Neonatal (newborn) abstinence syndrome (NAS)

This information sheet aims to answer some commonly asked questions about neonatal abstinence syndrome.

IMPORTANT: This is general information only. It is not intended as advice for your individual circumstances. Ask your health care provider for more information.

What is neonatal abstinence syndrome?
During pregnancy, your baby can become addicted to or dependent on substances (drugs) you take before he or she is born. After birth, when your baby is no longer getting that drug, they may show signs of withdrawal. This is called neonatal abstinence syndrome (or NAS). Signs of NAS usually develop within a few hours to a few days of birth.

How do you know your baby has NAS?
The signs of NAS vary depending on the drugs you have been using. Common signs of withdrawal in a baby are:

• excessive crying, tremors and jitteriness
• poor feeding and vomiting
• unable to settle and sleep properly
• excoriated (sore and red) skin especially in the nappy area but may also be on the face and other parts of the body
• loose bowel motions
• fever

Can you breastfeed if your baby has NAS?
It is better to not use drugs than to not breastfeed. Breastfeeding is the natural and best way to feed your baby. Although most of the time it is safe to breastfeed, some drugs pass into or build up in breast milk and can pass to your baby during breastfeeding. Even low levels may cause your baby to feed poorly, be drowsy, have poor weight gain and upset their sleep patterns. There may also be effects later on such as behavioural and learning difficulties. Your healthcare provider will discuss the drug(s) you use and if and when it is safe to give your baby breast milk.

Can your baby stay with you after birth?
If everything else is ok, your baby can usually remain with you after birth. The midwife/nurse looking after you both will check your baby regularly using a scoring chart (Finnegan score). Your baby is given a score based on the signs of NAS they show. If the score becomes high, it may be necessary to admit your baby to a special care nursery. Ask your health care provider about your baby’s scores and how you can be involved in the assessments.

What are the treatments for NAS?
Supportive care is very important. This involves you and your partner cuddling, swaddling (wrapping up) and generally comforting your baby. If you are with your baby as much as possible you will be able to respond to their needs when they are unsettled. Often babies are very hungry and want to feed a lot. If you are breastfeeding, you will be able to breastfeed whenever your baby wants to. If you are formula feeding you will be able to give your baby regular small feeds. Your connection with your baby is very important for their long term emotional and mental health.

Medication is sometimes needed to help manage your baby’s withdrawal. The amount and frequency of medication depends on the signs of withdrawal your baby is showing. The medication is gradually reduced as your baby’s signs of withdrawal lessen. Morphine and/or phenobarbitone are used.

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How long does your baby have to stay in hospital?
The number of days your baby will need to stay in hospital depends on the type of drug(s) causing the NAS. For some drugs, it is 3–5 days and for others it can be for a week or longer. Staying in hospital means your baby’s health can be closely monitored and medication can be given if needed. Your health care provider will give you more information about this.

What should you do if you use after birth?
Taking drugs when you are looking after your baby can be dangerous because you may be less aware of your baby’s needs. You may be sleepy, drowsy and irritable and not able to care safely for your baby.

- if you do use, make sure there is a responsible person able to care for your baby and other children
- if you have been drinking alcohol or taking drugs, don’t sleep with your baby (in a bed, chair or other place)
- don’t smoke near your baby. Smoke outside your home, away from your baby, and away from the windows and doors. Remember, it is against the law to smoke in a car carrying children under 16 years old
- talk to your health care provider about the drugs you use and the best way to manage breastfeeding

Will your baby need follow up after you go home?
Yes if your baby had NAS and especially if they needed medication or monitoring after birth, follow-up is important. Regularly checking your baby’s growth and development helps detect any problems early. Treating problems early gives your baby the best chance for a healthy life later on. Your health care provider will discuss with you the services available to support you and your baby after you are discharged from hospital.

When should you contact your health care provider?
Contact your health care provider any time you feel you are not coping or if you are worried about your baby or your health.

Support & information
13HEALTH (13 432 584) a phone service offering health information to the public
Pregnancy, Birth & Baby Helpline (1800 882 436) free, confidential, professional information and counselling for women, their partners and families about conception, pregnancy, birthing and postnatal care www.pregnancybirthbaby.org.au
Lifeline (13 11 14) a telephone crisis support service available to anyone www.lifeline.org.au
Quitline (13 78 48) provides tailored help and support for pregnant women and their partners to stop smoking
Australian Drug Foundation: information about drug use in pregnancy and lactation www.druginfo.adf.org.au
Foundation for alcohol research and education (FARE): information about drinking alcohol when pregnant or breastfeeding www.fare.org.au/women-want-to-know
Alcohol and drug information services (1800 177 833): for help if you or someone you know has problems with alcohol www.alcohol.gov.au
SIDS and Kids: information about safe sleeping and safe wrapping to help baby settle. Mobile apps available for download www.sidsandkids.org/safe-sleeping

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