

## Caring for a Baby 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.

### Understanding NAS

#### *What is NAS?*

Neonatal abstinence syndrome happens when babies are exposed to a variety of medications or substances during pregnancy and then go through withdrawal after birth. A subset of NAS, called Neonatal Opioid Withdrawal Syndrome (NOWS), may be diagnosed if the baby was exposed specifically to opioids like heroin, methadone, or oxycodone.

#### *Substances That Can Lead to NAS*

Other substances that may lead to NAS include:

- Certain antidepressants
- Barbiturates (sedatives)
- Benzodiazepines (often used as sleeping pills or anti-anxiety medication)
- Stimulants (amphetamines, cocaine, or methamphetamine)

### What to Expect: NAS Symptoms

When exposed to such substances in the womb, babies may start to experience withdrawal symptoms within a day or two of being born. These early symptoms typically occur with the greatest intensity during the first few days and weeks.



Common symptoms include:

- Tremors (trembling)
- Irritability (excessive crying)
- High-pitched crying
- Restlessness (documented as one to three hours of sleep after feeding)
- Myoclonic jerks

(sudden twitch or jerk, sometimes while falling asleep)

- Hypertonia (increased muscle tone)
- Hyperactive reflexes
- Excessive sucking and/or rooting
- Yawning, stuffy nose, and sneezing
- Mottling of the skin

More serious symptoms that require medical attention:

- Apnea (breathing stops for periods)
- Increased respirations (greater than 60 breaths per minute without retractions)
- Seizures
- Some more severe withdrawal symptoms can seem scary, but they are manageable

Continued on page 2

with medication and proper care.

### Medical Treatment

In the NICU, infants may be given medicines like morphine, methadone, and seizure medications to help reduce the severity of withdrawal symptoms. 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.

### Supporting a Newborn in the Hospital

Even in the NICU environment, there are ways to help comfort and soothe a baby:

- *Create a calm environment:* A dim, quiet environment helps tremendously. While it's not always easy to achieve in a NICU with other little ones and monitors, lights can be kept low and curtains drawn around their area.
- *Spend time together:* 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.
- *Partner with NICU staff:* 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.

### Preparing for Home

Remember that, 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. Learning these preferences while in the NICU, with input from the nurses and care team, will help you prepare for home care.

### Caring for the Child at Home

#### *Creating the Right Environment*

- Keep it calm and controlled: In general,

smaller, controlled spaces and calm environments ensure a baby suffering from NAS doesn't get overstimulated and helps them feel safe. May might consider having a swing and a smaller bed or bassinet available for the child.

- Maintain quiet, dim surroundings: Continue the calm environment you and the NICU team established in the hospital. A dark and quiet space helps reduce overstimulation.

#### *Swaddling*

Infants going through withdrawal typically love to be swaddled. This will help them feel safe, as well as aid in staying asleep by minimizing tremors and myoclonic jerks. While typical infants usually prefer to be swaddled for sleep, those with NAS may benefit from being swaddled all the time, with shorter periods to stretch and move around when awake, especially before or after eating.

Infants with NAS often have difficulty controlling their body temperature—another benefit of swaddling. Their body temperature can fluctuate throughout the day, so you may need to adjust accordingly. You can find swaddle blankets that feature Velcro and are designed to stay in place, or master the art of swaddling with any blanket through practice.

One caregiver shared: *"Swaddling, pacifiers, quiet and dark room, as little 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."*

#### *Soothing Strategies*

- Pacifiers: Infants with NAS may have overactive sucking reflexes, so using a pacifier can be soothing and beneficial.
- Skin-to-skin contact: Kangaroo carry and other forms of skin-to-skin contact are effective ways to soothe an infant experiencing withdrawal symptoms.

Continued on page 3

- **Baby wearing:** A good wrap or baby sling/ carrier is priceless in the first few months, allowing you to keep the baby close while maintaining the secure feeling they need.

### *Feeding Considerations*

It will be essential to get specific feeding instructions from the NICU caregivers, as babies with NAS typically have a variety of feeding issues. These can include poor oral motor coordination, hyperarousal, and immature suck-swallow-breathe coordination. Correct positioning of the baby during feedings may also be essential.

### **Special Considerations**

#### *Managing Visitors and Social Situations*

As you learn how to care for a child with NAS, you may also want to take some time to educate your support system. Though it's hard with a new baby, you will want to avoid large family gatherings. It is not uncommon for babies with NAS to have a compromised immune system. Being passed between people, hearing many voices, and the general commotion of a larger group of people can be too much for the newborn's fragile central nervous system.

#### *Caring for Yourself*

Caring for any infant can be exhausting, and the same is undoubtedly true for a newborn with NAS. The key to caring for a baby with NAS lies in educating yourself so you know what NAS looks like, what to expect, and how to be prepared to make the child as comfortable as possible through the withdrawal process.

Remember to seek support when you need it and don't hesitate to reach out to healthcare providers with questions or concerns.



## **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](#)