**Perinatal substance use management**

### Drugs causing NAS
- Most frequently opioids (e.g. methadone, heroin and buprenorphine)
- May include any drugs including prescription medications (especially SSRI), OTC and herbal preparations
- Use of amphetamines/methamphetamines (e.g. ICE) increasing
- Polydrug exposure may be present

### Maternal
- **Assessment**
  - Detailed antenatal psychosocial assessment and history of substance use
  - Screening for blood borne viruses
- **Support**
  - Explore options for known carer and continuity of care models
  - Provide brief interventions for smoking and alcohol use
  - Link with appropriate services
  - Discussion with paediatrician including:
    - Care of baby
    - Length of stay
    - Monitoring
    - Potential for medication
    - Follow up
- **Labour and birth**
  - Discuss options for analgesia
  - Provide routine management of labour and birth to woman
- **Postnatal**
  - Discuss options for:
    - Breastfeeding
    - Ongoing care and support

### Neonatal
- **Resuscitation**
  - Naloxone contraindicated in the neonatal period (including for resuscitation) if maternal opioids used in pregnancy
- **Setting for care**
  - Initial care may be with mother on postnatal ward
  - Closer care and observation may be required in a special care nursery for symptomatic babies
- **Breastfeeding**
  - Generally breastfeeding is encouraged and supported—consider individual drugs
  - Encourage to stop substance use
- **Monitoring**
  - Finnegan Neonatal Abstinence Severity Score used to monitor and record signs of withdrawal
- **NAS treatment**
  - Non-pharmacological supportive therapy
  - Pharmacological treatment:
    - Morphine for opioid withdrawal
    - Phenobarbitone for non-opioid withdrawal

### Labour and birth
- Discuss options for analgesia
- Provide routine management of labour and birth to woman

### Postnatal
- Discuss options for:
  - Breastfeeding
  - Ongoing care and support

### Discharge planning
- Provide non-judgemental care focusing on maternal and baby welfare
- Plan discharge during antenatal period involving multidisciplinary team
- Provide support for woman to meet needs:
  - Accommodation, food and security
  - Respectful and culturally sensitive education, empathy, counselling and ongoing support
- Ensure safety plan in place for baby
- Arrange follow up

**Abbreviations:** NAS Neonatal Abstinence Syndrome; OTC Over the Counter; SSRI Selective Serotonin Re-uptake Inhibitors