

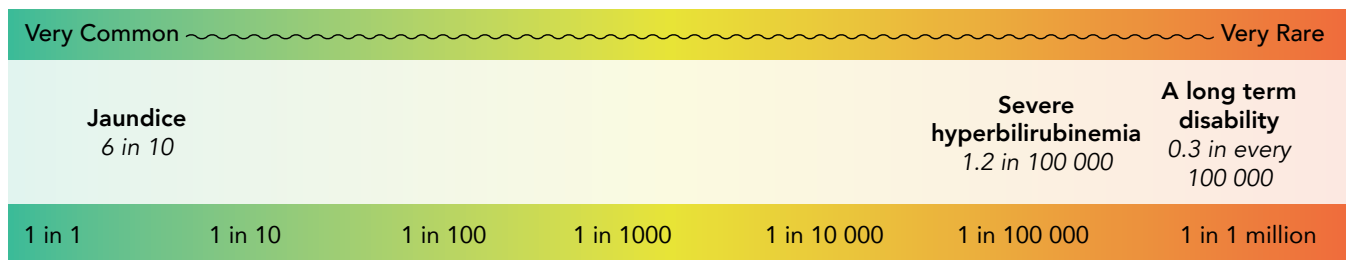
What is phototherapy and why does my baby need it?

Your baby needs phototherapy or “light therapy” to treat their jaundice because their bilirubin levels are getting too high. Phototherapy helps to stop jaundice from getting worse and bring bilirubin levels down. High levels of bilirubin in your baby’s blood can lead to something called severe hyperbilirubinemia. The medical term for jaundice is hyperbilirubinemia.

The good news is that when babies receive regular care from their midwives, severe hyperbilirubinemia is usually found and treated early.

Almost all babies with high bilirubin levels who get phototherapy develop no complications; they grow into healthy children and adults.

Your baby’s likelihood of developing:



How does phototherapy work?

Phototherapy uses strong blue or white lights that are directed onto your baby’s body. This light is absorbed by your baby’s skin, which helps to break down bilirubin into a form that can easily be removed from their body through their pee and poo.

There are two ways your baby might receive phototherapy: through either a light box or a fibreoptic blanket.



LIGHT BOX

- A light box is placed on top of the bassinet to shine the phototherapy light over your baby’s entire body.
- Your baby’s eyes are covered to protect them from the light.



FIBREOPTIC BLANKET

- Your baby is wrapped in a blanket made of special fibers that shine light onto your baby’s skin.
- It is easy to hold and nurse your baby during phototherapy.
- On its own, a fibreoptic blanket is usually used only in less concerning cases of jaundice.

This document provides client-friendly information based on the Association of Ontario Midwives’ *Clinical Practice Guideline No. 18: Midwifery Management of Hyperbilirubinemia in the Healthy Term and Late Preterm Neonate*. It is designed to help you better understand some of the considerations and choices you may face while receiving care from your midwife. It is not intended to replace the informed choice discussions that you and your midwife will have. If you have any questions, concerns or ideas after reading over this document, please share them with your midwife.

Are there side effects to phototherapy?

Phototherapy is harmless for most babies. Some babies may experience a few minor side effects including:

- dehydration—if they are not getting enough milk
- skin rash
- getting too hot
- loose, watery poo
- changes in skin color (bronze baby syndrome)

Where will my baby receive phototherapy?

Your baby will probably receive phototherapy in the hospital. Nurses will likely monitor your baby, but the person most responsible for their care will either be your midwife or a doctor.

In some communities, midwives have the tools to offer phototherapy at home with fibreoptic blankets, but this is not an option that is available to most clients in the province at this time.



How long will my baby need phototherapy?

Babies usually need phototherapy for about 24 hours. It will be stopped once your baby's bilirubin level is within a safe range.

How will I know if the phototherapy is working?

Your baby will be closely monitored by a health-care provider (midwife, nurse, or doctor) to make sure that:

- the phototherapy is working and your baby's bilirubin level is going down
- your baby's bilirubin level reaches a safe level
- your baby is otherwise healthy and well

Some things your baby's care provider(s) will do during your baby's phototherapy include:

- regularly checking their temperature, breathing and heart rate
- helping to make sure they are feeding well
- taking blood tests to make sure their bilirubin level is going down and reaches a safe level

How can I prepare for my baby's phototherapy?

