



ST. JOSEPH'S  
GENERAL HOSPITAL  
ELLIOT LAKE

Neonatal Abstinence Syndrome

# A Guide for Mothers and Caregivers



# What is this book about?

During pregnancy, your baby was exposed to drugs that can cause withdrawal problems. This book will help you learn what to watch for and how to comfort your baby.

We understand that each person takes medication or other substances for different reasons. We are here to support and care for you and your baby.

It is important to be open and honest with us and give us an accurate history of substances you took during pregnancy so we can properly take care of your baby's medical needs. There are many names for the types of drugs we refer to in this book. Some other terms used are:

- narcotics
- illicit drugs
- street drugs

These include drugs such as:

- cocaine
- marijuana
- heroin

It also includes narcotics that are obtained illegally or are legally prescribed by a health care professional such as:

- methadone,
- morphine,
- oxycodone,
- hydromorphone,
- dilaudid,
- fentanyl,
- tylenol #1, 2, 3
- percocet.

Alcohol, cigarettes and some herbal remedies are also substances that can cause health problems for your baby.

### **In this book:**

The word 'drug' is used when referring to these types of medications or substances.



# What is Withdrawal?

Some drugs may cause a problem called withdrawal for your baby. When you took this type of drug during pregnancy your baby also got this drug in your belly. When your baby was born, he or she stopped getting this drug all of a sudden. We watch to see how each baby reacts to no longer having the drug in his or her body.

Your baby is watched for any signs of withdrawal. The type of care your baby needs is decided by the signs of withdrawal. Since each baby's care is different, try not to compare your baby's care with other babies.

## **What are the signs of withdrawal in a baby?**

These are different for each baby and may include:

- irritability that causes lack of sleep or problems feeding
- stuffy nose and sneezing
- vomiting after some feeds
- loose stools
- weight loss or slow weight gain poor feeding
- trembling or tremors – even when sleeping
- seizures or hypersensitivity to touch
- sucking a lot on a soother
- increased crying or irritability at times

## When does withdrawal start?



Every baby is different. Withdrawal may start in the first few hours after birth. Some babies start to show signs of withdrawal sooner while others may not show symptoms for a few days or longer.

You and your baby are cared for on the Obstetrics Unit and will be watched for signs of withdrawal. Special scoring will be done to measure the amount of withdrawal.

We watch your baby closely for signs of any withdrawal and use a scoring tool to track these signs. Members of your health care team will go over the scoring tool with you. You can ask questions any time.

The length of withdrawal is also different for each baby. Withdrawal may last anywhere from 1 to 8 weeks or even longer.

## **What we do to help your baby**

There are many things your health care team can do to help your baby. Each member of your team explains what they are doing and why. Feel free to ask questions and learn how to help.

This section reviews what your baby's health care team can do to help. There are medicinal and non-medicinal treatments to help your baby. The next section reviews what you can do to help.

The scoring tool is used each time your baby is assessed. Learn about the scoring system to work with your nurse to accurately score your baby's withdrawal symptoms.

Based on the amount of withdrawal and the decision of the team, your baby may have to be transferred to a larger centre for continued observation, treatment and care. The doctor or pediatrician may also decide that medication is needed and will talk to you about this.

If your baby is getting medication for withdrawal, we will slowly reduce the amount of medication. This is called weaning. This is based on the scoring of withdrawal. Every few days your baby will be assessed by the doctor to see if he or she is ready to wean. For your baby's safety, weaning is a slow process. It is important to be patient. We know that this may

be overwhelming and frustrating, but we will help you during this time.

If your baby's scores are below 8 on the scoring tool, we provide and teach you how to provide comfort measures to ease the withdrawal.

What can you do  
as a parent or  
caregiver?



## Comfort Measures

There are many ways to comfort and soothe your baby during this time. When your baby can relax, he or she burns less calories and this helps your baby grow. Members of your baby's health care team can help you. When you have ideas, please share them with us. We welcome them.

The next few pages show some safe and soothing ways to be with your baby and hold your baby. If your baby seems to like something, continue to do it. If your baby does not seem to like something, stop and try again at another time.

## **Speak softly and allow baby to sleep**

A baby in withdrawal can be very sensitive to light, touch and sound.

- Speak softly around your baby and encourage your baby's visitors to speak softly as well.
- Do not wake your baby when he or she is sleeping. Sleeping is good for your baby's brain to rest.

## **Being with your baby**

- Hold your baby when he or she is fussy. Your baby will be comforted by the sound of your voice and the smell of your skin.
- Cuddling your baby can help your baby feel in control of his or her movements. It also helps your baby feel loved and secure.
- If swaddling does not calm your baby you can try skin-to-skin care. Ask for help any time you are finding holding, cuddling or skin-to-skin a challenge.





