

# NEWBORN JAUNDICE

## What is Jaundice?

Jaundice is a common, temporary condition that causes a baby's skin to turn yellow. More than half of all babies develop jaundice in the first week of life. Jaundice is caused by having too much of a substance called bilirubin in the blood. Bilirubin is produced when the body breaks down red blood cells. Normally bilirubin is processed by the liver and removed from the body through the intestines. High levels of bilirubin can cause permanent damage to a baby's brain. Since many babies are sent home from the hospital at 1 or 2 days of life, it is important that parents keep an eye on their infants and know how to recognize the signs of jaundice.



## Types of Jaundice

There are several types of newborn jaundice. The following are the most common:

- **Physiological (normal) jaundice:** occurs when a baby's liver is not yet able to remove enough bilirubin from the blood. It last about 2 weeks.
- **Breast milk jaundice:** occurs when the substances in the breastmilk prevent bilirubin from being removed in the intestines. It occurs in less than 1 in 50 breastfeeding infants. It can last as long as 10 weeks.
- **Blood group incompatibility:** occurs when the baby has a different blood type than the mother. In this case the mother produce antibodies that destroy the infant's red blood cells. It usually occurs on the first day of life.



## What does jaundice look like?

The yellow discoloration of jaundice usually begins at the head and moves down the body. A jaundiced baby's skin will first appear yellow on the face and in the eyes, followed by the chest and stomach, and lastly, the legs. One way to check for jaundice is to press a finger against your baby's skin, temporarily pushing the blood out of it. Normal skin will turn white when you do this, but jaundiced skin will stay yellow.

If you need additional information, contact the Family Health Line at 1-800-451-BABY (2229)

The easiest way to check for jaundice is to visit the baby's doctor in the first week of life. A simple blood test can check to see if the baby's bilirubin level is too high. In children of color (especially those with dark skin) it may be more difficult to detect jaundice. All children of color have a yellowish undertone that is normal. However, yellowing of the whites of the eye is never normal. You can also check for jaundice by observing the color of the gums may be yellow when the level of bilirubin is high. If you are not sure if your baby's skin is yellow, you can compress the skin as previously described and compare the difference in color between the face and lower extremities. If the colors are markedly different, take you child to your doctor to determine if jaundice is indeed present. Remember, mild jaundice is NOT dangerous and is very common in normal newborns.

### **How is newborn jaundice treated?**

- If your baby's bilirubin level is too high, he or she may need to be placed under a special type of light. This treatment is called phototherapy. Phototherapy can be given at home (with careful monitoring) or in the hospital.
- Sunlight helps to break down bilirubin so that a baby's liver can process it more easily. Sitting with your child near a well-lit window for 10 minutes twice a day can help cure mild jaundice. Never place an infant in direct sunlight.
- If an infant's bilirubin levels are very high or if the child appears ill, the baby may need to be admitted to the hospital for treatment.

### **When should I seek medical care?**

- Call your doctor if you suspect your baby is jaundiced or if you have any other concerns.
- If your doctor is aware that your baby is jaundiced and you have been instructed to observe your baby at home, call your doctor if the jaundice spreads to the baby's arms or legs or if it lasts more than 1 week.
- If your baby seems sick (if he or she is refusing to eat, seems overly sleepy, or has floppy arms and legs) or has a temperature of 100.4°F/38°C or higher, you should go directly to your baby's doctor's office or to the closest urgent care clinic.



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