

# **A KGH guide for parents of babies at risk of Neonatal Abstinence Syndrome**

2014



### **Planning care for you and your baby**

Reading this booklet can help you:

- learn how certain drugs can affect your baby during pregnancy and after birth
- understand your baby's needs
- learn how to care for your baby

Acknowledgement: McMaster Children’s Hospital

### What is Neonatal Abstinence Syndrome?

Neonatal Abstinence Syndrome (NAS) refers to symptoms that babies may have if their mothers used methadone or other drugs during pregnancy. This is often called “withdrawal”.

If your baby develops symptoms of withdrawal, you and your family can help by comforting your baby. Comfort measures can reduce the symptoms of withdrawal. You will learn about comfort measures in this booklet.

#### What can cause withdrawal symptoms?

Prescription medications such as:

- morphine
- OxyNeo
- oxycontin
- Tylenol #3
- Hydromorphone

- Percocet (oxycodone)
- Methadone
- Subutex
- Fentanyl

Street drugs such as:

- cocaine
- crack
- speed

- ecstasy
- heroin
- oxys

### What happens when you are pregnant:

During pregnancy, almost every drug in your blood can pass to your baby. This means your baby shares the medications, drugs and substances you take while you are pregnant.

Prenatal care is important for you and your baby’s health. Make sure to:

- ✓ have regular check-ups during your pregnancy
- ✓ meet with health care providers to make plans for your baby’s birth

Please talk openly with your health care providers about the medications, drugs and other substances you are taking or have taken during your pregnancy, including:

- prescription medications
- “over-the-counter” medications
- street drugs
- herbal remedies
- alcohol

- cigarettes

Your health care providers need to know this information to care for you and your baby. They understand that each person takes medications, drugs or other substances for different reasons.

Any changes in your medications or drug habits can affect your baby's health. If you are thinking of changing your medications or drug habits, talk with your health care providers first. Sharing this information helps your health care providers choose the right plan of care for you and your baby.

You can also refer to the following for further information: <http://www.motherisk.org/women/index.jsp>



### Support available for you at Kingston General Hospital:

Our process brings you and your family together with members of the health care team (includes nurses, doctors, social workers and nurse practitioner). These meetings:

- help us understand your background, your strengths and your needs during your pregnancy and after the birth of your baby
- help you learn about NAS and make plans for your baby's birth

A **Pediatrician or Nurse Practitioner** will talk to you about what to expect after your baby's birth and the treatment your baby may need.

A **Social Worker** will support you during pregnancy and after your baby's birth. A social worker can help you, and your family cope with life challenges, and connect with helpful resources in your community.

A blue-bordered graphic containing contact information for Kingston General Hospital. On the left is the KGH logo (KG+I) and on the right is the text "KINGSTON GENERAL HOSPITAL". Below this, contact numbers are listed for General Inquiries, Auto Attendant, Emergency Department, Fraser Armstrong Patient Centre, and Patient Locating. At the bottom, the hospital's address is provided.

**KG+I** KINGSTON GENERAL HOSPITAL

**General Inquiries 613 548-3232**  
**Auto Attendant (if you know the extension) 613 549-6666**

Emergency Department - Open 24 Hours A Day **613 548-2333**  
Fraser Armstrong Patient Centre (Outpatient Clinics) **613 548-2342**  
Patient Locating **613 548-2367**

**76 Stuart Street, Kingston, Ontario, K7L 2V7**



An exciting new regional program funded by the South East Local Health Integration Network is in the early stages of implementation.

If you are you a woman who:

- ❖ Is pregnant and/or parenting children under the age of 6 and
- ❖ Have been/are currently experiencing a problem with opioids (oxycodone, Percocet®, heroin, Dilaudid®, morphine) or receiving methadone treatment

Thrive offers:

- ❖ Counseling
- ❖ In-hospital and in-home support visits
- ❖ Parenting support and education
- ❖ A single coordinated care plan for you
- ❖ Time for you to recognize your strengths, set goals and expand your supports
- ❖ Opportunities to participate in our community advisory group

Thrive helps with transportation, food and childcare so you can participate.

The Kingston office is located at 234 Concession St Unit 203.

Please feel free to contact us to become involved or if you have any questions.

General office number 613 766-1101

You can find Thrive staff working out of 3 area Community Health Centres: Kingston Community Health Centres, Belleville -Quinte West Community Health Centre and Rideau Community Health Services.



### **What happens after your baby is born:**

It is very important that you and your baby bond soon after birth. The health care team will support you and your baby. You also have an important role on your baby's health care team, helping to:

- watch your baby for symptoms of Neonatal Abstinence Syndrome (also called NAS or withdrawal)
- provide comfort measures to reduce your baby's symptoms

### **What is withdrawal?**

At birth, your baby no longer gets the drug(s) he or she was used to getting from your blood during pregnancy. When the effects of the drug(s) suddenly stop, your baby may develop symptoms called withdrawal.

Not all babies go through withdrawal in the same way. It is not possible to predict which babies will have withdrawal or how long it will last. Your baby may need to stay in the hospital for a few days to several weeks, depending on the treatment he or she needs for withdrawal.

