



## Caregiver Information

### CARING FOR YOUR BABY DURING WITHDRAWAL

Babies who have been exposed to certain medications and/or substances before they are born may show signs of withdrawal. Withdrawal happens when the baby's system is no longer receiving the medication or substance he or she is used to getting when they were inside you. Some babies may never show any signs, others will show some signs, and others will show many signs. Signs of withdrawal may occur within a few hours or days of birth and may last for many days.

#### **Withdrawal Signs: These signs are different for each baby and may include:**

- Irritability and excessive crying – that causes lack of sleep or feeding problems
- Stuffy nose, sneezing and yawning
- Loose stools (so use diaper cream or barrier cream to prevent diaper rash)
- Some vomiting after feeding
- Excessive weight loss after birth (more than the 10% weight loss that is acceptable) and poor feeding
- Trembling or tremors or high muscle tone
- May need to suck on a soother a lot

#### **How will my baby be monitored and what can I do for my baby during withdrawal?**

Your baby will need to stay in hospital for 3 to 5 days to monitor for signs of withdrawal. Research has shown that the best place for your baby is with *you*, the caregiver. Sometimes the simplest of solutions can make a big difference, such as comfort measures; like a dark quiet room, swaddling, holding and gentle rocking, or feeding help. The nurses will use a Model of Care called Eat, Sleep and Console (ESC) for your baby which helps everyone know if your baby is experiencing withdrawal and if they can do the basic activities that babies need to do: Eat, Sleep and be Consolable.

#### **EAT: Is your baby feeding well?**

- Breastfeeding is usually safe and recommended because of its many benefits even when you are still taking medication or the substance the baby is withdrawing from. The symptoms of withdrawal can be reduced when an infant is breastfed because the baby is still receiving small amounts of the medication or substance. Talk to your health care provider about whether breastfeeding will be a good idea for you and your baby.
- Is your baby able to breast or bottle feed within 10 minutes of showing they are hungry AND able to sustain feeding for 10 minutes (minimum) at breast OR take enough by bottle for their day of life (minimum of 10 mL/feed day one, 15 mL/feed day two, 30 mL/feed day three). Small spits are also to be expected.
- Sometime babies that are withdrawing cannot eat well due to the fact that can't be settled enough to focus on feeding due to tremors, fussiness or being uncoordinated or unable to latch with feeding.
- Babies sometimes want to suck excessively, which helps them to calm and soothe themselves but don't want to necessary feed for nutrients, so it is good to offer them a soother during these times.

## **SLEEP: Can your baby have a continuous sleep for more than 1 hour?**

- Sleeping is a basic need for babies and mothers and if your baby is withdrawing, he or she may struggle with this as they simply cannot calm themselves enough to get some quality time sleeping.
- Once they are asleep it is important to allow them to sleep and provide an environment to do so, like not interrupt or waking them by picking them up or having lots of loud noise, bright lights or visitors.
- They may need to be held, swaddled or gently rocked to help them relax, feel safe and fall asleep and stay asleep.

## **CONSOLE: Can your baby be consoled within 10 minutes of being held?**

- Babies that are having signs of withdrawal can be very fussy, irritable and have tremors, and be very tight or have high tone in their muscles.
- First thing to do is make sure your baby is not hungry or needs a diaper change!

### **Ways to console your baby can include**

- Skin to skin with holding
- Wrapping or swaddling your baby in soft, light weight blanket to help them feel contained and safe
- Hold baby frequently, gently but firmly! Avoid bouncing / rapid patting and movements
- Remember to always have baby on his or her back to sleep in his / her own bassinette/crib
- Remember that sleeping with your baby can be dangerous!
- Decrease stimulation by keeping the light and noise levels low, keep visitors to a limit



**Skin to skin contact  
("Kangaroo Care")**

## **What if my baby has many signs of withdrawal?**

If a baby has many signs of withdrawal, is not able to feed well, has difficulty sleeping or crying and cannot be consoled he or she may need additional care and attention in the NICU.

**What will be different in the NICU with my baby?** The Eat, Sleep, Console Model of Care will still be used.

- Medical tests (like blood work, x-rays), breathing and heart monitoring will be done to make sure there are no new medical problems other than your baby's withdrawal.
- A feeding tube may be needed temporarily to help your baby get the formula or breast milk they need when they can't take enough on their own.
- Your baby will go into a safe, quiet, dark room where they will be cared for by mother / caregiver and the medical team working together.
- A single dose of Morphine may be needed to help with your baby's withdrawal (if all other measures are working!). Additional or regular Morphine doses will be decided together with the medical team and mother / caregiver depending on how the baby is managing.
- Baby may stay in NICU for 5-7 days. To be discharged from NICU, baby needs to be able to feed, have lots of wet and poopy diapers, not lose too much weight, sleep in between feedings for at least a couple of hours.