



Maternity and Special Care Baby Unit

**Neonatal Abstinence Syndrome (NAS) and
Comfort Care**

Parent Information Leaflet



The aims of this leaflet are to:

- Help you to understand NAS and recognise signs in your baby
- Suggest ways to care for your baby during this time
- Help you understand what the expectations are of you as parents in caring for your baby

What is Neonatal Abstinence Syndrome (NAS)?

Most substances taken in your pregnancy will pass through the placenta and will be absorbed by your baby. This means that your baby has shared substances such as:

- Prescription medication
- Over the counter medications
- Street drugs
- Herbal remedies
- Alcohol
- Nicotine
- Caffeine

These substances can cause a physical dependency and your baby may be born dependent on these substances too.

At birth, the umbilical cord is cut and your baby's supply of these substances suddenly stops. This may cause your baby to experience and show signs of withdrawal. This is called Neonatal Abstinence Syndrome (NAS). The signs and symptoms are similar to that of an adult when they go 'cold turkey' (abruptly and completely stopping a drug to which you are addicted).

What to expect after delivery

Unless your baby needs immediate medical attention and admitting to the Special Care Baby Unit, you and your baby will be cared for together on the post-natal ward. It is very important that Mum and baby are cared for together as this aids bonding with your baby and helps you recognise the signs and symptoms of NAS and learn what you can do to help care and comfort your baby.

Because substances affect the body differently, and because each baby is different, signs and symptoms of NAS may begin as early as day 1 of life, or may not be evident until later in the first week. NAS can also last for several weeks in some cases, so you should be prepared for a minimum of 5 days stay in hospital, or this could be as long as 2 weeks. If your baby has been exposed to multiple substances during pregnancy, they may experience separate 'episodes' of NAS. You need to be aware that this may take more time or prolong your stay in hospital.

Your baby will be monitored by midwives for signs of NAS, and this will include regular temperature checks, monitoring feeding volume and duration and how your baby is sleeping. Your baby will also be reviewed regularly by the Paediatric medical team to ensure your baby is coping well and does not require any further treatment.

Special Care Baby Unit

Most babies do not require medical treatment for NAS; however, some babies' symptoms are so severe that they require medication to ease their discomfort. This medication will be controlled and reduced slowly as your baby improves, to help your baby withdraw safely and more comfortably. If medication is required, your baby will be admitted to the Special Care Baby Unit (SCBU); however you will be actively encouraged to undertake all aspects of your baby's care. It may not be possible for you to stay with them, but SCBU has an open visiting policy for parents, and every effort is made to care for you as a family.

Once the medication has stopped, your baby will be further monitored for at least 24 hours to ensure they are well enough and it is safe for them to be discharged home.

What are the signs and symptoms of NAS and what can you do to help your baby?

The table below details what to look for in your baby and simple but effective things you can do to help your baby.

<u>Crying and Sleeplessness</u>	
<p>Your baby may cry a lot, and may have a high-pitched, continuous, irritable cry. They may also find it difficult to settle to sleep even after a feed.</p>	<ul style="list-style-type: none"> • Stay calm • Attend to your baby quickly before they become too upset • Skin-to-skin contact or close cuddling will be soothing for your baby • Keep the room as quiet and dark as you can • Handle your baby gently – Try not to ‘jiggle’ them. • A dummy may help to settle them if they are not hungry • Avoid patting or touching your baby too much • Humming or gentle soothing music may help
Poor Feeding or Vomiting	
<p>Your baby may often appear very hungry and want to feed very frequently. They may also take large volumes of feed and experience frequent episodes of vomiting.</p>	<ul style="list-style-type: none"> • Most of the time breast feeding is best for your baby. However, there are some situations where we would recommend you do not breast feed your baby, for example if there has been crack cocaine usage during pregnancy. Please discuss this with your Midwife or Obstetrician • Feed your baby when they want

