



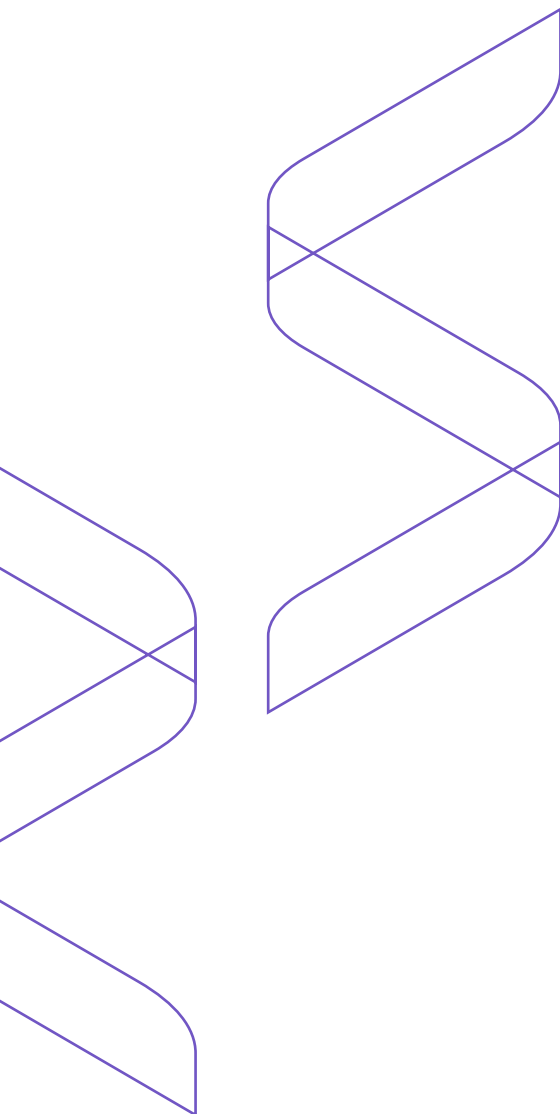
Government of **Western Australia**
North Metropolitan Health Service
Women and Newborn Health Service



Information booklet for mum and baby

Women and Newborn Drug and
Alcohol Service (WANDAS)





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Pregnancy care

WANDAS is a specialist team based at King Edward Memorial Hospital (KEMH), dedicated to caring for women experiencing drug and alcohol issues during pregnancy. The WANDAS team is made up of a number of health professionals including doctors, midwives, social workers, dieticians, mental health professionals and addiction specialists.

A pregnancy (antenatal) clinic runs every Friday morning at the East Wing Clinic with a booking clinic on a Wednesday morning where a midwifery-led assessment takes place. Postnatal clinics, for women after their baby has been born, are run weekly on Tuesday and alternate Wednesday.

You will be encouraged to start attending appointments in your first trimester (first 12 weeks) of pregnancy. Coming to WANDAS means you will have access to routine scans and tests, help with your diet, social support, parent education, psychiatric support, midwifery support and referrals to appropriate services including drug and alcohol treatment services and community support.

WANDAS will help you and your baby become and stay as healthy as possible during your pregnancy. We will support and care for you and monitor your pregnancy.

Talking about your drug use is an individual choice but being open will mean you get the best health care for you and your baby. You might have a number of concerns about being pregnant and there are lots of ways you can make sure you and your baby stay healthy. Sometimes women who are pregnant feel tired and overwhelmed, don't be afraid to ask for help. It's good to have people around who care about you and to seek as much advice as possible.

I am pregnant, what can I do?

The safest option for women who are pregnant is not to drink any alcohol. Binge drinking is especially harmful to both you and your baby. If you are using opiate drugs like heroin, we recommend you start a methadone or subutex program. If you are using stimulant drugs such as amphetamines or smoking cannabis or tobacco, you should consider stopping or decreasing your use.

WANDAS will help you to work out the safest way for you to reduce your use, use safely, stop using or go on a program during pregnancy. We can discuss your options and refer you to the appropriate services.

What if I am on prescribed medications or opioid substitution therapy?

Being stable on medications, including methadone and subutex, provides a better environment in your body for your baby to grow. If you are on medications, tell your prescribing doctor you are pregnant. Your doctor will monitor your dose regularly.

How do I get dosed in hospital?

WANDAS will only provide your medications when you are admitted to hospital. There is no need to arrange takeaway doses of methadone or subutex.

Managing your drug use

Sometimes friends and family can make you feel bad or guilty about your drug use or they may be using around you when you are trying to cut back or not use. If you are feeling pressured or finding it hard to make changes, you can talk to a drug and alcohol worker, addiction specialist, doctor or midwife about setting some realistic goals for yourself.

Keeping appointments for regular health checks

Sometimes it can be difficult to remember appointment dates and times but it's important that you come to the clinic regularly. WANDAS will send you text messages to remind you about your appointments.

Medication and nausea

If you have nausea or vomiting, you may need medication to help. If you are on methadone or subutex and you vomit your dose, you should contact your prescribing doctor. They will work out whether you need to be re-dosed.

