

OPTIMAL MANAGEMENT OF NEONATAL JAUNDICE

It is important to ensure adequate and timely treatment of jaundice to prevent acute as well as long term bilirubin induced neurological injury. Phototherapy and Exchange transfusion are the two main modalities of treatment for neonatal jaundice. Effective use of phototherapy can prevent the need for exchange transfusion and can therefore prevent the mortality and morbidity associated with this procedure

Jaundice is a very frequent problem in preterm neonates and upto 80% of them develop Neonatal jaundice

In most cases neonatal jaundice can be managed with Phototherapy alone but a few neonates may require exchange transfusion in addition to phototherapy.

Exchange transfusion for jaundice carries an inherent risk of mortality and morbidity in addition to the usual risks associated with blood transfusions.

Effective use of Phototherapy in the management of Neonatal Jaundice can drastically decrease the need for exchange transfusion

Optimal management of Jaundice includes risk stratification and timely identification of those needing therapeutic intervention(Phototherapy)

Effective use of Phototherapy means initiating Phototherapy as per standard guidelines and using the right dose and duration of Phototherapy.

It is also important to ensure that these infants are adequately monitored when under phototherapy.

Exchange transfusions must be done only when indicated as per standard guidelines.

And all preterm infants with jaundice needing treatment with phototherapy or exchange transfusion must be followed up after discharge for hearing and neurodevelopmental assessments.