## Skin-to-Skin Care



This is a great way to love and comfort your baby. You hold your baby against your bare skin, relax and enjoy time together. To do skin-to-skin care, follow these steps:

- Wear a loose shirt that buttons up the front. Take off all of your baby's clothes only leaving the diaper on.
- Place your baby on your bare chest against your skin.
- Put one hand on your baby's back and use your other hand to support the head. Your shirt should be supporting the baby's bottom.
- Snuggle your baby in an upright position with his or her face turned to the side. Place a blanket over both of you for privacy.



- When you first start skin-to-skin care, your baby may or may not like actions such as stroking, talking, singing or rocking.
- Sit together quietly and give your baby time to relax and enjoy the feeling of being with you.
- As your baby gets used to being close, you can add one new movement at a time. Try stroking your baby's back slowly and gently. If your baby seems to like it continue. If not, stop and try again at another time.

## **Swaddling**

At first, your baby will only be able to do one thing at a time. He or she will not be able to control his or her body, breathe and suck at the same time.

You can help by wrapping your baby snugly to control his or her movements. Your baby will then be able to focus on feeding or sleeping.

### **Follow these steps:**

1. Put the blanket down in a diamond shape.
2. Fold the top corner down.
3. Place your baby on the blanket with the turned down corner at the level of your baby's ears.

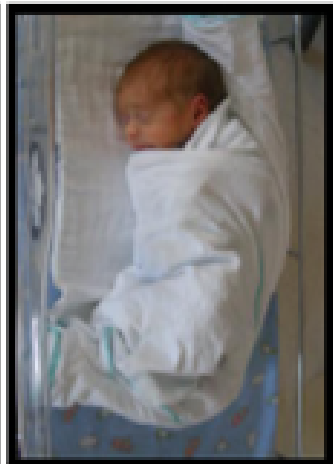


4. Gently bend your baby's arms close to his or her body so that the hands are near the mouth.

5. Tuck one side of the blanket snugly around your baby.



6. Turn up the bottom corner.
7. Tuck the last side around your baby.



## **Holding and Moving Positions**

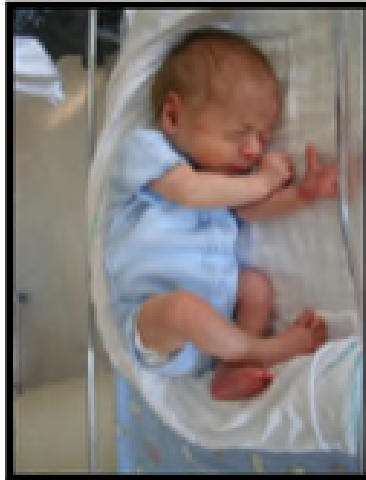
**Make sure you understand how to hold and move your baby with the nurse first before you do this on your own.**

### **C-Position**

The C-position helps your baby relax and have a sense of control.

### **Laying baby down in a C-position:**

1. Put your baby on one side.
2. Wrap a blanket into a roll.
3. Ring the rolled blanket around your baby's body to make sure your baby stays in this position.



## Holding upright in the C-position

1. Hold your baby securely and curl the head and legs into a letter C.
2. Your baby's chin should be resting near his or her chest with arms in the middle.
3. Your baby's back is slightly rounded and the legs are bent in an upright position.



## Head to Toe Movement

Your baby may relax and settle with slow, rhythmic movements. To do this:

1. Swaddle your baby.
2. Hold your baby in a C-position.
3. Begin to slowly and gently move your baby up and down.
4. Follow a line from your head to toe.
5. Keep your movements slow and rhythmic.



Avoid back and forth rocking and bouncing your baby. These motions are jarring and provide too much stimulation.

## **Clapping Baby's Bottom**

This may help calm your baby:

1. Make sure your baby is wearing a clean diaper.
2. You can swaddle your baby in a blanket if you want.
3. Cup your hand, then gently and slowly clap or pat your baby's bottom.

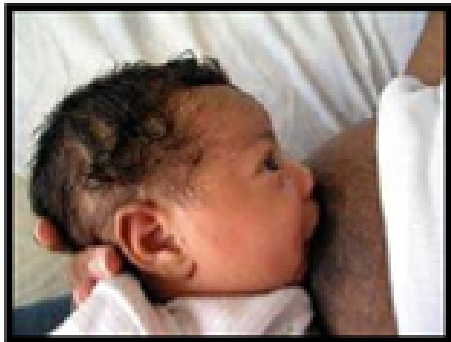
You may be able to feel your baby's muscles relax.



## **Feeding your Baby**

All mothers are encouraged to breastfeed and we will provide you with help and support to do this.

