

Patient information from BMJ

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Jaundice in newborn babies: what is it?

You might be worried if your new baby gets jaundice. But it's not usually serious. In most babies the jaundice goes away in a week or two without any treatment. But sometimes the jaundice can become more serious and cause problems in the baby's brain. It's for this reason that doctors always watch jaundice in babies very carefully, so that they can treat it before this happens.

Why do newborn babies get jaundice?

Jaundice in newborn babies is very common, affecting as many as 70 in every 100 babies carried full term, and 80 in every 100 babies born early (prematurely). It happens when there is too much of a substance called bilirubin in a baby's blood. This makes the baby's skin, the whites of their eyes, and the inside of their mouth look yellow.

Bilirubin is made naturally in the body, when red blood cells that aren't needed any more are broken down. Usually, the liver changes the bilirubin into a form the body can get rid of as waste. But sometimes the liver can't process all the bilirubin the body makes. When that happens bilirubin builds up in the body and makes the skin and the whites of the eyes look yellow.

Sometimes newborn babies get jaundice because of an underlying illness, such as an infection or a condition called rhesus disease. Here, we discuss jaundice that isn't related to other problems.

Most newborn babies get jaundice for two main reasons:

- They produce twice as much bilirubin as adults
- Their liver isn't properly developed and can't process the extra bilirubin that their body makes.

Jaundice usually starts in the first few days after a baby is born. By the time babies are about 2 weeks old, they make less bilirubin and the jaundice clears up.

What are the symptoms?

Newborn babies who have jaundice may get a yellow tinge to:

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- Their skin
- The whites of their eyes
- The inside of their mouth.

It can be hard to tell if a baby's skin is yellow, especially if the baby has dark skin. That's why doctors also look at babies' eyes and inside their mouth to spot jaundice. They often also use a device called a transcutaneous bilirubinometer, which helps them measure the yellowness of the skin.

Babies with severe jaundice may also:

- Feed less well than normal
- Seem less alert and harder to wake
- Have a high-pitched cry
- Seem limp.

If you think your baby has jaundice and seems to be unwell, you should tell your doctor straight away. If your doctor thinks the amount of bilirubin in your baby's blood is building up, they will do a blood test. This will help them decide if your baby needs treatment.

What will happen to my baby?

For most babies, jaundice goes away in a week or two without any treatment.

But if your baby's bilirubin level builds up, light treatment or an exchange transfusion should help to clear it.

If treatments don't work and a baby's bilirubin level gets too high, it can cause serious problems. One problem, called kernicterus, can affect your baby's brain. It can lead to hearing loss, learning difficulties, and late development. But this kind of problem is very rare.

For more information on treatments for jaundice in newborn babies see our leaflet *Jaundice in newborn babies: what treatments work?*

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