

Let's Talk About...

Newborn Withdrawal

Newborn withdrawal refers to the symptoms that are sometimes seen in a newborn baby whose mother has taken certain drugs or medicines during pregnancy. This fact sheet can help you know the symptoms and how to care for a newborn in withdrawal.



What is newborn withdrawal?

Newborn withdrawal [with-draw-uhl] can happen after a baby has been exposed to certain substances while in the mother's body.

The most common substances linked to newborn withdrawal are:

- **Alcohol, tobacco, and street drugs, such as:**

- Heroin
- Meth
- Opium
- Ecstasy
- Cocaine (crack)
- Marijuana

- **Prescriptions, such as:**

- **Opioid pain medicines** (codeine, morphine, methadone, Vicodin, Percocet, OxyContin, Demerol, Suboxone)
- **ADD/ADHD medicines** (Adderall, Ritalin, Concerta)
- **Depression and anxiety medicines** (Valium, Xanax, Klonopin, Ativan, Celexa, Lexapro, Prozac, Paxil, Zoloft)

Not every baby born to a mother who has taken one of these substances in pregnancy will go through withdrawal. Experts aren't sure why. For this reason, parents and caregivers of newborns should be aware of the possibility of symptoms and what they can do to address them.

What to do now:

- 1 **Learn what your baby needs.** Read this handout to learn ways to help.
- 2 **Learn to understand your baby's behavior.** Each baby is different. You can help your baby by paying attention to their specific symptoms. This will allow you to provide sensitive care according to your baby's special needs.
- 3 **Learn how to soothe your baby.** Depending on the symptoms your baby has, there are things you can do to help. Read the list on [page 4](#) of this handout.

Know when to call for help:

If your baby shows any of these serious symptoms, call your baby's doctor right away.

- **Crying for more than 3 hours**
- **Breathing faster than 60 times per minute**
- **Temporary pauses in breathing**
- **Intense jerking motions in the arms or legs**
- **Vomiting or diarrhea**
- **Less than 1 dirty diaper in a 24 hour period**

If I feel frustrated, overwhelmed, or angry,

I can call: _____

See [pages 2 to 3](#) to understand the treatments and symptoms for newborn withdrawal and how to better care for your baby.

How is newborn withdrawal treated?

The treatment for a newborn in withdrawal depends on the symptoms and their cause. Your baby's care may include the following:

- **Extra monitoring.** Your baby will be checked often in the hospital. Depending on the symptoms the care team sees, your baby may need tests and a longer stay in the hospital.
- **Medicine.** Some babies need medicine to manage symptoms or to help their bodies adjust to life without the substance they were exposed to in pregnancy.
- **Sensitive care.** A baby in withdrawal needs care designed to ease symptoms and help them to rest, feed, and develop. You can provide this care. Read on to find out how.

Basics of sensitive baby care

Keep in mind that a big part of sensitive care is learning your baby's signs for comfort. These signs can include things like crying, smiling, arching the back, staring, and turning the head. Use the Notes section on the back page of this handout to write down what you're learning from your baby.

In the hospital and at home, give your baby the following:



- **Closeness**
 - Spend as much time as possible with your newborn. Your touch and your voice are familiar and reassuring.
 - Sleep in the same room with your baby, **but not in the same bed.** Respond if your baby seems cold, wet, or hungry. Always put your baby to sleep on their back, on a firm mattress. Keep the room at a temperature that's comfortable for you. That's the right temperature for your baby.
 - Hold your baby skin-to-skin during breastfeeding or any time. This closeness comforts your baby and may ease some symptoms of withdrawal. It's also a wonderful and gentle way to get to know each other.
- **Quiet and calm**
 - Keep things quiet. Voices, music, and phones should be soothing and kept at a low volume.
 - Avoid too much of anything: bright lights, heat and cold, lots of toys or games. A baby in withdrawal needs rest, not excitement.
 - Limit visitors. Your baby will do better with fewer people and less stimulation.
 - Stick to the same schedule each day. Your baby will feel reassured by a predictable routine of feedings, naps, and cuddles.
- **Your attention**
 - Notice your baby's behaviors and symptoms. Your baby isn't able to talk, but will communicate with you through other signals. What is your baby saying? Write down what you see. Over time, the patterns will tell you which behaviors signal your baby's likes or needs.
 - Be responsive. As you learn your baby's ways of communicating, you're also finding your way of responding to what your baby is saying to you.
 - Be patient with your baby and with yourself. The newborn period can be intense, and withdrawal can pose an extra challenge. Reach out for support as you and your baby move through this process together.
- **Comfort positions and pressures**
 - Try different ways of holding your baby. A baby may feel more comfortable held over your shoulder, curled in a C-shape, or with their side or tummy along your thighs as you sit.
 - Experiment with massage and touch. Many babies are soothed by firm, rhythmic strokes and pats. Try patting your baby's back and bottom as you walk, sway, or rock. (Avoid light, feathery touch, which irritates many babies.)

What are the symptoms?

Withdrawal symptoms usually appear 1 to 7 days after birth, can be mild or severe, and usually go away by the time a baby is 6 months old.

