asph.nhs.uk. If you still remain concerned please contact our Complaints Manager on 01932 722612 or email complaints@asph.nhs.uk.

Author: Dr Peter Reynolds

Department: Paediatrics

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Further information: www.nhsdirect.nhs.uk (search for: jaundice newborn)

Jaundice in Newborn Babies

WHAT IS JAUNDICE?

Jaundice is a yellow discolouration of the skin which is **common, temporary and usually harmless**. It is more common in breast-fed babies but is not a reason to stop breastfeeding. It usually occurs a few days after birth and then subsides in a week or two.

HOW CAN I TELL IF MY BABY IS JAUNDICED?

The best way to see jaundice is in a good light, such as daylight. The skin of your baby appears yellow. Jaundice usually appears first in the face and then moves to the trunk and limbs as the jaundice level increases. The whites of the eyes may also appear yellow. Jaundice may be harder to see in babies with a darker skin colour.

WHAT CAUSES JAUNDICE?

Jaundice is caused by bilirubin which is produced from the breakdown of red blood cells. This is a normal process in a newborn infant.

The body usually removes bilirubin from the bloodstream. Jaundice can develop if there is too much bilirubin in the blood, or the liver cannot get rid of it for some reason.

Sometimes babies may develop jaundice if they become ill or are not feeding well. **If a baby develops jaundice in the first 24hrs after birth they need to be seen by a doctor.**

IS JAUNDICE SERIOUS?

Most babies have mild jaundice that is harmless. Very rarely the bilirubin level can get very high and might be harmful if left untreated. This is why newborns should be checked carefully for jaundice and treated if necessary.

WHAT HAPPENS IF MY BABY IS JAUNDICED?

We will ask you about how well your baby is feeding and examine your baby. We may also take a blood test to check the bilirubin level.

If the bilirubin level is high then treatment may be needed, or further testing may be recommended. We will explain this to you, as your baby will probably need to remain in hospital.

If the bilirubin level does not require treatment or monitoring and there is no other reason for your baby to stay in hospital, then the community midwife will continue to monitor the jaundice at home.

HOW IS JAUNDICE TREATED?

When treatment is necessary, your baby will be placed under special lights called phototherapy or on a special light-blanket and this helps to lower the bilirubin level. Usually this takes a few days, and in most cases the jaundice resolves and your baby is able to go home.

WHAT IF THE JAUNDICE PERSISTS?

If the jaundice persists beyond two weeks of age (or three weeks in premature babies), then further investigations such as blood and urine tests may be required. Your midwife or GP will arrange for your baby to be reviewed and for these tests to be performed.

IS THERE ANYTHING I SHOULD DO DIFFERENTLY?

Yes. Ensure that your baby is feeding regularly and is having lots of wet nappies

WHAT SHOULD I LOOK OUT FOR AT HOME?

Your baby's jaundice may persist for several days. However you should let your midwife, health visitor or GP know if

- Your baby's skin (or eyes) turns more yellow
- Your baby becomes hard to wake or is not feeding well
- Your baby's stools become very pale