### **When does withdrawal start?**

Withdrawal usually starts within 24 hours to 5 days after birth. Some babies start to have signs of withdrawal much sooner, while others may not have symptoms for a week or longer.

The timing of withdrawal depends on many things, such as:

- which drug(s) you have taken
- how much or how often you used the drugs
- how close you used the drugs to the time of your baby's birth

### **What are the symptoms of withdrawal?**

Each baby will have a different group of symptoms, but there are some common symptoms to watch for.

#### **Common symptoms of withdrawal**

- trembling or shaking, even when sleeping
- a stuffy nose
- diarrhea that causes diaper rash
- feeding poorly – weak suck, spitting up
- very sensitive to light, sounds and touch
- need to be comforted by sucking on a soother
- sweating
- fussiness
- trouble sleeping
- crying a lot
- yawning a lot
- sneezing a lot

### **Where in the hospital will my baby receive care?**

Our goal is to keep mothers and babies together as much as possible.

When your baby is born, we will review the plan for your baby's care, which was made during your visit with the social worker and pediatrician.

### **Mother-Baby ward / Rooming In**

- If the plan for your baby is to stay with you on the postpartum ward and your baby is doing well, you will stay together the mother baby ward.
- You and the nurses will care for your baby and check for symptoms of withdrawal.

### **NICU**

- If your baby is not well right after birth, he or she may need care in the NICU. This is usually for other reasons than withdrawal, such as prematurity, low birth weight or trouble breathing.

If for whatever reason, the health care team is concerned about the well-being of your baby, they may decide to admit your baby to the NICU. The team will always be open, and honest with you about the decision process.

### **How can I help my baby?**

As a parent you have a very special role.

- Your love and care are most important to your baby at this time.
- As you care for your baby, you can closely watch your baby's behavior. If you notice any symptoms, tell your nurse or another member of the health care team. We want to know your concerns and what you have observed.
- You can provide comfort to your baby in many ways. This can reduce your baby's symptoms of withdrawal. Comfort measures are an important part of your baby's care.

### **How do I comfort my baby?**

If you have cared for a newborn before, you will know some ways to calm a baby. However, it may not be easy to settle or soothe your baby because of the effects of withdrawal. You may have to try different comfort measures to find out what helps your baby. Your health care providers will help you with this.

### **How will I know what works?**

Watch your baby's cues and body language!

- Your baby will give signs or cues that let you know what he or she likes, and what makes him or her uncomfortable.
- Learning to read your baby's "body language" will make you feel more confident.

#### 1. Provide a quiet and calm environment.

- Your baby may be very sensitive to light, sounds and touch.
- Try to keep the lights and sounds low.
- Use a gentle touch and speak softly. Your baby will love the smell of your skin and the sound of your soft voice.
- Limit the number of people who visit your baby.

#### 2. Hold and cuddle your baby "skin-to-skin".

- Gently hold and cuddle your baby when he or she is fussy or crying. This soothes your baby and makes him or her feel safe and secure.
- The best way to cuddle is to hold your undressed baby against your chest, or "skin-to-skin". This is also called "Kangaroo care". If this does not calm your baby, try bundling your baby.

#### 3. Bundle your baby

- Wrap your baby firmly in a soft baby blanket. The blanket should be snug, but not too tight. Some babies feel more comfortable when they are fed and put to sleep this way.
- Bundle your baby with his or her hands close to his or her chest or mouth. Your baby may suck on his or her fingers for comfort.
- Do not over-dress your baby or let your baby get too warm when he or she is bundled in the blanket. Your nurse will check your baby's temperature regularly.

#### 4. Breastfeed your baby often

- We encourage all mothers to breastfeed, unless they have HIV (the virus that causes AIDS) or are taking a medication or substance that is unsafe for babies.
- Breastfeeding is healthy and can be very comforting for your baby.
- Your baby's nurse will help you with breastfeeding and give you information and support.



## 5. Soothe your baby

- Hold your baby in an upright position. Rock your baby with a smooth, slow, up-and-down motion.
- Gently rub your baby's back. Do not pat your baby's back as this may be too much stimulation for your baby.
- Offer your baby a soother if he or she is unsettled and sucking a lot between feeds.
- A soother can help your baby settle during care, such as dressing or changing diapers.

### **A summary of comfort measures:**

- ✓ Keep your baby's surroundings quiet and calm. Keep the lights low.
- ✓ Keep visitors to a minimum.
- ✓ Let your baby sleep. Only wake him or her for feedings.
- ✓ Use a soft voice.
- ✓ Care for your baby without "handling" him or her too much.
- ✓ Touch and move your baby gently and slowly.
- ✓ Hold and cuddle your baby skin-to-skin.
- ✓ Bundle your baby when he or she is not skin-to-skin.
- ✓ Do not overdress your baby or add too many blankets.
- ✓ Hold your baby upright. Rock your baby with smooth, slow, up-and-down movements.
- ✓ Gently rub your baby's back, instead of patting it.
- ✓ Let your baby suck on a soother.
- ✓ Hold your baby with his or her arms close to his or her chest.