Your baby may have some or all of these symptoms:

- **Lots of crying.** Compared to other newborns, your baby is more cranky and fussy. Your baby cries often, and the cry is high-pitched. It may be difficult to soothe, calm, and comfort your baby.
- **Trouble with sleeping.** Your baby sleeps less than other newborns. In general, your baby has trouble settling down for sleep and may sleep only for short stretches of time. Your baby yawns a lot.
- **Unusual stiffness, startling.** Your baby's arms, legs, and back are unusually stiff or rigid. Your baby startles easily and intensely.
- **Shaking or twitching.** Your baby trembles or twitches, or seems jittery or shaky overall.
- **Trouble feeding, sucking.** Your baby's suck may be weak, frantic, or both. This makes it hard for your baby to get enough milk at feeding times. Your baby may have a constant need to suck.
- **Diarrhea and vomiting.**
- **Poor weight gain.** After the first week of life, your baby gains weight slowly or not at all.
- **Fast or interrupted breathing.** Your baby breathes fast or has temporary pauses in breathing.
- **Skin problems.** Your baby's skin looks raw in places. Many times the face and the diaper area are affected.
- **Sneezing, stuffy nose.**
- **Sweating.**

Soothing tips for specific symptoms

Along with learning your baby's basic sensitive signs for comfort, try these ideas:

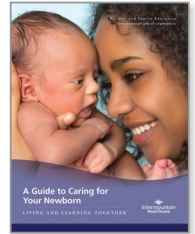
<i>What you may see</i>	<i>Things you can try</i>
Fussiness and crying. Your baby seems upset , is having trouble settling down, or has been crying for a long time .	<input type="checkbox"/> Hold your baby skin-to-skin or wrapped up close to your body. If the hospital nurses have shown you how to swaddle your baby, try that. <input type="checkbox"/> Gently sway from side to side. Rock in a rocking chair. Hum or sing quietly as you move. <input type="checkbox"/> Make a "shhhhh" sound. This sound comforts many babies. <input type="checkbox"/> Dim the lights and take away any extra noise or stimulation in the room.
Sleep problems. Your baby can't get to sleep , or can't stay asleep for very long.	<input type="checkbox"/> Try the soothing moves listed above: close holding, swaying or rocking, or "shhhh"-ing in a quiet room. <input type="checkbox"/> Check whether your baby's diaper needs changing. Treat rashes with cream or lotion.
Feeding and sucking problems. Your baby has a weak suck or feeds poorly . Your baby has a strong need to suck . Your baby spits up a lot.	<input type="checkbox"/> Feed whenever your baby seems hungry and until your baby seems satisfied. <input type="checkbox"/> Feed your baby slowly. Allow your baby to rest during feedings. <input type="checkbox"/> If your baby sucks on their fists a lot or seems to have a strong need to suck (and isn't hungry), offer a pacifier or your finger. Protect your baby's hands by covering them with sleeves. <input type="checkbox"/> For spitting up, keep your baby upright for a bit after feeding. Gently burp your baby.
Stuffy nose, sneezing, or breathing trouble.	<input type="checkbox"/> Keep your baby's nose and mouth clear by wiping with a wet cloth or using a bulb syringe. <input type="checkbox"/> Don't overdress or swaddle your baby too tightly. <input type="checkbox"/> Always put your baby to sleep on their back. Get medical care right away if your baby is breathing faster than 60 times per minute, or if you notice temporary pauses in your baby's breathing.

Common questions

- **Can I breastfeed my baby?** Breast milk is almost always the best choice for a newborn. Even if you're taking prescribed medicine, the small amount of medicine that passes to your baby in your milk is usually considered safe. However, you should talk to your doctor about breastfeeding and your prescription medicine. **Don't take any other, nonprescribed medicine or drugs without first checking with a doctor to make sure it's okay for your baby.** You can also call the MotherToBaby phone line for free advice about breastfeeding safety: 1-800-822-BABY (2229). No one will take your name.
- **Is it okay to play with my baby?** Gentle, loving interaction is always okay. But as long as your baby is having symptoms or seems upset, start slow and stick with things like humming, holding, smiling, swaying. When your baby is alert and peaceful, try dancing together to a little soft music. Show your baby a toy. Help your baby experience and explore new touches, smells, and sounds. If you pay attention to your baby's signals, you'll find a good pace for playing and learning together.
- **Does my baby need to keep seeing the doctor?** Yes. Every baby needs to see the doctor regularly. The doctor needs to check that your baby is growing and developing well. **Keep all of your appointments with the baby's doctor, and call with any questions.** For tips on when to call your baby's doctor, follow the advice in Intermountain's ***Living and Learning Together: Ready Reference***.
- **When will my baby stop having symptoms?** This can be hard to predict. Usually, symptoms lessen after a few weeks and go away by the time the baby is 6 months old.



- **What if I can't handle caring for my baby?** Caring for a newborn can be emotional and stressful. Don't try to do it alone. Ask a friend or relative to be your "go to" person anytime you need a break from your baby. See a counselor or support group. Being kind to yourself helps you better care for your baby.
- **Where can I learn more?** You can find more tips and information about how to care for your baby in Intermountain's booklet ***Living and Learning Together: A Guide to Caring for your Newborn***.



Notes

SIGNS that my baby is *Calm*:

SIGNS that my baby is *Upset*:

SIGNS that my baby is *Hungry*:

OTHER THINGS I notice about my baby:

TO COMFORT MY BABY, I can:

FRIEND / FAMILY Name: _____

Phone: _____

MY BABY'S DOCTOR'S Name: _____

Phone: _____