What is Jaundice?
- jaundice is a common condition in newborn babies
- jaundice in newborn babies is a yellow colour of the skin and whites of the eyes
- jaundice is caused by a raised level of bilirubin in the blood. Bilirubin is a normal substance made by the liver
- approximately 60% of term and 80% of preterm babies develop jaundice in the first week of life.

What is the cause of your baby's jaundice?
- before birth babies require a higher level of red blood cells in order to carry oxygen around their body
- once they are born they no longer require so many red blood cells as these are broken down
- this produces a dark yellow waste substance known as bilirubin, which is passed out in the urine. Sometimes this process in newborn babies can be slower so they get a build-up of bilirubin in the blood
- if your baby begins to become jaundice, the midwives will ask you to try to feed your baby more frequently to help the jaundice disappear.

Is jaundice harmful to my baby?
- most jaundice is mild and will not harm your baby
- it will usually disappear as her liver matures towards the end of the first week of life
- this is called physiological jaundice. We will watch this in most cases without doing anything or needing special tests.

Investigations
- on admission your baby will be assessed by midwifery, nursing or medical staff visually or by using a small monitor pressed against the skin on the chest
- if the skin is very yellow or the monitor reading is high, a blood sample is taken as this is the most effective way of diagnosing a high level of bilirubin in the blood
- once the result is available the midwives will know whether treatment will be commenced depending on the level of bilirubin in the blood.

Treatment
- if your baby has a raised bilirubin level they may require phototherapy
- phototherapy is a treatment using a strong lightblue light on baby’s skin
- phototherapy helps lower the bilirubin levels in your baby’s blood
- phototherapy changes the bilirubin into a substance that dissolves easily in water and can be removed by the baby’s blood
this makes it easier for your baby’s liver to break down and remove the bilirubin from their blood via urine and bowel stool motions

the aim of phototherapy is to expose your baby’s skin to as much light as possible

your baby will be nursed naked, apart from a nappy while on this phototherapy

blood will be taken every 6 hours or daily if you are at home to monitor the bilirubin levels

once the level is lowered to a safe level below treatment level your baby will stop phototherapy

in severe cases of pathological jaundice the baby may need to have new blood transfused and the old blood removed to replace the blood with high levels of bilirubin

this is called an exchange transfusion

an exchange transfusion is very rare and if it is required, your baby will need to be monitored closely. This treatment will occur in the NICU under the guidance of the Paediatric team.

We welcome further feedback on this brochure as a way of continually improving our service.

Send your feedback to:
WSLHD-Get_Involved@health.nsw.gov.au