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## Neonatal Abstinence Syndrome (NAS) Guide

- Neonatal Abstinence Syndrome (NAS) is similar to medicine or drug withdrawal in adults. It happens when the baby is born and suddenly cut off from the medicines or drugs in the mother's body. Within 1 to 5 days, the baby may start to show signs of NAS. It's hard to know which babies will have NAS. All mothers who take drugs or medications during pregnancy, even prescribed medications or drugs such as nicotine, should be prepared to care for a baby with signs of NAS. It's important to remember that a lower dose of methadone or buprenorphine does not mean a lower chance of NAS. The chance a baby will show symptoms of withdrawal has more to do with genetics, metabolism, and whether other substances, such as nicotine, were also used. The good news is that NAS is temporary. Most babies with NAS recover in a matter of weeks or months and, with the right care and support, grow into happy, healthy children!
- It is important to tell your nurse and your baby's doctors about all of the drugs and medications you took during pregnancy. This will help them treat your baby. Also, ask them how you can participate in the treatment of your baby. There is strong research and evidence that human touch (holding your baby against your skin and breastfeeding) is the most important treatment for NAS. Any medications that the doctors or nurses may use to treat your baby are *in addition* to loving care. Human touch is the most important medicine for NAS.
- If it is possible for you to be present throughout your baby's stay in the hospital, you should be there. Your doctors, nurses, and treatment providers can help you work things out so that you can spend as much time as possible with your new baby. Also make sure your nurses know if you want to keep your baby's condition private around your family or other visitors. Your baby's health information has to be kept private, if you say so.

- If your baby stays in the hospital longer than you do, find out about the Visitation Policies of the Hospital, and how they accommodate parents who want to sleep in the hospital while their baby is there (Room-In). Sometimes hospitals have cots or spare rooms where you can stay. Some hospitals offer food to mothers who are staying with their children; other hospitals ask you to bring your own food. If you aren't able to stay in the hospital overnight, ask about Ronald McDonald houses or other housing options nearby so that you don't have to commute to visit your baby every day. Transportation services might also be available to help get you to and from the hospital.
- Ask the nurses about the daily routine for your baby's care. Find out: when the nurses change shifts; when feedings happen; when and how they will measure your baby's symptoms; the hours that visitors are allowed; etc.
- Ask about breastfeeding, and how the hospital helps women breastfeed, whether you are able to breastfeed your baby right away, or whether you want to pump so that you can feed your baby when you're both ready.
- Ask about how the nurses will measure any withdrawal symptoms your baby shows. This is often called "Scoring" and it should happen when the baby is calm, usually right after a feeding. Ask the nurse to show you how it's done, and let them know if you want to be a part of the scoring process. Sometimes hospitals will ask the parent[s] to help with the scoring, which is smart, because you are the expert on your baby, and you will notice things that the nurses might miss. Make sure you tell all of the nurses and have it written into your chart if you'd like to be involved in this process. It can be a really nice way for you to begin to connect with and care for your new baby.









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- Ask the nurses what Treatment usually looks like for babies that are showing signs of NAS. This sometimes involves medicine, but there are many things you can do to help your baby feel better without medication. Things like Skin-to-Skin Contact, soft sound and lighting, breastfeeding, and swaddling can help a baby recover quickly from NAS. Make sure you understand, though, that many babies are hard to soothe and cry a lot. In fact, crying is an important way that babies with NAS get better. Remember that if your baby is crying, it doesn't mean that you're doing anything wrong. Often the nurses won't be able to quiet your baby either, unless they give medication. It's okay for your baby to cry. That's the natural thing for them to do. And if you are able to sit with your baby while they cry, that is a tremendous gift that will help their recovery in the long run.
- Ask the nurses if there are any voluntary research studies going on at the hospital. Sometimes there are things to get involved in, but it's important to remember that you have the choice to participate or not. It might be a way to access a kind of treatment that you think will be good for you and your baby, but, if not, just say 'no thanks'!

## Resources:





