



York Teaching Hospital
NHS Foundation Trust

Jaundice in Newborn Babies

Information for patients, relatives and carers

Maternity Services

York Teaching Hospital NHS Foundation Trust

① For more information, please contact:

Midwifery Matron for York Tel: 01904 721427

York Hospital, Wigginton Road, York, YO31 8HE

Or

Midwifery Matron for Scarborough Tel: 01723 342511

Scarborough Hospital, Woodlands Drive,
Scarborough, YO12 6QL

Caring with pride

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Introduction

Many normal babies develop a yellow discolouration of the skin between the second and fifth day after birth.

This is called jaundice. Your baby may require phototherapy, sometimes called light treatment.

This leaflet explains what these terms mean and what the treatment involves. Please ask your midwife or the paediatrician if there is anything which you do not understand after reading this leaflet.

What is jaundice?

Jaundice is caused by a pigment in the blood called bilirubin which is formed from the normal breakdown of red blood cells. In newborn babies there is an increased breakdown as babies need less red blood cells once they have been born. Normally bilirubin is removed from the blood by the liver and passes out through the intestines in the stool. Sometimes in newborn babies this system does not work fast enough to clear all the bilirubin and some of it becomes visible in the skin. This causes the yellow colour of jaundice. This physiological jaundice is normal.

How will the levels of jaundice be measured?

If appropriate the levels of yellow discolouration in your baby's skin will be measured using a hand held non-invasive device (biliflash) or via a blood test to measure serum bilirubin (SBR).

What is serum bilirubin (SBR)?

This is the level of bilirubin in the blood and is measured in a small blood sample taken by a heel prick from your baby. Sometimes the doctor will want to do some other blood tests and may take a sample from a vein on your baby's hand or foot. Bilirubin is not harmful to babies unless the level in the body rises too high. The result of the blood test helps to decide whether your baby needs some treatment.

How will my baby's high bilirubin be treated?

- Most cases of jaundice are treated on the postnatal ward, children's ward or Special Care Baby Unit.
- It is important that your baby is feeding well, and regularly. Your midwife or nurse will assess this with you.
- Depending on the level of bilirubin in your baby's blood, your baby may need phototherapy.
- We understand the importance of closeness and comfort for your baby's development and will support you with this. If your baby is having phototherapy we will encourage you to cuddle your baby in skin to skin contact during feeds and talk to and stroke your baby while they are under the phototherapy lights.

What is phototherapy?

Phototherapy is treatment with light. It is used in some cases of newborn jaundice to lower the bilirubin levels in your baby's blood through a process called photo-oxidation.

Photo-oxidation adds oxygen to the bilirubin so it dissolves easily in water. This makes it easier for your baby's liver to break down and remove the bilirubin from their blood.

Babies are nursed in a phototherapy light source. Your baby will wear only a nappy to allow more of your baby's skin to be exposed to the light. Your baby will also need to wear eye protection during their time under the lights.

The more time your baby spends under the light the more the bilirubin level will fall. So try to combine cuddle time with feeding time and comfort your baby by talking to them and stroking them when under the phototherapy lights.

Phototherapy has been shown to be safe. Some babies may have loose stools or a heat rash, but these disappear once the light treatment stops. It is important that your baby's temperature is regularly checked, your midwife or nurse will do this.

How long will my baby need phototherapy for?

This depends on the level of bilirubin in your baby's blood and how quickly it falls. The aim of the treatment is to reduce the jaundice level well before it reaches a level that is a risk to your baby. Your baby's blood test will be repeated a minimum of once a day or more regularly, depending on your baby's bilirubin level.

Are there any other causes of jaundice?

Jaundice which occurs on the first day of life may have different causes and need further tests. Babies with jaundice who have other problems; for example feeding or who have difficulty maintaining their temperature may need other types of investigations. These investigations will look for other conditions.

An example of this may be an infection. These babies may need to be cared for on the Special Care Baby Unit (SCBU). You will be supported to continue breastfeeding and establish a good milk supply if your baby has been sleepy.

Will jaundice affect my baby later on?

Physiological jaundice usually fades over a few days with no lasting effects. However, if your baby:

- was born at 37 weeks or more and still jaundiced,
- yellow in colour, at 14 days or still jaundiced,
- yellow in colour at 21 days if born less than 37 weeks

Then please ask your midwife or GP to refer your baby to the Child Assessment Unit on Ward 17 at York Hospital or Children's Ward at Scarborough Hospital for assessment and further tests by a paediatrician.

Once discharged from hospital, there are no special precautions to be taken and you can enjoy your baby at home and treat him or her as a normal, healthy baby.

Additional Support

Bliss – The Special Care Baby Charity, 0500 618 140
www.bliss.org.uk [Accessed 01 February 2019]

The Breastfeeding Network, 0300 100 0212
www.breastfeedingnetwork.org.uk
[Accessed 01 February 2019]

La Leche League, 0845 120 2918
www.laleche.org.uk [Accessed 01 February 2019]

NCT (formally National Childbirth Trust), 0300 330 0700
www.nct.org.uk [Accessed 01 February 2019]

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:
Maternity Services Patient Information Group, c/o
Patient Leaflet Team, The York Hospital, 98 Union
Terrace, York, YO31 7ES, telephone 01904 721045 or
725230 or email us at patient.information2@york.nhs.uk.

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.

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