

Neonatal Abstinence Syndrome (NAS)



 **Elliot Health System**

Neonatal Abstinence Syndrome (NAS)

Neonatal Abstinence Syndrome is the name of the condition that your baby has when withdrawing from the opioids or narcotics that you have taken during your pregnancy. Examples of opioids or narcotics include Methadone, Subutex, Suboxone, Heroin, Vicodin and Percocet. Prior to birth, the opioid you were taking was also being felt by your growing baby. After birth, your baby is no longer getting this drug and may have symptoms of withdrawal. Symptoms vary for different babies and do not always match the amount of drug they were exposed to. For this reason, your baby will be observed in the hospital for at least five days after birth. Signs of withdrawal in babies include the following:

- ♥ High-pitched cry/ crankiness/ unable to be consoled/ comforted
- ♥ Shaking or jitteriness
- ♥ Trouble sleeping
- ♥ Difficulty feeding or suckling at breast/ on bottle
- ♥ Vomiting/ Diarrhea
- ♥ Skin breakdown, especially diaper area or on the face

There are many ways that you can help your baby go through this withdrawal. Your nurses and doctors may suggest that you:

Control Your Baby's Surroundings:

- ♥ Decrease the noise and light in your baby's room.
- ♥ Mute music, TV and other similar noises. They are stressful to your baby while she or he is withdrawing
- ♥ Help your baby get as much rest as possible by making sure that her/his sleep is not interrupted
- ♥ Use calming techniques (called "therapeutic handling")
- ♥ Have only a few people hold your baby who can learn calm ways to handle your baby
- ♥ Speak and move slowly around your baby.

Learn Your Baby's Cues:

- ♥ Some of your baby's behavior can mean that he or she is stressed
- ♥ Stress behavior in your baby may include yawning, sneezing, tremors and hiccups
- ♥ If you see the above cues, this means that your baby is over-stimulated. Stop doing what you are doing and calm your baby

Calm Your Baby in These Ways:

- ♥ Hold your baby close, skin-to-skin or swaddled in a blanket: wrap your baby snugly in a blanket to help him or her feel safe and secure.
- ♥ Use a pacifier
- ♥ Curl your baby against your body in a "C" position. Your baby's back is rounded with knees bent. This helps your baby to feel secure and helps your baby to relax.
- ♥ While swaddled and curled, gently sway baby up and down. Quiet humming while swaying may also help to calm your baby. (Back and forth rocking, bouncing and baby swings are not recommended. These motions can be over-stimulating to your baby while she or he is going through withdrawal.)
- ♥ While swaddled and curled, gently pat your baby's bottom in a slow rhythmic manner. (Watch your baby: this patting is soothing to some babies, and stimulating to others. You will learn if this helps your baby.)
- ♥ Change your baby's diaper if dirty.

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While Feeding Your Baby:

- 🧡 Reduce noise and light around your baby by turning off TV or music.
- 🧡 Swaddle your baby to help her or him feel safe and secure.
- 🧡 When your baby is withdrawing, she or he needs to focus on one thing at a time.
- 🧡 Sucking takes a lot of coordination of mouth and neck muscles. Your baby may look frantic at first. Creating a calm, low, light, quiet place for feedings helps her or him be calm and focus only on the feeding.

Your baby will be with you on the Maternity Unit while you recover from your birth. If at any time your baby's symptoms indicate the need for treatment of his/her withdrawal, the baby will be transferred to the Neonatal Intensive Care Unit (NICU) for further evaluation and, if needed, treatment with medication. Once you are recovered, your doctor will discharge you, and your baby's doctor will order continued watch of your baby for a minimum of five days. If your baby has been with you on the maternity unit, he/she will be transferred to the Pediatric Unit. You are encouraged to stay with your baby and continue caring for and comforting him/her through this time, in either the NICU or the Pediatric Unit.

The health care team will be doing the following:

- 🧡 Using a tool to evaluate your baby every 3-4 hours to look for symptoms of withdrawal and, if they see symptoms, looking for severity of the symptoms.
- 🧡 Based on severity of symptoms, deciding if medication is needed to help ease your baby's withdrawal.
- 🧡 Determining a plan of care, depending upon your baby's symptoms, and discussing this with you.
- 🧡 Performing lab tests: Urine and stool testing for the presence of opioids and other drugs and possibly blood tests to check on your baby's overall health.
- 🧡 Supporting you with a Social Worker to provide support during your hospital stay and help plan for your baby's discharge and you and your baby's ongoing care.
- 🧡 Referring you to other social service agencies if needed.

Planning for Discharge from the Hospital:

Babies who are treated for withdrawal with medications may be in the hospital for 2 weeks or more. During that time the dose of the medication is slowly decreased as your baby's withdrawal symptoms lessen.

Your baby's health care team of doctors, nurses, and social workers will make referrals to community programs for the health and ongoing evaluation of your baby. They will discuss these with you.

New Hampshire State law mandates reporting of any baby with a positive toxicology (drug) screen to the Division for Children, Youth and Families (DCYF). Your Social Worker will be your resource on this process. She is available to answer any questions you have related to this reporting.