



Healthy Outcomes for You and Your Baby: Neonatal Abstinence Syndrome



THUNDER BAY
Drug Strategy





Pregnancy is a time of change and can be both a happy and stressful time for expectant mothers. For women who have used prescribed medication, street drugs or medications used to treat opioid dependence there are often fears about what this use will mean for the baby.

Street drugs may include:

- fentanyl
- heroin
- hydromorphone
- percocets
- other opioids

You may know these substances as:

- oxys
- Os
- hydies
- peaches
- greys
- red rockets
- patch
- green monsters

There is help available for women during pregnancy to reduce harm with treatment options such as methadone, suboxone or subutex. These medications stop you from feeling withdrawal symptoms and are the safest options in pregnancy. This booklet highlights harm reduction, community resources, some of the effects of drug use on your baby and how we can help each other.

Treatment Options

The treatment options for opioid dependence during pregnancy are safer for both the mother and baby than street drug use. Treatment improves a mother's ability to access prenatal care and choose nutritious snacks and meals. It also improves the baby's health because it gives your baby a better chance of being born full-term.

Some babies may show signs of withdrawal from treatment after birth. A doctor can help the baby with these symptoms. Treatment options are safe and the best option while pregnant and breastfeeding.

Depending on your community there are different options available for opioid substitution therapy. Options include methadone, suboxone, subutex, and morphine taper. Alternative opioid substitution therapies may exist, so please speak to your health care provider regarding your options, or access one of the treatment centres listed on page 5.

Please be aware that there are also detox and residential treatment centers that can assist you with recovery. Please talk to your health care provider to see if this is an appropriate option for you.

Prenatal Care

One of the most important things you can do for you and your baby is to access regular prenatal care during your pregnancy. There are many options available in Thunder Bay. You can access prenatal care from a doctor, an obstetrician, a nurse practitioner or a midwife. Refer to the resource list for contact information.

Child Welfare

The child welfare agency plays an important role in pregnancy planning and in helping to ensure you have the supports you need to care for your baby in a safe home. They believe that whenever possible, children should be cared for by their parents or extended family in the family home. If required the agency will work with you to bring together the people and services in your community that will help you care for your baby in a safe home.

Withdrawal

Withdrawal or Neonatal Abstinence Syndrome (NAS) happens in babies who were exposed to prescribed drugs, street drugs or medications used to treat opioid dependence during pregnancy. Whatever drugs you take during pregnancy, your baby gets too. When your baby is born, he or she will stop getting the drug all of a sudden. This may cause your baby to go through withdrawal. However, not all babies who have been exposed to drugs will have withdrawal. The experience of withdrawal for a baby is similar to what an adult would go through. It is not known why some babies withdraw and others do not. It is not based on the amount of drug use, and every baby's experience is different.

If your baby has been exposed to drugs, the health care team will closely monitor your baby for signs of withdrawal. They will want to be sure that they give the right type of treatment to help your baby be comfortable and healthy. The length of time your baby spends in the hospital will depend on the treatment your baby is getting and how your baby responds to the treatment.

Signs and symptoms of withdrawal

You can help your baby by watching for the signs of withdrawal listed below. Be sure to let the hospital staff know if you see signs that your baby needs help.

- Crying a lot or irritable
- Pain and discomfort
- Very sensitive to being touched
- Trembling or tremors
- Stuffy nose, sneezing and yawning
- Breathing quickly
- Problems sleeping
- Unexplained fever and/or sweating
- Upset stomach and vomiting
- Uncoordinated feeding
- Excessive suck
- Diarrhea that can cause diaper rash
- Weight loss or slow weight gain
- Seizures

When does withdrawal start? And how long does it last?

Every baby will go through withdrawal differently. Withdrawal may start within hours of your baby's birth, a few days after your baby is born, or even after your baby has gone home from hospital. Your baby's hospital stay may be longer to monitor for withdrawal. It may last for a few days or up to eight weeks. It is important to always remember that each baby is different and you should try not to compare your baby's care with other babies. Knowing the signs of withdrawal will help you to notice if your baby needs help and when you should speak to a health care provider.

What can I do to help my baby?

You are the most important person in your baby's care and your baby needs you to be with them. This is the most important time to strengthen the connection with your baby.

- Speak softly around your baby and encourage visitors, friends and family to speak softly.
- Turn down the lights or loud noise.
- Babies benefit from uninterrupted sleep in between feeds.
- Feed your baby when he or she is hungry.
- Breastfeed your baby.
- Frequent skin-to-skin care:
 - Hold your baby against your bare skin
 - Works best if the snuggle time is more than ½ hour
 - Is a great way to comfort and show love to your baby
 - Try to relax and enjoy this time together



- Use a soother for sucking when they are not feeding.
- Frequent small feedings if needed for weight gain.
- Hold your baby when he or she is fussy. Your baby will be comforted by the sound of your voice and smell of your skin.
- Cuddling your baby can help your baby feel in control of his or her movements. It also helps your baby feel loved and secure.
- Bundling or swaddling helps calm your baby.
- Try baby massage.
- Change your baby's diaper often and use diaper cream to protect the skin on their bottom.
- Always follow safe sleep guidelines and always put your baby to sleep on their back for every sleep.
- Talk to your nurse to help you understand how you can help your baby.

These measures are important to help decrease the symptoms of withdrawal.

