Neonatal Abstinence Syndrome (NAS)

What is NAS?

Some people think that the placenta is a barrier for the mom and baby that protects the baby from unsafe substances. The placenta cannot block some unsafe substances that the mother takes at times like narcotics or opiates. Unsafe substances that can cross the placenta to the baby include alcohol, prescription medications, and “recreation” or street drugs. When the drugs or alcohol continues to consistently cross the placenta, even in small quantities, because of the mother using these substances, then the baby can show signs of addiction even while in utero. Maternal addiction happens in all socioeconomic and diverse populations. If you are addicted to alcohol or narcotics, please discuss with the Social Worker ways to break the addiction.

Once born, Neonatal Abstinence Syndrome or NAS is a group of problems or symptoms a baby can have when they have withdrawal from the alcohol or opiate. NAS signs and symptoms can be seen in the newborn within 24-96 hours of age. Some of the signs do not show until about 2 weeks after birth.

NAS Signs and symptoms

Baby has:

- Poor feeding or weight gain
- Loud and frequent crying
- Wakes from sleep easily and often
- Easily startles, irritable and fussy
- Needs frequent soothing, sucks constantly
- Tremors/shaking or stiff muscle
- Yawns or sneezes frequently
- Diaper rash and blotchy skin on butt knees and face
- Diarrhea or vomiting
- Hard time controlling temperature - skin warm, sweaty, or cool
- Nasal stuffiness

How to care for a baby with NAS

A baby with NAS needs a lot of attention the first weeks. Comforting the baby is very important to help the baby through this difficult time. It can be stress for parents and caregivers during the first weeks because the baby is fussy and cries a lot. Because the baby requires so much
attention and care, most times the baby will remain hospitalized in a neonatal extra care environment.

**Cues from the baby**

The baby will show discomfort by yawning, sneezing, having tremors, frowning, looking away or closing their eyes. If you see these behaviors try changing what you are doing. Work with the healthcare team on understanding how to hold and comfort the baby.

**Comforting methods**

- Hold baby skin-to-skin
- Hold baby on your chest or arm on their side Gently swaddle the baby being careful not to overheat
- Gently rock or sway the baby
- Try letting the baby suck on a pacifier
- Hold the baby in a curled C-position facing away from you. Place your hand on your baby’s chest and sway you baby gently side-to-side facing a blank wall.
- Talk to your baby when he or she is calm and alert.
- As the baby has more calm periods unwrap the blankets and let the baby get used to controlling his or her own body.
- Reswaddle your baby if they show signs of distress unwrapped.

**Neonatal Extra Care Environment**

If your baby shows signs of withdrawal then the health care team has ways to help the baby get through this time.

Your baby:

- May need to be transferred to another hospital that has a higher level of care nursery.
- May need to be put on medications to decrease risk of seizures (convulsions).
- May need to stay longer in the hospital from a week to a few months depending on their condition and recovery.

Recovery time depends on how quickly the baby recovers and this depends on how much the baby was exposed during pregnancy to the alcohol or narcotics. As the mother, you need to be very honest about the type of drug and amount and frequency of what drugs were taken for us to help your baby.

Visiting hours and procedures may vary according to where you baby stays for the extra care in the hospital. If your baby is transferred to another hospital they will share this with you when you come to see the baby.

**Tips for Caring for a Baby with NAS**

- Keep the number of people around the baby at 2 or less.
- Keep the environment quiet and calm.
• Speak or sing softly to the baby.
• Caregivers should stay close to their baby when possible.
• Staying close helps you to respond quickly to your baby’s needs so you can hold your baby close and comfort him/her.
• Gently swaddling with a soft, thin blanket or skin-to-skin comforting is helpful to the baby.
• Gently rock or sway the baby to help comfort them.
• If the baby is very warm, dress them in lighter clothes. If cool wrap them loosely in a blanket.
• Pacifiers are helpful because the baby likes to suck frequently.
• Be sure to discuss breastfeeding with the healthcare team. Depending on the medications you are on will help you and the team make the decision whether to breast or formula feed.
• Be careful not to overfeed the baby. Do not wake the baby unless it is feeding time. Burp the baby frequently during feeding times. Some babies with NAS require special formulas for feeding. The healthcare team will discuss this with you if this is the case.
• NEVER SHAKE the BABY as this causes brain damage.

When is my baby ready to go home?

There will be certain requirements the baby will have to meet to go home.

The baby:

• Will be able to sleep without being held.
• No longer need medications for withdrawal.
• Is gaining weight and feeding without difficulty.
• Is able to maintain a stable heart and breathing rate.
• Temperatures are stable.
• You have shown you can care for the baby.

Baby Safety

Baby’s should sleep on their back.

Belly time is only when the baby is being observed.

Baby’s should not sleep in the bed with caregivers and parents, only in a crib, in the parents room if possible.

If caregivers or parents feel frustrated or angry then put the baby down in a safe place and walk away. Take a break and call someone for help if needed.