

Further information

For further information search for 'Vitamin K' on Kids Health www.kidshealth.org.nz, or within the references listed below.

References

National Health and Medical Research Council (2010), Joint statement and recommendations on Vitamin K administration to newborn infants to prevent VKDB.

New Zealand College of Midwives (2016) Consensus statement – Vitamin K prophylaxis for the Newborn

Medsafe NZ (2013). Information for Health Professionals: Vitamin K prophylaxis in the newborn.

Darlow, B.A., Philips, A.A. and Dickenson, N.P. (2011) New Zealand surveillance of neonatal vitamin K deficiency bleeding (VKDB): 1998-2008. Journal of Paediatrics and Child Health, 47 460-464. Classification

Feedback

If you have any concerns please talk to a member of staff providing your care. They will do their best to address your concerns.

If you are still not satisfied, you can contact our Customer Relations Coordinator, phone (06) 350 8980 or (06) 350 8974 or email customer@midcentraldhb.govt.nz

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VITAMIN K AND YOUR BABY



MIDCENTRAL DISTRICT HEALTH BOARD
Te Pae Rauora o Ruahine o Tairāia

INFORMATION FOR PARENTS

PALMERSTON NORTH HOSPITAL
Women's Health Outpatient Department

About Vitamin K

Vitamin K is an essential part of your baby's blood clotting system. Too little Vitamin K can lead to serious and sometimes life threatening bleeding. Vitamin K is a substance made in our intestine from food.

Vitamin K can be given to newborn babies as an injection or by mouth to prevent Vitamin K deficiency bleeding (VKDB).

Why Vitamin K is important

All babies are born with low levels of Vitamin K. As your baby grows they will start to develop the necessary bacteria in their intestine to make their own Vitamin K.

Breast milk does contain vitamin K but in too small amounts to provide protection for your baby.

Too little Vitamin K puts your baby at risk of a serious disease called Vitamin K deficiency bleeding (VKDB).

The Paediatric Society of New Zealand, the New Zealand College of Midwives and the New Zealand College of General Practitioners all recommend that newborn babies receive Vitamin K.

Vitamin K deficiency bleeding (VKDB)

Vitamin K deficiency bleeding is a serious condition that can cause internal bleeding, brain damage or death.

In New Zealand the risk of a baby of developing Vitamin K deficiency bleeding is about 1 in 1439. However if your baby receives Vitamin K at birth the risk reduces to less than 1 in 100,000.

Vitamin K deficiency bleeding occurs most often in the first seven days of life, but can occur up to eight months in babies with bowel or liver problems.

Some babies are more at risk, especially those who are born prematurely, are sick or whose mothers are taking certain medicines (anti-epileptics, anticoagulants or medication for TB).

How is Vitamin K given?

There are two ways to give vitamin K. It can be given as a single injection soon after birth or a small amount (0.2ml) by syringe into the baby's mouth in three separate doses.

Vitamin K injection

A single injection of 1mg (in 0.1ml) is given into the baby's thigh muscle usually in the first 2–3 hours after birth. There may be a little redness, swelling or bleeding at the injection site and your baby may cry briefly when the injection is being given, although many do not.

In the early 1990s one study showed a link between vitamin K injection and childhood leukaemia; however no link has been found in several more recent studies.

Vitamin K by mouth

Vitamin K can also be dropped into the baby's mouth. As vitamin K is not absorbed well, three doses of 2mg (in 0.2ml) are needed: at birth, at 5–7 days and at four weeks. All three doses need to be given.

Babies may spit out vitamin K liquid or may vomit after the dose. If this occurs the dose must be repeated.

Giving Vitamin K by mouth is only recommended if your baby has no risk factors for VKDB.

Risk factors include: premature babies, sick babies, babies unable to absorb nutrients or their mothers are taking certain drugs in pregnancy such as anti-epileptics, anti-coagulants or some drugs for tuberculosis.

Your choice

It is your choice whether or not to give vitamin K to your baby and by which method. Discuss your choice with your lead maternity carer (LMC) and include your choice in your birth plan.

Signs of Vitamin K deficiency bleeding

You should see your doctor or midwife urgently if your baby has any of the following warning signs:

- Unusual or unexpected bruising or tendency to bruise easily
- Any bruising around the face or head (sometimes present at birth)
- Bleeding from the umbilical cord, nose or from the heel prick test
- Blood in poo or nappy
- Irritability, vomiting or pale skin (this may be due to internal bleeding)
- If your baby is over three weeks old and there is prolonged or worsening jaundice, or pale poo and dark urine.

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