UPDATE

Jaundice – What Every Parent Needs to Know

What causes jaundice?

Jaundice can develop when red blood cells break down and bilirubin is left. It is normal for some red blood cells to die every day. In the womb, the mother's liver removes bilirubin for the baby, but after birth the baby's liver must remove the bilirubin. In some babies, the liver might not be developed enough to efficiently get rid of bilirubin. When too much bilirubin builds up in a new baby's body, the skin and whites of the eyes might look yellow. This yellow coloring is called jaundice.

What are some of the signs of jaundice?

Jaundice usually appears first on the face and then moves to the chest, belly, arms, and legs as bilirubin levels get higher. The whites of the eyes can also look yellow. Jaundice can be harder to see in babies with darker skin color. Your baby's doctor or nurse can and should test how much bilirubin is in your baby's blood.

Can jaundice be treated?

Yes, it can. When being treated for high bilirubin levels, your baby will be undressed and put under special lights. The lights will not hurt the baby. This can be done in the hospital or even at home. The baby's milk intake may also need to be increased. In some cases, if the baby has very high bilirubin levels, the doctor will do an exchange transfusion of the baby's blood. Jaundice is generally treated before brain damage is a concern. Putting your baby in sunlight is not recommended as a safe way of treating jaundice.

Ask your pediatrician to see your baby the day you call, if your baby:

- Is very yellow or orange (skin color changes start from the head and spread to the toes)
- Is hard to wake up or will not sleep at all
- Is not breastfeeding or sucking from a bottle well
- Is very fussy, or
- Does not have enough wet or dirty diapers

Are some babies more likely to be jaundiced?

About 60% of all babies have jaundice. Some babies are more likely to have severe jaundice and higher bilirubin levels than others. Listed below are a few risk factors that need close monitoring and early jaundice management:

- **Sibling**: a baby with a brother or sister that had jaundice is more likely to develop jaundice
- **Bruising**: a baby who has bruises at birth is more likely to have jaundice
- **Preterm babies**: Babies born before 37 weeks, or 8 ½ months of pregnancy may become jaundiced

Source: Centers for Disease Control and Prevention

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SEPTEMBER 2008