



MID-JERSEY PEDIATRICS

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JAUNDICE IN NEWBORNS

Jaundice is a common condition in newborn infants that usually shows up shortly after birth. In most cases, it goes away on its own. If not, it can be treated easily.

What Is Jaundice?

A baby has jaundice when bilirubin, which is produced naturally by the body, builds up faster than a newborn's liver can break it down and get rid of it in the baby's stool and urine. This occurs for one or more of the following reasons:

- The baby's developing liver is not yet able to remove the bilirubin from the blood and enable it to be excreted in the urine.
- More bilirubin is being made than the liver can handle.
- Too much of the bilirubin is reabsorbed from the intestines before the baby gets rid of it in the stool.

What is Bilirubin?

Everyone's blood contains hemoglobin found in red blood cells. Normal red blood cells live only a short time (approximately 120 days) and, as they die, the hemoglobin is changed to yellow bilirubin. Normal newborns have more bilirubin because their liver is not efficient at removing it.

Can Jaundice Hurt My Baby?

Jaundice can be dangerous if the bilirubin reaches too high a level in the blood. The level at which it becomes dangerous will vary based on a child's age and if there are other medical conditions. A small sample of your baby's blood can be tested to measure the bilirubin level. Other tests may be needed to see if your baby has a special reason to make extra bilirubin that is causing the jaundice.

How Do I Know My Baby Has Jaundice?

A quick and easy way to test for jaundice is to press gently with your fingertip on the tip of your child's nose or forehead. If the skin looks white (this is true for babies of all races), there is no jaundice. If you see a yellowish color, contact your pediatrician to check your baby to see if significant jaundice is present.

How Is Jaundice Treated?

Most cases of jaundice are mild and do not require any treatment. For moderate jaundice, placing your infant in a sunlit window or giving more frequent feedings of breast milk or formula may be enough to decrease the time required for the jaundice to disappear. Occasionally, higher levels of bilirubin may require special lights or other treatments. These special lights help by altering the bilirubin and making it easier for your baby's liver to get rid of it. Once your child's bilirubin level goes down, it is unlikely that it will increase again. If your child continues to look yellow after 3 weeks of life, talk to your pediatrician as other tests may need to be done.