



Treating Babies Who Were Exposed to Opioids Before Birth

Support for a new beginning

Introduction



Many pregnant women with an opioid use disorder (OUD) worry about harmful effects of opioids to the fetus. Neonatal abstinence syndrome (NAS) is a group of withdrawal signs that may occur in a newborn who has been exposed to opioids and other substances. NAS signs may include high-pitched and excessive crying, seizures, feeding difficulties, and poor sleeping. **NAS is a treatable condition.**

The actions you take or don't take play a vital role in your baby's well-being. Below are some important things to know about what to expect if your baby needs special care after birth, as well as the Do's and Don'ts for understanding and responding to your baby's needs.

Things to know

- A baby born to a mother who used opioids or took OUD medicine during pregnancy is typically observed in the hospital by a medical provider for 4-7 days for any physical signs of NAS. A care plan is created for your baby right away if signs of NAS are noted.
- Some babies with NAS may need medicines such as liquid oral morphine or liquid oral methadone in addition to non-medicine care supports.
- Other parts of treatment in hospitals include rooming-in and putting the baby's crib near your bed. You can also give this type of care to your baby through skin-to-skin contact, gentle handling, swaddling, using pacifiers, breastfeeding, and spending quiet time together.
- Your baby will be able to leave the hospital when he/she is successfully feeding and has been monitored for at least 24 hours after no longer needing medicine (if it is used). Some hospitals may also provide medicine for your baby in an outpatient clinic after he/she has been discharged from the hospital.
- Breastfeeding has many benefits for your baby. Breastfeeding can decrease signs of NAS and reduce your baby's need for medicine and hospitalization. Sometimes, breastfeeding is not recommended, so talk with your healthcare professionals to find out what's right for you and your baby.

Medicine Dose and NAS

If you are taking medicine for your OUD, reducing your dose will NOT help your unborn baby, but it might put your baby at risk. Changing or reducing your OUD medicine while pregnant is not a good idea because it can increase your risk for a return to substance use and might increase the chances of having your baby too early or having a miscarriage. The goal for your OUD medicine dose is to minimize withdrawal and to reduce the chances of going back to substance use.



Do

Do gain the skills and knowledge to understand and respond to your baby's needs. Your baby may need extra contact and cuddling to reduce NAS signs.

Do continue breastfeeding as long as possible when recommended.

Do ask for support so you feel prepared and comfortable with breastfeeding.

Don't

Don't change your medicine or dose of medicine without talking to your healthcare professionals.

Don't be afraid to mention any cravings or urges to use opioids to your healthcare professionals and seek the help you need.

What to expect when you meet with healthcare professionals about OUD treatment after birth



Before you leave the hospital, your healthcare professionals should describe the signs of NAS and provide you with contact information of someone who can help you if you have concerns. They will make sure that you know how to soothe your baby (for example, dimming lights, softly playing white noise, skin-to-skin contact, using a pacifier, and swaddling). They will also explain that the safest sleeping and napping position for a baby is on the back and will show you how to place your baby in the [Safe to Sleep](http://bit.ly/NIHSafeSleep) position (<http://bit.ly/NIHSafeSleep>). This position, and having babies sleep in their own space with nothing in the sleep area, reduces the risk of sudden infant death syndrome. You should also expect to have follow-up plans that include home visits and early pediatric follow-up visits (within 5 days of leaving the hospital).



Remember: Before leaving the hospital, make sure you **receive information** on caring for your baby if there are special needs as well as names and contact information of others who can give you additional support.

Do you have questions for your healthcare professionals? If so, write them down and take them to your next visit.

Next Appointment Date: _____ Time: _____ Location: _____



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