Help Calm Your Baby

Your baby may be experiencing

Neonatal Abstinence Syndrome (NAS)

and may require special soothing strategies.

Here's how to help.

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Baby's Behavior	What you can do to help
Prolonged and/or	Hold your baby close to your body, skin to skin.
high-pitched crying	• Gently swaddle your baby, try a pacifier. Be cautious of swaddling in hot weather.
anga passasa sayang	Decrease loud noises, bright lights and any excessive handling.
	 Hold your baby on your chest, or on your arm laying baby on its side, because it is very stimulating for a baby to look into someone's eyes.
	Keep your baby near, but in his or her own crib to sleep.
Difficulty Sleeping*	Reduce noise, bright lights, and patting or touching your baby too much.
	Soft, gentle music and rocking may help.
	 Keep your baby's diaper area clean and dry. Watch for redness or diaper rash. If the redness or diaper rash don't get better, call the pediatrician.
	• Feed your baby when he is hungry. Your baby may want small amounts often.
	*Every baby is differentCall your pediatrician with concerns about sleep difficulties and de- scribe how the baby is sleeping or lack of sleep to get advice on whether it's concerning for your baby.
Sneezing, yawning,	These behaviors can be your baby's way of saying "I'm upset".
shaking, frowning,	• If you see these cues, stop what you are doing and these calming behaviors.
looking away,	• Call the pediatrician if the shaking doesn't stop with the calming efforts above or if the
closing eyes, or	shaking gets worse or increases in frequency.
hiccupping	
Difficult or poor	 Feed your baby when hungry and until content in a calm and quiet area.
feeding	 Limit visitors so that your baby is not overstimulated by too many people.
	 Feed your baby slowly and allow baby to rest a little during and after the feedings.
	 Help your baby feed by supporting his or her cheeks and lower jaw if needed.
	• Try "tickling" or gently stroking baby's cheek to get baby to feed.
	• If the baby refuses feedings, call the pediatrician, as this can lead to dehydration.
Sneezing, stuffy nose	Keep your baby's nose and mouth clean.
or breathing trou- bles	 Dress baby appropriately for the season and room temperature, don't over-dress your baby as it can cause baby to overheat and have difficulty breathing.
	 Try holding your baby upright with its bottom on your lap, and support its chest with your hand.
	Call the pediatrician if the baby has continued difficulty breathing, is breathing faster
Spitting up or	Support your baby's cheeks and lower jaw to help sucking and swallowing.
vomiting	Burp your baby each time he or she stops sucking and after each feeding.
-	 Keep your baby clean, and keep bedding free of vomit. The smell may make your baby uncomfortable, and soiled bedding may make your baby's skin sore.
	 If the baby is vomiting often and vomits a large amount or most of the feedings, call the pediatrician. Babies can become dehydrated quickly.
Easily upset or	Keep things quiet for your baby. Try not to wake your sleeping baby.
bothered	• Excessive touching may be overstimulating. Try swaddling or using a baby swing.

Soothing Skills and Tips



Feeding

Breastfeeding, even while on methodone, Suboxone, or Subutex, is recommended and it helps improve bonding and infant immunity.

However, breastfeeding is <u>not safe</u> if you are using marijuana.

illegal drugs, certain prescription medications, drinking alcohol or are HIV positive. Talk to your doctor before you decide to breastfeed if you are on medications to make sure they are safe for baby while breastfeeding.

Feed frequent, small amounts of breast milk or formula.

Your baby may be gassy and may spit up a lot.

Don't get discouraged if your baby won't eat much at one time. Your baby may need to rest a bit and try again. Try feeding in a guiet, calm environment–this may help.

Read Your Baby's Cues

Try not to let your baby reach a frantic crying state. Watch for early signs (sneezing, hiccupping or yawning more than normal, shivering, seeming jumpy, frowning, crying, changes in skin color) and try to soothe early.

If baby seems overstimulated, turn baby so it is facing away from you to help calm him or her down.

Skin-to-skin contact is encouraged, and can be done by mom, dad, or another caregiver. Baby should be wearing just a diaper in a warm room and cuddled to the caretaker's bare chest. At least one hour of skin-to-skin contact daily is best. It is important that the caretaker remain awake during this time.

Provide a calm environment so your baby can get the most rest. Remember: dim lighting, quiet voices, slow and gentle handling.

Do one thing at a time with your baby. Doing lots of things at the same time like talking, making eye contact, and feeding can be too much stress for your baby.

Learn how to do infant massage. Many babies with NAS respond very well to it and it's a soothing experience for both caretaker and infant. Many Early Intervention programs can teach you this skill for FREE! Call MA DPH at 617–624–6060 to locate an Early Intervention provider in your area.

Remember to take care of yourself-eat, drink lots of water, rest when you can and reach out to supports when needed.

Make sure <u>not</u> to fall asleep with the baby in bed or on the couch, as your baby can become trapped between pillows or the cushions/mattress and can stop breathing.

Even when your baby is still in the hospital, spend as much time with her as possible. This is very important for establishing breastfeeding, bonding, and so you can get to know your baby.

Safe Sleep

Always put baby on his or her back to sleep. No toys, blankets, bumpers or pillows in the crib. Keep baby near, but in his or her own crib to sleep. Never smoke around your baby.