What is jaundice?

**Jaundice** is a word used to describe people with a yellowish color to their skin and the whites of their eyes. It is caused by build-up of a chemical called **bilirubin** [bill-ee-rub-in] in the blood. Everyone has some bilirubin in their body. But when the level is too high, known as **hyperbilirubinemia**, it may cause jaundice.

What causes jaundice?

Before birth, the mother’s liver removes bilirubin for the baby. But after birth, the baby’s liver must remove it. Sometimes the body makes more bilirubin than the baby’s liver can handle. Then the bilirubin builds up in the blood and causes jaundice.

How common is jaundice?

About 6 in 10 babies have jaundice. In most of these newborns, bilirubin levels peak a few days to a week after birth. As the infant feeds, the bilirubin levels usually decrease on their own.

What factors affect jaundice?

In some babies, the build-up of bilirubin is more serious. This may occur if the baby:

- is premature
- is not eating well
- has an infection
- has bruising or bleeding inside
- has a sibling who had jaundice
- is of East Asian or Mediterranean descent
- has a different blood type than their mother. This is often called an **Rh/ABO incompatibility**
- is breastfeeding

These babies are more likely to need treatment for jaundice.
Does jaundice cause permanent problems?
In most cases, jaundice is short-term and causes no lasting problems. In very severe and/or untreated cases, permanent health problems can occur. This happens more often in infants who are very premature or very sick. Early treatment can help prevent these problems.

What treatment will my baby receive?
- Mild cases of jaundice do not require any treatment. The bilirubin build-up often goes away within a week after birth.
- Moderate cases of jaundice are most often treated with special lights. This treatment is called phototherapy. It helps the baby’s body break down the extra bilirubin.
  - Are the lights safe? Yes, phototherapy is safe and it works best when most of the baby’s skin is exposed to the light. The baby will wear only a diaper and a soft mask to protect the eyes. To keep warm, the baby is often placed in a special bed or isolette.
- If the jaundice is due to a blood-type difference between mother and baby, it may also be treated with medicine.
- Severe cases of jaundice that do not respond to phototherapy or medicine are rare. In these cases, doctors may perform an exchange transfusion.

What will happen next?
Most babies with jaundice respond well to treatment in a few days. But every baby is different. Some babies may require more treatment, especially if they are not eating well. The health care team will talk with you about what is best for your baby.

Glossary
- Bilirubin – chemical that may cause jaundice when it builds up in the body
- Exchange transfusion – a procedure in which doctors repeatedly remove small amounts of blood from the baby and replace it with equal amounts of donor blood
- Hyperbilirubinemia – buildup of a chemical called bilirubin in the body (may cause jaundice)
- Jaundice – yellow color of the skin and whites of the eyes
- Phototherapy – using special lights to help the baby get rid of the bilirubin build-up that is causing jaundice
- Rh/ABO incompatibility – difference in blood type between the mother and the baby. This can increase the risk or severity of jaundice

Ask the health care team when you have questions—they are there to help.