

## **Prolonged Jaundice Parent Information Leaflet**

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### **What is prolonged jaundice?**

Jaundice is described as a yellowing of the skin, and sometimes of the whites of the eyes. It occurs in 90% of newborn infants. Prolonged jaundice is the term for jaundice which is still present after 2 weeks in term babies and after 3 weeks in preterm babies (that is, less than 37 weeks gestation).

### **What causes prolonged jaundice?**

Jaundice is caused by the build up of a dark yellow substance called bilirubin. This is a natural waste product of the normal breakdown of red blood cells. Before birth, the mother's liver removes this product, but after birth the baby's liver must get rid of it on its own.

However, the liver is still immature in newborns, so it is less efficient at clearing waste products. These can build up in the skin and appear as jaundice.

Jaundice usually appears after 2-3 days and gradually disappears on its own by 14 days. However jaundice can often last longer, especially in the breastfed or preterm baby.

### **Does prolonged jaundice matter?**

Prolonged jaundice is usually related to breast milk feeding and is harmless. In this case, jaundice will disappear in the coming weeks and you should continue breastfeeding your baby.

Very rarely prolonged jaundice can be a sign of a liver, thyroid, metabolic or blood problem. This is very uncommon but must be investigated so that treatment may be given if required.

### **What to expect if your baby remains jaundiced**

Term babies who remain jaundiced after 14 days and preterm babies who remain jaundiced after 21 days will be assessed by your Midwife or Health Visitor.

- If there are any concerns your baby will be referred to hospital for further tests
- If there are no other concerns about your baby's health, your baby will be seen again by your Midwife or Health Visitor weekly. If your baby is still jaundiced at 4 weeks of age your baby will be referred to hospital for further tests
- Look at the colour of your baby's nappies every day (see below), and check for other 'red flags'. If any are present please contact your Midwife or Health Visitor urgently for immediate review.
- At clinic, your baby will be examined and a blood test will be performed to check the level of bilirubin in the blood.

## When to seek help ('red flags')

Please contact your Midwife or Health Visitor at any time if your baby develops any of the following signs:

- Pale 'suspect' stools (see chart below or online scanning the QR code here)

**\*This is a very important sign and you should check the colour of your baby's dirty nappies every day\***

- Dark urine
- Poor feeding
- Sleepiness or excessive crying
- Swollen tummy
- Rash or bruising



## Does prolonged jaundice require treatment?

Babies with jaundice due to breast milk or prematurity will not require treatment, and jaundice will disappear over coming weeks. You should not stop breast feeding.

If tests show that your baby has another reason for jaundice then the treatment depends on the cause.

## Further information

If you wish to discuss anything about your baby, please speak to your GP or Health Visitor.

You may wish to download the 'Yellow Alert' app or find more resources at the Children's Liver Disease Foundation by scanning this QR code:

