

Caring for a Child With Neonatal Abstinence Syndrome (NAS)

A newborn experiencing Neonatal Abstinence Syndrome (NAS) will likely need to spend some time in the neonatal intensive care unit (NICU) before they can go home with a caregiver. A better understanding of NAS and some good preparation can take the intimidation out of caring for a newborn with this condition.

What is NAS?

Neonatal abstinence syndrome happens when babies are exposed to substances in the womb before birth. Babies can then go through withdrawal after birth. The syndrome most often applies to opioid medicines but can include a variety of substances.

Babies exposed to substances in the womb may start to experience withdrawal within a day or two of being born. They will have some very specific symptoms, but the combination of medication and medical care, along with some tips for at-home care, can get you and the newborn through those first weeks and months of life.

Symptoms of Neonatal Abstinence Syndrome (NAS) can include:

- Tremors (trembling)
- Irritability (excessive crying)
- Myoclonic jerks (sudden twitch or jerk,

- sometimes while falling asleep)
- Restlessness (documented as one-three hours of sleep after feeding)
- High-pitched crying
- Hypertonia (increased muscle tone)
- Mottling of the skin
- Apnea (breathing stops for periods)
- Increased respirations (greater than 60

breaths per minute without retractions)

- Excessive sucking and/or rooting
- Hyperactive reflexes
- Seizures
- Yawning, stuffy nose, and sneezing

Some more severe withdrawal symptoms can seem scary, but they are manageable with

medication. These early symptoms can include tremors or trembling, myoclonic jerks, restlessness, sleeping less than three hours after a feeding, and high-pitched crying. These happen most intensely in the first few days and weeks.

In the NICU, infants may be given medicine like morphine, methadone, and seizure medications to help them make it through the withdrawals more easily. If the infant is on a sedative such as morphine, they also may have an apnea monitor that has to be worn at all times to monitor their breathing and heart rate. (If you want to learn more about how the NICU care team rates the withdrawal symptoms to treat them, we have



Continued on page 2

resources on NAS rating scales at the end of this tip sheet.)

Other things that can help in those first few days are:

- A dim, quiet environment. It's not always the easiest to achieve when in a NICU with other little ones and monitors, but lights can be kept low and the curtains drawn around their area.
- If you can spend time in the NICU, we encourage you to do so. The more time you spend with the baby, the better you will get at figuring out what works for calming them.
- The NICU nurses spend a lot of time with these babies and will likely be an excellent ally as you learn how to provide the best care for the child.

As with typical infants, babies suffering from NAS will have their own personalities and preferences. The child in your care may prefer bouncing to rocking; they may love or hate the car. That said, babies suffering from NAS typically do well with a few of the same considerations.

In addition to a dark and quiet environment, infants going through withdrawal typically love to be swaddled. This will help them feel safe, as well as help them stay asleep by minimizing tremors and myoclonic jerks. Infants usually like to be swaddled for sleep, but infants with NAS can benefit from being swaddled all the time, with shorter periods to stretch and move around when awake before or after eating.

Infants with NAS often have difficulty controlling their body temperature—another benefit of swaddling. They may need to be swaddled in a diaper if they are sweating excessively. Their body temperature can change throughout the day, so you may need to play it by ear. You can get swaddle blankets that have Velcro and are made to stay put, or

master the art of the swaddle with any blanket with practice!

One caregiver shared, *“Swaddling, pacifiers, quiet and dark room, as low of stimulation as we could do around here helped immensely. I wore her for the whole time she was with us. Wrapping her up and keeping her close to me worked wonders for her.”*

Another item that may be worthwhile is a swing and a smaller bed or bassinet. In general, smaller, controlled spaces and calm environments ensure a baby suffering from NAS doesn't get overstimulated and help them feel safe.

Some other symptoms of NAS may seem less intense, but these few simple tips might help keep the child in your care soothed and content:

- Infants with NAS can have overactive sucking reflexes, so using a pacifier is soothing and quite beneficial.
- Skin-to-skin contact, such as a kangaroo carry, is a good way to soothe an infant suffering from withdrawal.
- A good wrap or baby sling/carrier is priceless in the first few months.

Feeding can be difficult. Though they may have increased sucking reflexes, babies with NAS often cannot latch properly and have swallowing issues, reflux, or other difficulties feeding. Pediatricians often suggest feeding the child with a higher calorie formula in smaller quantities frequently. Sometimes, you may have to try different bottle and nipple combinations. If there is one that is working well in the NICU, you might consider using the same ones at home.

As you learn how to care for a child with NAS, you may also want to take some time to educate your support system, too. Though it's hard with a new baby, you may want to avoid large family gatherings. Being passed

Continued on page 3

between people, hearing many voices, and the general commotion of a larger group of people can be too much for a newborn with NAS to deal with.

Caring for an infant with NAS can be exhausting. There might be times when the baby is hard to soothe and calm, and the frequent feedings and sleep schedules may leave you feeling worn out. Please remember that you are not alone. Be sure to care for yourself, use the people in your circle of support, and reach out when you feel overwhelmed.



Resources

From the [Resource Library](#)

- *Methamphetamine & Drug Endangered Children: Breaking the Cycle* (DVD), by Marathon County Sheriff's Department
- *Adoption & Prenatal Alcohol and Drug Exposure*, by Richard B. Parth, Madelyn Freundlich & David Brodzinsky
- *Understanding the Drug Exposed Child*, by Ira J. Chasnoff, Amy Anson & Kai Moss Iaukea
- *The Mystery of Risk: Drugs, Alcohol, Pregnancy, and the Vulnerable Child*, by Ira J. Chasnoff

Additional Resources

- [Neonatal Abstinence Syndrome](#)
- [Caring for Babies with Neonatal Abstinence Syndrome](#)
- [Helping Babies Overcome Opioid Withdrawal](#)
- [Assessment of Neonatal Abstinence Syndrome: Standard Scoring of Infants Using the Finnegan Scoring Tool](#)
- [Grand Resource: Help for Grandfamilies Impacted by Opioids and Other Substance Use](#)
- [Raising the Children of the Opioid Epidemic: Solutions and Support for Grandfamilies](#)