### **When will my baby need medication for withdrawal?**

Comfort measures help your baby cope with symptoms of withdrawal. However, if your baby's symptoms increase, he or she may also need medication.

To decide if your baby needs medication, we measure your baby's symptoms using the Finnegan Scoring Tool.

Your baby's Finnegan Score helps the health care team decide:

- how your baby is adjusting after birth
- if your baby requires medication to ease the symptoms of withdrawal
- what medication is best for your baby

- how much medication to give your baby
- when medication can be reduced or stopped

Finnegan Score	
0	14+
<b>Scores below 8:</b> <ul style="list-style-type: none"><li>• Your baby has few or no symptoms of withdrawal and may not need any medication.</li><li>• The medication that your baby is taking is working to ease withdrawal.</li></ul>	<b>Scores 8 or higher:</b> <ul style="list-style-type: none"><li>• Your baby has many or worsening symptoms of withdrawal.</li><li>• Your baby may need to start medication or may need to be given more medication to ease withdrawal.</li></ul>

\*\* If for whatever reason, the health care team is concerned about the well-being of your baby, they may decide to admit your baby to the NICU. The team will always be open, and honest with you about the decision process.

#### **How long will my baby need medication for withdrawal?**

If your baby's Finnegan score stays less than 8 for two to three days, the doctor may decide to reduce the amount of medication.

Your baby's medication will be gradually reduced over time. It is not safe to suddenly stop the medication. This process is called weaning.

Your baby will continue weaning as long as he or she is:

- sleeping between feeds
- gaining weight (30g or 1oz a day)
- showing no other symptoms of withdrawal

Weaning may take a few days to several weeks.

#### **Where can I get help, information and support?**

Parenting can be hard as well as exciting. You may feel overwhelmed at times. You are recovering too and it is important to care for yourself. When your baby is asleep, take time to rest. Take short breaks regularly. Let a member of the health care team know that you need a break, so we are aware of your plans.

As a new parent, it can help to have people who you can talk to and who can help you. This may be your partner, a support person, a family member or close friend. Encourage them to help you comfort and care for your baby. Make sure you also take time to relax and enjoy your new baby.

The hospital social worker supports new families going through this experience. She can work with you and your support person(s) to find solutions to issues that arise in the hospital or where you live. The social worker can also help you find resources and services in your community to help you with the care of your baby. There are many services available for new parents.

### **When can my baby go home?**

The length of time your baby needs to stay in the hospital will depend on his or her symptoms of withdrawal as well as how he or she is feeding and gaining weight. If your baby is being treated with medication for withdrawal, this can take several weeks.

You are likely to be discharged home before your baby. However, you can stay in the room with him or her. The Thrive program can help support you during this time as well.

The health care team will involve you in making the plans for your baby to leave the hospital. You can help by sharing your plans for your baby's care at home.

### **What care does my baby need at home?**

Your baby will need the same calm, gentle care that he or she had in the hospital. It is important for your baby to have a regular routine. Try to keep your baby's surroundings quiet and soothing. You may need to limit the number of visitors in your home.

The health care team will make several follow-up appointments for your baby before he or she leaves the hospital. These appointments are important to check your baby's health, growth and development, and to answer any questions that you have.

Your baby needs to visit your family doctor or midwife and may need to be seen by a pediatrician. The dates and times for these appointments will be given to you before you leave the hospital. Your baby will also have a special clinic appointment to check his or her growth and development, about 3 months after he or she goes home.

### **Am I ready to take my baby home?**

#### **In the hospital:**

- ✓ My baby is gaining weight.
- ✓ I respond to my baby's needs and care for my baby in a safe and gentle way.
- ✓ I know the signs that my baby is hungry and can feed him or her safely.
- ✓ I feel a healthy bond with my baby.
- ✓ I know the everyday duties of a parent.

2014

- ✓ I can give my baby's medication or treatment correctly, if needed.

At home

- ✓ I have someone who can help and support me.
- ✓ My baby has a crib and safe place to sleep.
- ✓ My baby will have a smoke-free home and car.
- ✓ I have a safe place in my home to store my baby's medication, if needed.

**Follow up plans:**

- ✓ I will take my baby for check-ups with the doctor or health care provider.
- ✓ I know how to safely travel with my baby. I have a car seat for my baby.
- ✓ I agree to a home visit(s) by a Public Health Nurse.
- ✓ I will share information about my health and my baby's health with the health care team.
- ✓ I know what warning signs to watch for and who to call for help. For example, I know how to get help if my baby gets sick.

**When should I get medical help?**

Call your midwife, family doctor, nurse practitioner, or pediatrician if you notice any of the following warning signs:

- Your baby's temperature is higher than 37.5°C (99.5°F) taken under the armpit.
- Your baby's temperature is lower than 36.5°C (97.7°F) taken under the armpit.
- Your baby's hands and feet feel cold, or look blue or mottled.
- Your baby is feeding poorly or has a weak suck.
- Your baby does not settle down between feeds. He or she cries a lot and cannot be consoled.
- Your baby has had 2 loose, watery stools (bowel movements, poops) in a row.
- Your baby is irritable and is very jittery.