Preparing for a new baby

How can I prepare for my baby's arrival?

Babies don't always arrive as planned, you may need to get to a hospital in a hurry.

- Organise transport to the hospital in advance. Some people put aside money for taxi fares, others arrange with friends or family to drive them to the hospital.
- If you think you are in labour or are worried about your pregnancy call the Maternal Fetal Assessment Unit at KEMH on (08) 6458 2199. If you think you are in serious trouble call 000 and ask for an ambulance.
- You may need to make urgent phone calls, so make sure that you have access to a phone or there is enough credit on your mobile.

Child Protection

WANDAS will not tell the Department of Child Protection (DCP) that you are on our program. DCP will not get involved just because you or your partner are using drugs or are on a methadone or subutex program. DCP works towards providing care and support that is in the best interests of the child.

Giving birth and going home

What happens to my baby after it is born?

We recommend that you stay in hospital for five days after the birth of your baby. Babies can experience withdrawal so it is better if this happens in hospital where there is support.

Unless there are complications you will stay together with your baby in the same room. During this time the hospital staff will help you learn how to care for and get comfortable with your new baby.

If your baby experiences withdrawal he or she may have to stay at the hospital for a few weeks but you will go home earlier.

Day 1	Day 2	Day 3	Day 4	Day 5
Birth of your baby Skin to skin, breastfeed Paediatric review of baby Admit to ward, orientation to room Vitamin K for baby Review by: • WANDAS • Social work • Psych med NAS commenced Breastfeeding assistance given Postnatal education	Medical review Paediatric review Review by: • WANDAS • Social work • Psych med • Physio NAS Breastfeeding and mothercraft assistance Discuss SIDS Postnatal education	Review by: • WANDAS • Social work • Psych med NAS – baby may be moved to SCN if withdrawing Baby: • Weight • Hep B • Guthrie Test • Bath Discuss contraception Discuss safety plan Education	Review by: • WANDAS • Social Work • Psych Med • Medical Contraception arranged Mothercraft independently Breastfeeding assistance NAS and paediatric review Discuss SIDS Postnatal education	Breastfeeding independently Mothercraft independently Postnatal education Baby weight Discharge medications Discharge home with follow up by: • VMS • CHN • GP Postnatal clinic appointment

What is infant withdrawal?

When your baby is born they are no longer receiving a supply of the drugs or medications from your blood or placenta. This can result in your baby experiencing withdrawal called Neonatal Abstinence Syndrome (NAS). It is not possible to predict which babies will withdraw, as the amount / dose is only one factor that influences whether NAS occurs and when it starts.

Other factors include:

- The drugs or medications used
- How it is taken and how often
- Genetics and environment
- The mother's general health and nutrition

Symptoms include:

- Unsettled behaviour and disturbed sleep patterns
- Frequent sneezing
- Tremors and fever
- Poor feeding
- Stiffness or tight muscles
- Vomiting and loose bowel actions

Infant withdrawal can begin a few hours after birth but most babies who have withdrawal will show signs a few days to a week later. Some babies experience a late withdrawal up to two weeks after the birth. All babies need to be monitored for withdrawal. The midwife will check your baby for symptoms and record them on a score chart like the one on page 8.

Signs and symptoms	Score				
Excessive high pitched cry (<5 mins)	2				
Continuous high pitched cry (>5 mins)	3				
Sleeps < 1 hour after feeding	3				
Sleeps < 2 hours after feeding	2				
Sleeps < 3 hours after feeding	1				
Hyperactive Moro reflex	2				
Markedly hyperactive Moro reflex	3				
Mild tremors when disturbed	1				
Moderate-severe tremor when disturbed	2				
Mild tremors when undisturbed	3				
Moderate-severe tremor when undisturbed	4				
Increased muscle tone	1				
Excoriation (eg chin, knees, elbows, toes, nose)	1				
Myoclonic jerks (twitching/jerking of limb/s)	3				
Generalised convulsion	5				
Sweating	1				
Hyperthermia (37.2 - 38.2°C)	1				
Hyperthermia (≤38.4°C)	2				
Frequent yawning (>3-4/interval)	1				
Mottling	1				
Nasal stuffiness	1				
Frequent sneezing (>3-4/interval)	1				
Nasal flaring	2				
Respiratory rate > 60/min	1				
Respiratory rate > 60/min with retractions	2				
Excess sucking	1				
Poor feeding (infrequency/incoordinate suck)	2				
Regurgitation (≥2 times during feed/post feed)	2				
Projectile vomiting	3				
Loose stools (curdy/seedy appearance)	2				
Watery stools (water ring on nappy around stool)	3				
Total score					
Date/Time					

If your baby has some withdrawal it can be upsetting, but there are things you can do to help. The midwives will support you in caring for your baby.

Babies usually need:

- Extra comforting
- Lots of small feeds
- A quiet environment
- Swaddling or being wrapped up in blankets

Some babies will have a more complicated withdrawal and require medication and care in the Special Care Nursery in hospital.

Having a baby in hospital for a long time and being away from your partner or other children is not easy. Our staff understand this can be a stressful and emotional time. Take comfort in the knowledge that we all have the same goal to help you and your baby through the withdrawal and go home as soon as possible. Please let staff know if you need more support.