You should be prepared to stay at the hospital overnight. This packing list may help make your stay in the hospital more comfortable.

FOR YOU	FOR YOUR BABY	OTHER SUPPLIES YOU MAY FIND HELPFUL
☐ Comfortable clothing ☐ Socks and slippers ☐ Toiletries ☐ Overnight sanitary pads ☐ Nursing pads ☐ Health card/identification card ☐ Ice packs for your vaginal tear (if required) ☐ Ibuprofen or acetaminophen ☐ Other prescription medication you may take	☐ Newborn clothing (including baby hat) ☐ Newborn diapers ☐ Infant car seat	☐ Snacks and meals (ask your midwife if you will have access to a fridge to store your food) ☐ Breast pump ☐ Phone and phone charger ☐ Extra pillows ☐ Nursing pillow ☐ Reading material ☐ Water bottle ☐ Tissues ☐ Money to buy food etc.



Can I still nurse my baby while they are having phototherapy?

You should try to keep nursing your baby during phototherapy.

Nursing helps:

- provide the fluids your baby needs
- provide the nutrition your baby needs
- your baby remove bilirubin from their body
- your baby feel more connected to you

If your baby's bilirubin level is not going down fast enough, you may be asked to stop nursing so that your baby can spend more time under the lights. During this time you'll want to keep making milk by using a pump and/or hand expressing your milk. You can feed this milk to your baby with a cup or a bottle while they are under the lights.

Human milk is the best food for newborns, but if your baby:

- isn't drinking enough to stay hydrated and
- is losing too much weight

it might be recommended that you add formula to their feeds.

It is important to still give your baby your milk along with formula. This helps:

- your baby to get important nutrients and immunoglobulins from your milk that formula doesn't have
- you to keep up your milk supply for when your baby starts nursing again

Talk to your midwife about how to nurse successfully while your baby gets phototherapy.

What if the phototherapy doesn't work?

If your baby is not getting better after receiving phototherapy, other treatments, such as intravenous (IV) medication or a blood transfusion may be recommended by a doctor.

These treatments may mean that your baby will be admitted to a hospital's neonatal intensive care unit (NICU).

What if my baby's jaundice comes back?

Some babies finish phototherapy, go home and their bilirubin level starts to rise again. If this happens to your baby, you will likely need to go back for more phototherapy.



Contact your midwife following phototherapy if you notice that:

- your baby is very sleepy all the time and hard to wake up
 - » Your baby should sleep for stretches no longer than four to six hours in a 24-hour period without waking to feed.
- your baby's skin or the whites of their eyes start to look yellow
- your baby does not want to feed
 - » Your baby should eat every two to four hours, eight to 12 times per day, for 20 minutes or more each time.

Your baby's bilirubin level will be checked sometime after phototherapy has finished, usually around 24 hours. This test can be done at home, in an outpatient clinic, or in the hospital.

Considerations for parents

While you are in the hospital with your baby, you will be recovering from the birth. Even if your baby needs the care of a doctor, you should continue to receive the care you need for your recovery. Your midwife can help support your comfort during your hospital stay.

Remember:

- phototherapy is generally harmless.
- almost all babies who get phototherapy recover completely from their jaundice.

Still, it is normal to:

- feel confused about your baby's diagnosis and need for phototherapy.
- feel anxious about how jaundice and phototherapy will affect your baby's health.
- find it difficult that you can't hold your baby for periods of time.
- feel overwhelmed by caring for your new baby during phototherapy while you are still recovering from the birth.

To make your baby's phototherapy an easier experience for you:

- Ask your midwife or baby's other health-care provider(s) for information about jaundice and phototherapy, and what you can expect.
- Speak to your midwife or other health-care provider(s) about any concerns you have about your baby.
- Make sure you look after your own health and comfort by:
 - » speaking to your midwife about concerns you have about your recovery.
 - » eating well, staying hydrated and getting as much rest as you can.
- Ask your support people for help (e.g. bringing you food and supplies, caring for your other children, etc.).



Questions

If you have any concerns or questions after reading this pamphlet, talk to your midwife. If it helps, you can write your questions or ideas here to reference at your next appointment:

