

Vitamin K for your baby

Maternity Department





Introduction

This leaflet is a guide to help you decide if and how your baby should receive vitamin K.

The Department of Health recommends that all newborn babies are given a vitamin K supplement at birth. However, the decision is entirely yours about whether your baby receives vitamin K and how it is given.

What is vitamin K?

Vitamin K occurs naturally in food especially in liver and some vegetables. We all need vitamin K. It helps to make blood clot in order to prevent bleeding.

What are the benefits of giving vitamin K?

When babies are fed entirely on milk, they have very little vitamin K. A very small number of babies may suffer internal bleeding due to vitamin K deficiency. This is called haemorrhagic disease of the newborn (HDN). Vitamin K reduces the risk of HDN.

HDN is a rare disorder which occurs in newborn babies leading to bleeding from the nose, mouth or into the brain. You will not always be able to see the bleeding. When it occurs in the brain, it may cause brain damage or even death.

Which babies are at greater risk of HDN?

Babies at greater risk of HDN are those who are:

- Born before 36 weeks of pregnancy
- Born by a forceps, ventouse or caesarean section birth
- Have an infection
- Born to a mother who has received medication during pregnancy associated with a higher risk of bleeding in the newborn (for example, anticonvulsant therapy used to treat epilepsy)

Can vitamin K be harmful?

Research has shown that it is not harmful. Concerns were raised in the past about a possible link with vitamin K and childhood cancer. However, research since then has found that giving newborns vitamin K does not increase their risk of developing leukaemia or any other cancer in childhood.

How are babies given vitamin K?

There are two methods of giving vitamin K to your baby:

- By an a medicine into your baby's mouth
- By injection into your baby's leg

By mouth:

If you choose to have your baby's vitamin K given by mouth, the medicine will have to be given in three separate doses to make sure it is effective. The doses are given:

- Straight after birth
- At seven days old
- At 28 days old

Problems with this form of vitamin K are rare. However, there is the possibility of forgetting about one of the doses and this means full protection is not given.

By injection:

One dose of vitamin K by injection prevents HDN in virtually all babies. The dose is given at birth into your baby's leg, by the midwife. It does not need to be repeated.

The National Institute of Health and Care Excellence (NICE) guidelines clearly recommend the injection as the most clinically effective way of giving vitamin K (NICE, 2006).

Problems from the injection are rare but may happen, as with any injection. Babies can feel pain and, on rare occasions, may have an infection at the place where the injection goes in, or bleeding and bruising in the muscle.

Consent

Your midwife will discuss vitamin K with you during your pregnancy. Whatever you choose, please record it in your birth plan. Your midwife will discuss this again with you around the time of the birth of your baby and ask for your consent before vitamin K is given to your baby.

Can I find out more?

You can find out more from the following weblinks:

http://www.nct.org.uk/parenting/vitamin-k

http://www.patient.co.uk/doctor/Haemorrhagic-Disease-of-Newborn.htm

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Your community midwife, or

Maternity Triage team on 01384 456111 ext. 3053

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

http://dudleygroup.nhs.uk/services-and-wards/maternity/

If you have any feedback on this patient information leaflet, please email patient.information@dgh.nhs.uk

References

Fear NT, Roman E, Ansell P, Simpson J, Day N, Eden OB; United Kingdom Childhood Cancer Study (2003). Vitamin K and childhood cancer: a report from the United Kingdom Childhood Cancer Study. *Br J Cancer*. 89(7):1228-1231.

National Institute for Health and Clinical Excellence (NICE) (2006) Routine postnatal care of women and their babies. Clinical Guideline 37. London: NICE. Available at:

http://www.nice.org.uk/nicemedia/pdf/CG37NICEguideline.pdf

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Aceasta brosura poate fi pusa la dispozitie tiparita cu caractere mari, versiune audio sau in alte limbi, pentru acest lucru va rugam sunati la 0800 073 0510.

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