Babies with infant withdrawal may be more unsettled when you take them home and may need more care and comforting. The symptoms of NAS may continue for longer than a week and possibly up to six months. Over this time the symptoms gradually decrease.

Talk to your midwife and Child Health Nurse about how you can make your baby more comfortable.

What supports are available after I leave the hospital with my baby?

WANDAS will see you and your baby in the postnatal clinic for up to three months after birth.

When you leave the hospital with your baby you will also be assigned a Child Health Nurse who is there to make sure you and your baby are well and that you have the support and assistance you need. Some women have said they are tired and overwhelmed after giving birth and that it is hard to remember what they were told at the hospital about caring for their baby. Don't be afraid to ask the nurse if you have any questions. The nurse will visit your home or you may have to visit a Child Health Clinic.

Before going home from hospital you will be given a purple Child Health Book. This book contains the location of your local Child Health Clinic. The Child Health Nurse will provide support and advice until your baby reaches school age. If you are concerned or worried about your baby's health tell your partner, WANDAS, GP, Child Health Nurse or Perth Children's Hospital.

Safe sleeping

Alcohol and / or drug use during pregnancy or after your baby is born increases the risk of sudden unexpected death in infancy.

DO NOT sleep with your baby in the same bed or couch. There is a risk the baby may fall out of the bed or be suffocated. **Information on safe sleeping for your baby will be given to you.**

Breastfeeding

If I am using, should I breastfeed my baby?

Breast milk is the best nutrition for your baby and is linked with all sorts of benefits for a baby's body and brain. It develops the baby's immunity, helping it fight off common illnesses and get stronger, another advantage is that it's free. Breastfeeding can also help you and your baby to bond. For some women, breastfeeding can be a challenge, you and your baby may require more assistance to breastfeed successfully. Your Child Health Nurse or a lactation consultant can help.

Drugs can be transferred to the baby via breast milk but the benefits of breastfeeding can outweigh the impact of the drug. For example, if you have been on a methadone program throughout your pregnancy and your baby is experiencing withdrawal, breastfeeding can ease your baby's withdrawal symptoms. It is safe to breastfeed if you are on methadone or subutex.

In the event of 'one off' use for most drugs, expressing and throwing out the breast milk for 24 hours is recommended before starting breastfeeding again.

If I am drinking alcohol, can I breastfeed my baby?

Babies are particularly sensitive to alcohol so if you are going to drink, try to breastfeed before having a drink. Try not to have more than one standard drink per day, like one small beer, glass of wine, or shot of alcohol, and wait at least three hours per drink before you breastfeed your baby. If you have one drink, wait three to four hours, and if you have two drinks, wait at least six hours before you breastfeed. As your baby might get hungry during this time, you may want to consider expressing some breast milk and storing it before you have a drink.

It is advised that you don't drink to the point where you become drunk and if you do drink more than one or two drinks regularly, you may need to consider feeding your baby with formula.

Looking after yourself and your baby

When it all gets too much, how do I manage being a parent?

Parenthood can be a great experience but it can also be difficult to cope with such a big change. Parenting support lines are a great way to get most of your questions answered without having to make appointments. There is a list of numbers at the back of this booklet that might be helpful. Getting out in the community and going to parenting support groups where you can meet people who have similar lives to you can also help you lessen your stress and learn strategies for coping. Spending time with your baby is incredibly important for his or her development, hold your baby, talk to him or her, sing and play and make silly faces. Remember to take time for yourself too, because you will be exhausted at times.

It's common for newborn babies to wake up often during the day and night, so try to get as much rest as you can when the baby is sleeping. When a baby cries all the time, or you have not had much sleep, you may feel sick, angry or out of control. Some parents deal with this situation by taking time out. If you need some time to yourself, make sure that your baby is somewhere safe like in their cot, close the door and take ten minutes to do something that relaxes you in another room. Have a cuppa or call a friend, as long as it is something that relaxes you. Don't be afraid to ask for help. Arrange for a family member or friend to help you when you are feeling tired or overwhelmed, or just need some support.

Young babies can get sick easily so keep a list of emergency numbers handy and make sure that you have access to a phone.

What do I do if I use?

If you are using drugs and have a baby, it is important to be organised so that the baby is well cared for. Some partners alternate their use so that there is always someone who is looking after the baby. You could also arrange for the baby to be cared for by a trusted family member or friend if you feel like you have to or want to use.

What if I have Hepatitis C?

The risk of transmitting Hepatitis C from mother to baby is quite low (about 5%). Your baby should be tested for Hep C when they are four months and 18 months old. A referral to your GP will be made for you and your baby.

Women with Hep C can breastfeed but should avoid breastfeeding if their nipples are cracked or bleeding. Getting lots of assistance with how to breastfeed helps prevent nipple damage. If you have blood in your milk, express and discard the milk until the area is healed.

For more information about Hep C, pregnancy and motherhood, contact Hepatitis WA on (08) 9328 8538 (metro) or 1800 800 070 (country).



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