

Jaundice and Your Newborn

Jaundice (JAWN-dis) is the yellow color seen in the skin of many newborns. It is caused by a chemical in the blood called *bilirubin* (bil-ih-ROO-bin). Most babies have mild jaundice that is harmless, but in rare cases, the bilirubin level can get very high and might cause brain damage. This is why testing bilirubin levels as recommended is important.

Here is information from the American Academy of Pediatrics about jaundice, bilirubin levels, treatment of jaundice, when to follow up after discharge, and when to call the doctor.

Why is jaundice common in newborns?

Everyone's blood contains bilirubin, which comes from red blood cells and is removed by the liver. Before birth, the mother's liver does this for the baby. Most babies develop jaundice in the first few days after birth because it takes a few days for the baby's liver to get better at removing bilirubin.

In breastfed babies, jaundice can last 1 month or, occasionally, longer. In formula-fed babies, most jaundice goes away by 2 weeks. Let your baby's doctor know if your baby has jaundice for more than 2 weeks and is formula fed or for more than 3 weeks and is primarily breastfed.

How can I tell if my newborn has jaundice?

The skin of a baby with jaundice usually appears yellow. The best way to see jaundice is in bright white light, like that of daylight or daylight light bulbs. Jaundice usually appears in the face first and then moves to the chest, abdomen, arms, and legs as the bilirubin level increases. The whites of the eyes may also be yellow. Jaundice may be harder to see in babies with darker skin color.

When should my baby's bilirubin level be tested?

Before a baby is discharged from the hospital, a skin or blood test for bilirubin is needed to measure the baby's bilirubin level. Whether a baby needs additional bilirubin levels measured depends on the baby's age, the level of bilirubin, and whether the baby has other things that make jaundice more likely or harder to see.

It is important for your baby to get checked soon after leaving the hospital. In most cases, babies discharged before 48 hours should be seen within 2 days by a doctor. Ask your baby's doctor to fill in "Your Baby's Bilirubin Level" and schedule a follow-up appointment.

Your Baby's Bilirubin Level

Date: _____

Gestational age: _____ weeks

Predischarge bilirubin level: _____ mg/dL at age _____ hours

Type of test (circle): Blood test | Skin test

Follow-up Appointment

Date: _____ Time: _____ Doctor: _____

Address: _____ Phone: _____

Notes: _____

Does my baby have risk factors for high levels of bilirubin?

Some babies have risk factors for high levels of bilirubin and may need to be seen sooner after discharge from the hospital. Ask your baby's doctor about an early follow-up visit if your baby has any of the following signs:

- A high level of bilirubin before leaving the hospital
- Early birth (more than 2 weeks before the due date)
- Jaundice in the first 24 hours after birth
- Breastfeeding that is not going well
- A lot of bruising or bleeding under their scalp related to labor and delivery
- A parent or sibling who had a high level of bilirubin and received light therapy

Also, let your baby's doctor know if you eat fava beans (broad beans) or use any of the following products: mothballs, antibiotics, henna, or herbal remedies. Eating fava beans or using these products should be avoided because, in rare cases, this can cause severe jaundice.

How is jaundice treated?

Treatment can prevent the potentially harmful effects of jaundice. Most jaundice requires no treatment. When treatment is needed, babies are undressed and then placed under special lights (phototherapy). Phototherapy helps lower the bilirubin level. This is typically done in the hospital, but depending on your baby's bilirubin level, age, and other things, it can sometimes be done at home. In some babies, supplementing breast (human) milk with formula can help lower the bilirubin level. Putting your baby into sunlight is *not* a safe way to treat jaundice. Very high bilirubin levels are a medical emergency that might require admission to the intensive care unit and other treatment, including a special type of blood transfusion that can rapidly decrease the bilirubin level.

When should I call the doctor?

Call your baby's doctor if

- Your baby's skin turns darker yellow.
- Your baby's abdomen, arms, or legs are yellow.
- The whites of your baby's eyes are yellow.
- Your baby is hard to wake, fussy, or not breastfeeding or taking formula well.

Remember

To make sure your baby's first week is safe and healthy, it is important that

- You partner with a pediatrician or another primary care provider for your baby's ongoing care.
- Your baby is checked for jaundice in the hospital with a blood or skin test for bilirubin.
- You review the result of your baby's bilirubin test and follow-up plans with your baby's doctor (see "Your Baby's Bilirubin Level").
- If you are breastfeeding, you get the support you need to make sure it is going well.

For More Information

American Academy of Pediatrics
www.aap.org and www.HealthyChildren.org

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