Caring for your baby with neonatal abstinence syndrome

Having a baby can be a happy time in your life. It can also be hard when your baby needs medical attention. A baby with neonatal abstinence syndrome (also called NAS) may need to be in the hospital neonatal or newborn intensive care unit, also called the NICU. The NICU is a place where babies who need special care stay after birth.

What is NAS?

NAS is a group of health conditions caused when a baby withdraws from certain drugs he's exposed to in the womb before birth. NAS most often happens when a pregnant woman takes opioids, like oxycodone, methadone, heroin or other medications. NAS can be caused by medicines that may or may not have been prescribed by a doctor.

Signs and symptoms can be different for every baby with NAS. Most appear within 3 days (72 hours) of birth, but some can appear right after birth or within a few weeks of birth. Signs and symptoms can include:

- Fussiness, excessive crying or having a highpitched cry
- Trouble sleeping and lots of yawning
- Poor feeding or slow weight gain
- Sucking excessively
- Breathing really fast

- Fever, sweating or blotchy skin

- Body shakes (tremors), seizures (convulsions), overactive reflexes (twitching) and tight

• Diarrhea or throwing up

- Stuffy nose or sneezing
- muscle tone

How long will my baby be in the NICU?

Not all babies with NAS will go to the NICU. Most babies with NAS who stay in the NICU are there for an average of 16 days. This could be shorter or longer based on your baby's symptoms or other health conditions.

What care will my baby get in the NICU?

During your baby's NICU stay the staff will make sure he is comfortable and show you ways to care for and comfort him. NICU staff will:

- Use a scoring method to check your baby's symptoms every few hours. Many NICUs use the Finnegan scoring method, which is done at least every four hours.
- Give your baby medicine, if he needs it, to help with withdrawal symptoms. Once these symptoms are

- under control, your baby gets smaller doses of the medicine over time so her body can adjust to being off the medicine. Medications may include morphine, methadone and buprenorphine.
- Make sure your baby is getting enough to eat. Your baby may be fed formula with extra calories to help her gain weight. Some babies are fed through a feeding tube until they can breastfeed or take a bottle. The feeding tube is put in the baby's nose or mouth and goes into the stomach.
- Order your baby other kinds of care, which may include:
 - Physical therapy to help with muscle strength and coordination.
 - Occupational therapy to help her develop skills in moving her arms and legs, feeding and swallowing, and bonding.
 - Speech therapy to help with feeding problems.
- Do things to keep your baby comfortable, like swaddling her or giving her a pacifier.
- Keep you updated and help you care for your baby.

How can I help with my baby's care?

You have an important role in helping your baby. Caring for your baby may help you become a more confident caregiver and may help reduce his symptoms. Here are some ways you can help:

Ask questions. Ask questions about anything you don't understand. You can ask questions anytime, day or night. Here are some questions you might ask:

- How is my baby doing today?
- Can I hold my baby?
- What can I do to help take care of my baby?
- When do you think my baby will go home?
- What do I need to learn about my baby before we go home?



Be an active part of your baby's care team. There are many ways you can take care of your baby during his NICU stay. Spend time with your baby and learn what makes him feel better. Talk with your baby's nurse about ways to comfort your baby. This may include:

- Holding him in a quiet room with dim lights. If you can't dim the lights, shade your baby's eyes with your hands.
- Holding him skin-to-skin. This means putting your baby, dressed only in a diaper, on your bare chest. Ask your baby's nurse to show you how.
- Swaddling him. This means wrapping a thin blanket snugly around your baby so that it covers most of his body below the neck. Your baby's nurse can show you the safest way to do this.
- · Giving him a bath.
- · Changing his diaper.
- Feeding him. Talk to the NICU staff about your options for feeding your baby. You may be able to safely breastfeed or pump milk for him.
- Giving him a pacifier. Your baby may want to suck a lot, even when he's not hungry, and a pacifier can help comfort him.

Protect your baby. Keep germs away from your baby by washing your hands often. Second hand smoke, even on clothes, can hurt your baby. Anyone who smokes or is around smoke should change clothes before touching your baby.

How can I help myself?

Having a baby in the NICU can cause many feelings like guilt, sadness, fear and anger. It's important to take good care of yourself too, so you can stay well. Doing this will give you more energy to spend time with your baby. Here are some ways to take care of yourself:

- Continue to see your health care providers. If you're taking medicine prescribed by a provider, ask him any questions you may have. Ask if a treatment plan for opioid use would be helpful. If you're in treatment for addiction, continue to follow your treatment plan.
- Have a daily routine that includes taking care of yourself and spending time with your baby.
- Connect with other moms who have had a baby with NAS.
- Ask for help when you need it.

How do I care for my baby at home?

Here are a few important things to do when you are at home:

- Make sure your baby has a safe place to sleep. Share your bedroom with your baby but not your bed. Your baby has a higher chance of dying or not being able to breathe if she sleeps with you in your bed. Instead, put your baby in her own crib or bassinet. Keep it close to your bed so your baby is nearby during the night.
- Keep your baby safe in her own bed. Always use a firm, tight-fitting mattress and a fitted sheet in your baby's bed. Don't put pillows, blankets, stuffed animals or crib bumpers in your baby's bed. She may not be able to breathe if one of these items gets in her face. Put your baby to sleep on her back. Just think "back to sleep." Putting babies to sleep on their back lowers their risk of sudden infant death syndrome, also called SIDS.
- Follow up with your baby's health care provider. Your baby will have many checkups with the doctor during the first year. At each visit, talk to her provider to make sure your baby is growing in a healthy way.

Never let anyone shake your baby.

Babies with NAS may be fussy and hard to calm. Sometimes crying can make parents or caregivers frustrated and angry. This can make them shake the baby to try to make the baby stop crying. Never shake a baby. It only takes a few seconds of shaking to cause brain damage that may never go away.

Call 911 if you feel like you're losing control and are worried that you or someone else might hurt your baby.

Things to remember:

- As a parent, you have an important job in helping your baby get better.
- NICU staff are here to help you care for your baby.
- Take care of yourself, so that you can take care of your baby.
- Once you are home, make sure your baby is safe and keep up with doctors' appointments.

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