How will the health care team look after my baby?

If the signs of withdrawal become strong enough, your baby may be transferred from your room to the Neonatal Intensive Care Unit (NICU) where medication may be started to ease the symptoms of withdrawal, decrease pain, and provide comfort. Your baby will be cared for by nurses, paediatricians and yourself. You or your support person are encouraged to be present with your baby as much as possible and continue to provide comfort measures.

Your baby may also be transferred from the NICU to the paediatric unit of the hospital when the level of care and the signs of withdrawal are lessening. In the paediatric unit, there is space for you to stay with your baby 24 hours/day and you are encouraged to do so. It is important that you tell the nurse if you have other children at home or transportation problems, etc. that make it difficult for you to be with your baby. The nurse can connect you with the hospital social worker to help with some of the things causing you difficulties while your baby is in the hospital.

Feeding my baby

Breastfeeding is safe and recommended while on opioid substitution therapy. Only a very small amount of opioid substitution medication passes to the baby through the breast milk.

Breastfeeding will have many benefits for you and your baby. Mothers can benefit by having a more comforted, calm baby which may mean more sleep for mom and baby. It also builds an attachment between you and your baby.



Breastfeeding and other medications

Remember whatever substances you are taking your baby may be getting in your breast milk. Please speak to your health care provider about how to safely feed your baby if you are breastfeeding and using other substances or medications.

Resources

Prenatal Care	
Anishnawbe Mushkiki	623-0383
Community Midwives of Thunder Bay	622-2229
Dilico Anishinabek Family Health Clinic	626-5200
Fort William Family Health Team (Obstetrical providers)	626-1234
Joseph Esquega Health Centre	623 -4444
Maternity Care Midwives	344-2229
Maternity Centre	684-6228
Walk-in clinics can see you and refer you to a clinic for ongoing care.	

Crisis	
Beendigen Crisis Home	346-HELP 346-4357 or 1-888-200-9997
Crisis Response Services Offers mobile crisis response, crisis support residence, and 24/7 telephone services to both youth and adults who are experiencing a mental health crisis.	346-8282 or 1-888-269-3100
Faye Peterson House - Crisis Line	345-0450 or 1-800-465-6971
Talk 4 Healing	1-855-554-HEAL 1-855-554-4325

Opioid Substitution Treatment Centres	
Bay and Algoma Health Centre	345-5020
Joseph Esquega Health Centre	623-4444
Lucero Health Centre	
Port Arthur location	633-6666
Fort William location	625-5400
Ontario Addictions Treatment Centres – OATC	
Port Arthur	768-2910
Fort William	622-2900
Westfort	577-3540
Red River Road	768-4352

Child Welfare	
A Children's Aid Society of the District of Thunder Bay Offers voluntary individual prenatal counselling, assessment, referral to community agencies and case management.	343-6100
Dilico Anishinabek Family Care Services include education, prenatal monitoring, prenatal classes, HBHC postnatal follow-up, immunization clinics, well-baby checks, home visiting & Fair Start screening.	623-8511
Tikinagan Child & Family Services	737-3466 or 1-800-465-3624

Counselling/Support/Programs	
Anishnawbe Mushkiki Aboriginal community health centre that offers pre/postnatal education, health promotion, traditional healing, FASD and primary clinic services.	623-0383
Beendigen Inc. Pre/postnatal programs available throughout the pregnancy and six months after baby is born.	628-0624 or find us on Facebook
Children's Centre Thunder Bay	343-5000
Communities Together for Children – EarlyON Child & Family Centre	624-5690
Dilico Anishinabek Family Care	623-8511
Elevate NWO HIV and Hep C care, treatment and support.	345-1516
Faye Peterson House Pre/Postnatal Support Program	345-4681 ext. 235
Healthy Babies Healthy Children Program Support provided by public health nurses and family home visitors to families who are expecting or have children aged 0 to 6 years. Lactation consultant and free breastfeeding clinic also available.	625-8814
HOPE Place Drop-in programming in an open and welcoming setting with child care and lunch provided. Individual counselling, support and case management.	683-4705
Maternity Centre Prenatal education classes are available after 25 weeks of pregnancy. Social worker, dietitian, lactation consultant/breastfeeding clinic and exercise therapist available.	684-6228
Metis Nation of Ontario Pre/postnatal nutrition program, family or individual support, community workshops and OTN telemedicine support.	624-5025
Motherisk Alcohol and Substance Helpline Provides information for pregnant and breastfeeding mothers about the effects of alcohol, nicotine and drugs like marijuana, cocaine and ecstasy as well as prescriptions.	1-877-327-4636 or www.motherisk.org
NorWest Community Health Centres Education and skill-building programs are available as well as a certified lactation consultant on staff for individual appointments.	622-8235 or norwestchc.org or find us on Facebook
Ontario Native Women's Association (ONWA) Aboriginal Healthy Babies Healthy Children Program	623-3442
Our Kids Count Offers community kitchens, drop-ins, parenting, pre/postnatal education and home visiting.	623-0292
Thunder Bay Counselling Alcohol and drug assessment, treatment planning, counselling and case management support.	684-1880
Thunder Bay District Health Unit Early prenatal classes available prior to 26th week of pregnancy	625-5900
Thunder Bay Indigenous Friendship Centre	345-5840



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