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Jaundice in newborn babies: what are the treatment options?

Jaundice (a condition that causes yellowing of the skin and whites of the eyes) is common in newborn babies.

You may be worried if your baby gets jaundice, but it's usually not serious. In most cases, the jaundice goes away in a week or two without any treatment. But sometimes the jaundice can become serious and cause problems in the brain. Your doctor will monitor your baby carefully if they have jaundice to see whether treatment is needed.

What treatments work?

Jaundice in newborn babies is very common. It affects between 50 and 70 in every 100 babies carried full term, and 80 in every 100 babies born early (prematurely).[1] 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.

Most babies with jaundice won't need any treatment as their jaundice will usually go away on its own within a week or two. During this time, parents are advised to be watchful for changes to their baby's jaundice and behaviour, and to have regular checks with their doctor.

It's also important that parents ensure their baby stays well hydrated by providing regular, on-demand feeding. Having enough fluids will help the baby's body break down the extra bilirubin that is causing the jaundice.

Breast milk is the best first food for most babies. But, sometimes, substances in the breast milk are thought to increase a baby's chance of developing jaundice (this is called 'breast milk jaundice'). If this happens, your doctor will probably still recommend that you continue to breastfeed. The benefits of breast milk are usually thought to outweigh any harms from this type of jaundice and it usually resolves within a few weeks.

If your baby's bilirubin level is especially high or increasing, your doctor will recommend having treatment. The main options are light treatment and exchange transfusion.

Light treatment (phototherapy)

Light treatment, also known as phototherapy, is a simple treatment that works well to get rid of jaundice.

To have light treatment, babies are usually put in a cot that directs a special light over their body. The light helps your baby's body process the extra bilirubin in their blood. Your baby's eyes will be covered with a mask to protect them. Most babies need about one or two days of light treatment.

Light treatment has very few side effects, although there's a chance your baby could become too warm or dehydrated, or get a skin rash. Your baby will be monitored and treated for any side effects.

Another form of phototherapy is called fibre-optic light treatment. For this treatment, your baby is wrapped in or placed on a blanket made of material that contains optical fibres. Light shines down these fibres. Sometimes regular and fibre-optic light treatment are used at the same time.

Exchange transfusion

If light treatment hasn't helped your baby, or the level of bilirubin in your baby's blood is rising very rapidly, doctors may do an exchange transfusion.

During this treatment some of your baby's blood is taken out and replaced with blood from a donor. This is the fastest way to reduce bilirubin levels. The transfusion may need to be done again, depending on how much bilirubin remains in your baby's body.

Exchange transfusion can occasionally cause some serious side effects, such as bleeding. But if your baby is healthy, apart from having jaundice, they are very unlikely to be harmed by having an exchange transfusion.

For more background information on jaundice in newborn babies see our leaflet *Jaundice in newborn babies: what is it?*

References

1. Kumar RK. Neonatal jaundice. An update for family physicians. Aust Fam Physician. 1999 Jul;28(7):679-82.

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