Outstanding Care, Compassionate People, Healthier Communities



INFORMATION FOR PARENTS, GUARDIANS AND CARERS

Prolonged jaundice



Your baby was referred because he/she is jaundiced after two weeks of age. This leaflet explains what jaundice is and how it is treated.

What is jaundice?

Jaundice is a yellow colouration of the skin and whites of the eyes that is common in newborn babies. It is caused by a pigment called bilirubin. Bilirubin is made from the breakdown of blood and is removed from the body by the liver. In newborn babies. blood breaks down more quickly meaning that bilirubin levels can build up very high.

A moderate amount of jaundice is quite common in many newborns and not harmful. However, extremely high levels may be harmful, so this is why jaundice levels are monitored during the first few days of life to prevent the level becoming too high. As the liver begins to mature your baby will be able to clear these high levels by his/her self. This should have occurred by two weeks of age (three weeks of age in premature babies).

What causes prolonged jaundice?

For most babies, there is no underlying illness to cause their prolonged jaundice. Prolonged jaundice can be slightly more common in babies who are breastfed. Breast milk jaundice is thought to be caused by a protein in the milk, which prevents the breakdown of bilirubin in the liver. It does not cause any harm to your baby and you should continue to breastfeed as normal.

Rarely, there may be an underlying reason for prolonged jaundice, which includes blood or liver diseases, genetic problems and infections. If your baby has pale, chalky coloured stools and dark coloured urine, please contact your midwife or health visitor so that an urgent assessment can be arranged.

What happens at the jaundice clinic?

If your midwife or health visitor is concerned about prolonged jaundice, your baby will be referred to the Ambulatory Clinic or to the Children's Assessment Unit for review. You will be asked questions about feeding, the colour of stools and urine. Blood tests will be taken to measure baby's jaundice levels. You will be contacted with the results via telephone from one of the paediatricians.

Will the jaundice get better?

As baby's liver function matures, the jaundice should gradually improve. If you are breastfeeding your baby, you should continue to feed as normal.

Contact details

If you are concerned about your baby having prolonged jaundice, please seek advice from your community midwife, health visitor or GP.

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222 **Newark Hospital:** 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet (if relevant) please email <u>sfh-tr.patientinformation@nhs.net</u> or telephone 01623 622515, extension 6927.

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