

Neonatal Jaundice

Information for parents, relatives and carers in neonatal areas

Introduction

This leaflet explains what neonatal jaundice is, why it happens and how it is treated.

What is jaundice?

Jaundice is a common condition in newborn babies. It causes yellowing in the skin and the whites of the eyes, usually on the second to fifth day after birth.

Jaundice is caused by a build-up of a normal chemical in the blood, called bilirubin. Bilirubin is produced naturally when red blood cells are broken down by the liver. There are a higher number of red blood cells in newborn babies. In some babies, including premature babies, the liver is still developing and takes a while to function properly. As a result, excess bilirubin remains in the body causing this yellow tinge to the skin and whites of the eyes.

How will my baby look?

The first sign will be your baby beginning to look yellow in the face, forehead, whites of the eyes and gums. The colouring will then progress to the body, arms and legs. It could also be accompanied with sleepiness.

How long does it last?

Jaundice may begin around two to three days after delivery and can last for up to 21 days in premature babies. If jaundice appears within the first 24 hours after delivery, further tests will be made to determine the cause. Prolonged jaundice, lasting several weeks, can cause other problems, which will need to be investigated by your baby's healthcare team.

How jaundice is treated

Jaundice is a very treatable condition. The level of bilirubin can be measured using a special handheld device (a 'bilirubinometer' or 'TCB') placed briefly on the skin. If the level is high, or the baby is less than 24 hours old or born prematurely then the level will need to be checked by a blood test taken from the baby's heel, called a serum bilirubin or 'SBR' level.

If the levels are high, then the baby will be started on light therapy, called 'phototherapy'. This special blue light (which is not ultraviolet) helps in breaking down the bilirubin, which is then passed out of the body in the baby's urine and stools. Your baby will be placed under the light naked, so that as much of the skin as possible can benefit from it. Your baby's eyes will be protected with eye pads. Natural sunlight is not used due to the risk of sunburn and damage to the skin by ultraviolet light. The SBR levels will be checked regularly during the treatment. Your baby may also need extra support with feeding to ensure they are also getting enough fluid.

Are there any complications of jaundice?

In the majority of cases jaundice has no lasting complications for your baby.

If the jaundice continues, then further tests will be necessary to find out why the bilirubin levels are still high. This can be due to a number of causes, including a urinary tract infection, low levels of certain hormones, and breast milk jaundice.

If the levels become too high, there is a risk of damage to the brain called 'bilirubin encephalopathy' or 'kernicterus'. This can cause short- and long-term problems including lethargy, abnormal muscle tone, irritability and apnoea (temporary stopping of breathing). If levels continue to rise, there is a risk of cerebral palsy and hearing loss.

A different emergency treatment may then be necessary, which is called an 'exchange transfusion', where the baby's blood is replaced with new blood from a donor. Though neonatal jaundice is very common, kernicterus is extremely rare. However, if your baby's doctor recommends an exchange transfusion, it is important that it is done as soon as possible.

Will my baby recover from jaundice?

The outcome for a baby with jaundice is extremely good, as long as the jaundice is recognised before the levels get too high and is treated appropriately.

Further information

You can find further information here:

<https://www.nice.org.uk/guidance/cg98/resources/jaundice-in-newborn-babies-pdf-318006690757>

Please speak to your doctor or nurse if you have any questions or concerns about jaundice or other aspects of your baby's treatment.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3313 0088** (Charing Cross, Hammersmith and Queen Charlotte's & Chelsea hospitals), or **020 3312 7777** (St Mary's and Western Eye hospitals). You can also email PALS at pals@imperial.nhs.uk. The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf. Alternatively, you may wish to express your concerns in **writing** to:

Chief executive - complaints
Imperial College Healthcare NHS Trust
Trust Headquarters
The Bays, South Wharf Road
London W2 1NY

Alternative formats

This leaflet can be provided on request in large print, as a sound recording, in Braille, or in alternative languages. Please contact the communications team on **020 3312 5592**.

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