Breastfeeding may also help with your baby's withdrawal symptoms. Only very small amounts of most drugs are passed to the baby through breast milk. The benefits of breastfeeding are so great that they usually outweigh worries about continued drug use.



Breastfeeding can comfort your baby. You will be encouraged to breastfeed and bond with your baby. It is important to feed your baby or empty your breasts by pumping often in the first few days to help build a milk supply large enough to feed your baby.



Every baby is different in how he or she behaves when withdrawing.

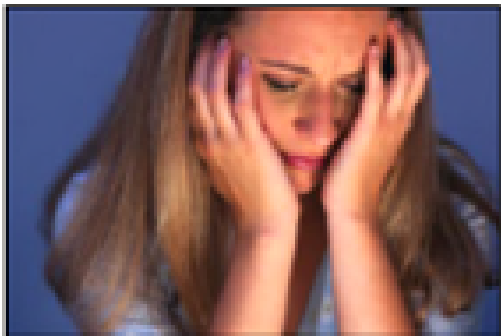
- Begin feeding by holding your baby in a position he or she enjoys.
- When your baby is relaxed, he or she can learn to suck better.
- Try to feed your baby in a low stimulus environment with no bright lights, music, noise or other distractions.

Some babies suck frantically all the time. This may make it hard for your baby to feed well. Talk to your nurse about ways to help your baby get a bigger drink while feeding.

### **What can you do if you are feeling overwhelmed?**

This can be a hard time for parents who are separated from the baby for any reason. Sometimes a baby in withdrawal can be fussy and hard to cuddle.

We know it can feel stressful for you.



Every baby is different, and your baby may need different things at different times. Learning your baby's special body language and signals will make you feel more confident.

It is alright to ask your baby's nurse to take over. Remember to take breaks, go for a walk or rest. If you are feeling stressed, it may be helpful for you to talk to a support person.

## At Home

When your baby is ready to go home, the withdrawal symptoms will be stable. You are given the time to care for your baby on your own to make sure you and your baby are confident and comfortable.

When you are home, continue to do gentle touch with your baby. Limit the number of caregivers and offer a calm surrounding. Loud noise and bright lights increase your baby's stress.

An environment that is comfortable for a baby is also created by the soothing and calm presence of the caregiver. Routine is very important. Your baby will respond more positively when caregivers use soft voices and speak and move slowly.



Here are some ways to help offer a calm environment:

- Turn the TV, stereo or radio down or off.
- Ask people to talk quietly.
- Limit the number of caregivers around your baby.
- Decrease lighting overhead – back lighting from a floor lamp is preferred.



Your baby's sleep environment is very important for the health and wellbeing of your baby, both in hospital and once you go home. Providing a safe sleep environment is one of the best ways to decrease the risk of Sudden Infant Death Syndrome – or SIDS.

- Newborns should be placed on their backs to sleep on a firm mattress appropriate for a baby. Remember – **Back To Sleep.**
- There should be no loose blankets, toys or loose objects in your baby's bed. **Avoid any blankets that could end up covering the face.** A sleep sack is safest.

- Do not place your baby on pillows or cushions to sleep.
- Do not sleep with your baby in your bed or while holding your baby.
- Do not smoke around your baby. If you smoke, wash your hands and change your clothes after you smoke and before you hold your baby to reduce exposure to harmful secondhand smoke.
- Do not use drugs or alcohol while caring for your baby as you may be more likely to fall asleep with the baby in your arms or roll onto the baby.
- Breastfeed your baby.

Occasionally for health reasons or to comfort your baby, your nurse may recommend an alternate sleeping position. Your baby's safety will be closely monitored if this occurs.

Baby's experiencing withdrawal are often fussy when they are not swaddled in a blanket.

Discuss this with your nurse and together you can explore safe options for keeping your baby calm.

If your baby must be swaddled, do it in a way that prevents the blanket from possibly covering the face. Keep your baby's hands near his or her face so that you can watch for feeding cues like rooting and sucking on the hands.

# Follow Up



Your baby needs to visit your family doctor or midwife and may need to be seen by a pediatrician. These appointments are important to check your baby's health, growth and development. It is also an opportunity for you to ask any questions you may have.

Your family doctor or primary health care provider also arranges to see you and your baby for regular baby visits and immunizations.

The Public Health Nurse will provide information and come for home visits to help support the care of your baby.

You can help by:

- Taking your baby for check-ups with the doctor or midwife.
- Agreeing to a home visit(s) by a Public Health Nurse.
- Sharing information about your health and the health of your baby.
- Knowing what warning signs to watch for and who to call for help.



References:

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St. Joseph's General Hospital Elliot Lake  
IS0483 March 2022

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**Developed in partnership with**  
**St. Joseph's General Hospital Elliot Lake**  
**Patient and Family Advisors**

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