



Caring for a Child with Neonatal Abstinence Syndrome (NAS)

Knowing how to care for child who is suffering from the effects of withdrawal from drugs can be frightening, confusing, or overwhelming. These little ones suffer from Neonatal Abstinence Syndrome (NAS) and will likely need to spend some time in the neonatal intensive care unit (NICU) before they can go home with a caregiver.

Babies born addicted to substances 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 of time)
- Increased respirations (greater than 60 breaths per minute without retractions)
- Excessive sucking and/or rooting
- Hyperactive reflexes
- Seizures
- Yawning, stuffy nose, and sneezing



Some of the more severe withdrawal symptoms can seem scary, but they are manageable with medication. Some of 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 heartrate. (If you are interested in learning more about

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how the NICU care team rate the withdrawal symptoms in order to treat them, we have 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 you are in a NICU with other little ones and monitors, but lights can be kept down, and the curtain drawn around their area.
- If you are able to spend time in the NICU, we encourage you to do so. The more time you get to 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 a great ally for you as you learn how to provide the best care for the child.



Just 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 who are 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 typically 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 they are awake before or after eating. Infants with NAS often have a hard time controlling their own body temperature – another benefit of swaddling. They may need to be swaddled in just a diaper if they have excessive sweating. 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 and practice!

Another item that may be worthwhile is a swing and a smaller bed or bassinet. In general, smaller, controlled spaces and calm environments make sure a baby suffering from NAS doesn't get overstimulated and helps 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 use of 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

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difficult. Though they may have increased sucking reflexes, babies with NAS are often not able to latch properly, can have swallowing issues, reflux, or other difficulties feeding. Pediatricians will often suggest feeding the child with a higher calorie formula, in smaller quantities more 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, as well. Though it's hard with a new baby in the family, you may want to avoid large family gatherings. Being passed 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; make use of the people in your circle of support, and reach out when you are feeling overwhelmed.



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](#)

From the Lending 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 Chasnoff, Amy Anson & Kai Moss Iaukea



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