



Children's Health

Jaundice

WHAT IS IT?

As many as half of all full-term babies and three-quarters of all premature babies develop jaundice. Jaundice—yellowing of the skin and eyes—is usually a normal adjustment to living outside the womb and no treatment is necessary. However, in rare cases, it's caused by an infection or a birth defect.

WHAT CAUSES JAUNDICE?

Yellowing of the skin and eyes occurs when there's too much bilirubin present in the bloodstream. Bilirubin is a yellow pigment that is the end result of the breakdown of hemoglobin (the oxygen-carrying protein) present in all red blood cells. Normally, bilirubin is carried to the liver and processed and eliminated through the feces and urine. In newborns, this system gets overloaded, so the yellow pigments collect in the bloodstream.

TYPES OF JAUNDICE

PHYSIOLOGIC JAUNDICE—While inside the air-free womb, an infant's body produces more red blood cells to get the oxygen needed. After birth, the infant's body may have trouble eliminating bilirubin fast enough, so it may accumulate in the blood and diffuse into the skin.

PATHOLOGIC JAUNDICE—A disease or abnormality is present, which causes the bilirubin numbers to elevate. The most common types of pathologic jaundice in newborns are Rh and ABO blood incompatibilities. A liver disease or infection could also be the cause.

BREAST-MILK JAUNDICE—It is believed that a substance in the breast milk slows down the

newborn's ability to process the bilirubin. This may not cause a problem for the baby, and breast-feeding may not have to be interrupted, except in rare cases when the bilirubin levels are very high. The jaundice will be seen in the first week of life and may take four to six weeks to clear up.

TREATMENT

Because very high levels of bilirubin can be damaging, causing cerebral palsy or death, close monitoring and treatment may be necessary. A common treatment used to rid high levels of bilirubin from an infant is photo therapy. This type of treatment uses artificial light to photo-oxidize (decompose) the light-sensitive bilirubin. If the jaundice is mild, nothing may be done except to monitor the baby.

WHAT YOU CAN DO

- Avoid drugs during pregnancy that are known to cause jaundice, such as Valium, aspirin and hydrocortisone.
- Breast-feed your child as soon as possible after birth and frequently thereafter. Colostrum, the first milk, is an excellent laxative which will speed up the passage of the first stool, which is loaded with bilirubin.
- Be informed about your child's bilirubin levels and treatment plan.