	<ul style="list-style-type: none"> • Feed your baby in calm quiet surroundings, away from distractions ▪ Supporting your baby’s chin with your fingers can help increase your baby’s sucking ability ▪ Feed your baby slowly, stopping frequently to wind them ▪ Ensure you clean any vomit or dribble away from their skin with a clean cloth immediately as their skin may become sore
Sneezing or Stuffy Nose	
<p>Your baby may experience times of sneezing a lot, or may sound like they have a stuffy, snuffly or blocked nose</p>	<ul style="list-style-type: none"> • Keep your baby’s nose and mouth clean • DO NOT attempt to clear your baby’s nose as this may cause damage • Talk to your midwife or the paediatric team if you are concerned
Trembling or Stiffness	
<p>Your baby may appear to be ‘jumpy’ or ‘shaking’ at times. They may also feel tense and stiff in their arms and legs.</p>	<ul style="list-style-type: none"> • Handle your baby slowly and gently • Change your baby’s body position regularly • Comfort holding may help reduce the trembling • Reduce light and noise in the room

	<ul style="list-style-type: none"> • Use a light sheet to LOOSELY swaddle your baby, ensuring there is plenty of room around the baby's head and neck. A midwife can offer advice on swaddling
<ul style="list-style-type: none"> • Sore Skin 	
<p>Your baby may develop areas of sore, broken skin. This may be especially in their nappy area and areas that remain warm and damp e.g. under their chin after a feed if not cleaned properly.</p>	<ul style="list-style-type: none"> • Change your baby's nappy regularly • Use a barrier cream to help protect the delicate skin e.g. Vaseline • Ensure skin is cleaned and dry • Daily washing with plain water may help • Avoid your baby scratching themselves by using scratch mittens or dressing them in a baby grow with built in mittens
Fevers and Sweating	
<p>Your baby may experience high temperatures and excessive sweating at times</p>	<ul style="list-style-type: none"> • Dress your baby in lighter clothing. They may only require a nappy and vest at times • Allow the midwives to monitor your baby's temperature • Change your baby's clothes if they are making their clothes damp with sweat • Do not use excessive covers over your baby • Do not tightly swaddle baby

Other tips...

Babies with NAS can be very difficult and challenging to care for, and many parents find this a very difficult time. Here are a few useful tips that you may find useful when caring for your new-born baby.

- Do not wake your sleeping baby
- Avoid strong smells around your baby (perfume, cooking smells, cleaning products etc)
- DO NOT smoke near your baby, and change your clothes after you have smoked to avoid your baby coming into contact with harmful chemicals from smoking
- DO NOT share a bed with your baby. Your midwife will talk to you about the safest sleeping position for your baby
- DO NOT give your baby any medication unless advised by a doctor
- Never worry about asking for help or advice – your midwife, doctors, neonatal staff and health visitor are always happy to offer you support and advice when you need it.

What else do you need to know?

If there are additional agencies involved in the care of you and your family e.g. Social Services, they will be informed of the birth of your baby. In some cases a pre-discharge planning meeting is held, to ensure you and your baby get the best support and care once discharged home. You will be told of this meeting and in most cases invited to attend.

A Hepatitis B vaccine may be offered to your baby to provide them with additional protection. This will be discussed with you before it is given.

Many babies who are born with NAS recover fully in time, but some may require longer-term follow up with the medical team and may even require further investigations and treatment. This will all be explained to you whilst you are in hospital caring for your baby.

Useful Contacts:

Your Midwife: _____

Telephone number: _____

Your Health Visitor: _____

Telephone number: _____

Your GP: _____

Telephone number: _____

Your Social Worker: _____

Telephone number: _____

REACH Drug and Alcohol Services: 08000 434656

About this leaflet:

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If you have feedback regarding the accuracy of the information contained in this leaflet, or if you would like a list of references used to develop this leaflet, please email pals@dchft.nhs.uk



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