

# Jaundice and your baby

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## What is jaundice?

Jaundice is a common condition in newborn babies. It can give the skin or the white part of the eyes a yellow colour. The yellow comes from bilirubin in the blood. Before birth, the mother's liver removes the bilirubin from the baby's blood. After the baby is born, it takes a few days for the baby's liver to get better at removing the bilirubin on its own. During this time, many babies develop jaundice. Jaundice can occur in a baby of any race or skin colour.

Feeding your baby often (especially breastfeeding) in the first few hours and days after birth can help lower the risk of jaundice. This helps your baby pass more bowel movements (stools) and gives your baby's liver the energy it needs to remove the bilirubin.

## Are some babies more likely to get jaundice?

Yes, these circumstances can make jaundice more likely or make jaundice worse:

- Birth earlier than 2 weeks before the due date
- Bruising from a difficult delivery such as when forceps are used
- Baby's blood type is different than the mother's blood type
- Signs of jaundice within the first 24 hours after birth
- Baby has a sibling who was treated for jaundice
- Baby is not feeding well, especially if breastfeeding
- Baby has an infection
- Baby is of East Asian race (for example, Japanese, Chinese, Indonesian, Korean, Vietnamese or Cambodian)
- Baby has a family history of a genetic condition called G6PD deficiency

## Is jaundice harmful?

Most babies have mild jaundice, which is not harmful. However, it is possible for a baby to have so much bilirubin in the blood that it becomes harmful. A very high bilirubin level can damage a baby's brain and hearing loss and mental disability.



**Safety First**

**As a safety measure, we check all newborn babies for jaundice.**

Babies who have signs of jaundice will be closely monitored and if needed, will be treated to lower the bilirubin level.

## How do I know if my baby has jaundice?

### Signs of jaundice

Each person who cares for your baby, including you and your family, should watch for these signs of jaundice:

- The whites of the baby's eyes are yellow.
- The baby's skin turns yellow. First on the face, then down the baby's chest, tummy, arms and legs. This is harder to see in babies with darker skin.
- The baby is sleepy and may be hard to wake.
- The baby does not feed well or refuses to feed.
- The baby is more fussy.
- The baby is losing weight.

## **Blood tests for jaundice**

The Canadian Pediatric Society recommends that all babies should have a blood test to check for jaundice. The amount of bilirubin in your baby's blood will be measured from a small sample of blood taken from his or her heel.

A bilirubin test can be done along with your baby's Newborn Screening blood test, or at any time there is a concern that your baby is jaundiced.

The best time for this routine test is when your baby is between 24 and 72 hours old. If your baby goes home less than 24 hours after birth, ask your baby's doctor or your midwife about a bilirubin test at your first follow-up visit.

Depending on the amount of bilirubin and your baby's age in hours, the doctor or midwife will decide if your baby needs more tests or treatment.

By treating babies before their bilirubin level gets too high, we can prevent complications.

Your nurse will tell you if your baby needs another bilirubin test while you are in the hospital or after you go home. If your baby needs treatment, the doctor or midwife will discuss this with you.

## **How is jaundice treated?**

The best way to lower bilirubin levels is to expose your baby's skin to a special light. This treatment is called phototherapy.

If your baby needs phototherapy, the doctor or midwife will decide which method of phototherapy is best for your baby. The nurse will give you more information and show you how to care for your baby during treatment.

Putting baby in direct sunlight will not treat jaundice.

## How do I care for my baby if they have jaundice?

### 1. Feed your baby more often

Frequent feeding gives your baby extra fluids and helps to get rid of bilirubin through the stools. If you are breastfeeding, feed your baby every 2 to 3 hours, during the day and night. Feed your baby as long as he or she wants.



**Safety First**

**If your baby is very sleepy or having problems feeding, have your baby checked right away. Do not wait for your baby's next appointment!**

### 2. Check your baby's diapers each day

Check to see if he or she is passing enough stools for their age.

Baby's age	Wet diapers	Stools
<b>1 day</b>	<ul style="list-style-type: none"> <li>• 1 to 2 wet diapers.</li> </ul>	<ul style="list-style-type: none"> <li>• At least 1 stool that is black and tarry. This is called meconium.</li> </ul>
<b>2 days</b>	<ul style="list-style-type: none"> <li>• At least 1 to 2 wet diapers.</li> <li>• It is common to see small pink spots on the diaper caused by uric acid in the urine.</li> </ul>	<ul style="list-style-type: none"> <li>• At least 1 stool that may have a greenish colour.</li> </ul>
<b>3 days</b>	<ul style="list-style-type: none"> <li>• 3 or more wet diapers.</li> <li>• You may still see small pink spots.</li> </ul>	<ul style="list-style-type: none"> <li>• At least 3 stools that are dark green, yellow or brown.</li> </ul>
<b>4 to 6 days</b>	<ul style="list-style-type: none"> <li>• 6 or more wet diapers each day, without any pink spots.</li> <li>• Diapers will seem heavier as your baby passes more urine.</li> </ul>	<ul style="list-style-type: none"> <li>• 3 or more soft stools each day. Your baby may have a stool with every diaper change.</li> <li>• Breastfed babies' stools are yellow and "seedy".</li> <li>• Formula fed babies' stools are yellow-brown.</li> </ul>
<b>7 days to 1 month of age</b>	<ul style="list-style-type: none"> <li>• 6 or more heavy, wet diapers each day that have pale or colourless urine.</li> </ul>	<ul style="list-style-type: none"> <li>• At least 3 soft stools each day. Yellow (breastfed) or yellow-brown (formula fed).</li> </ul>

### 3. Check your baby for signs of jaundice

Check your baby each day for signs of jaundice on page 2. If you think your baby is becoming jaundiced (or more jaundiced), call your baby's doctor or midwife right away. If you cannot reach your doctor or midwife, take your baby to the nearest hospital Emergency Department to be checked.

### When does jaundice go away?

In breastfed babies, jaundice often lasts for more than 2 to 3 weeks.

In formula fed babies, most jaundice lasts for about 2 weeks.

Jaundice may take longer to go away in babies who are sick or premature and who are being cared for in the Neonatal Nursery.

### What follow-up care does my baby need?

Your nurse will tell you:

- If your baby needs another bilirubin test after you leave the hospital
- When your baby needs to be seen by the doctor or midwife

**Your baby must have a follow-up appointment with the doctor or midwife to make sure that they are not becoming more jaundiced.**

Before leaving the hospital, call to confirm the date and time of your appointment. Do not cancel or reschedule the appointment, even if you think your baby looks fine. The timing of this test is very important.

At home, continue to check your baby each day for signs of jaundice.



**Safety First**

**If you are concerned that your baby may be jaundiced or is becoming more jaundiced, call your baby's doctor or your midwife.**

**Do not wait for your appointment.**

**If you are unable to reach the doctor or midwife, take your baby to the nearest hospital emergency department to be checked.**

