



Vitamin K and Your Baby

Parent/Caregiver/Whānau Information - Neonatal Services

What is Vitamin K?

Vitamin K is a naturally occurring vitamin that we obtain from our food and is needed to make our blood clot properly. Without it we can bleed or bruise easily.

At birth and over the first few months of life, babies have low stores of Vitamin K which can make them vulnerable to bruising and bleeding.

Babies build up their Vitamin K stores gradually from the milk they drink:

- Vitamin K levels are higher in colostrum (first milk), so regular early breastfeeding is important.
- The hind milk of breast milk (last milk) has more Vitamin K so a baby should completely empty the breast before being switched to the other side.
- Infant formulas have Vitamin K added to them.

How can low levels of Vitamin K affect my baby?

Vitamin K Deficiency Bleeding (VKDB) is the term given to bleeding caused by low levels of Vitamin K which can occur in the first 24 hours, the first week of birth, or up to six to eight months of age.

VKDB is a rare condition that affects approximately 1 in 10,000 babies and its consequences are serious.

Bleeding may be seen or unseen and can be from the nose, stomach, gut, brain, skin or cord stump, or a haemorrhage in the brain which could be fatal. A baby with minor bleeds or bruising any time in the first six months or who is still jaundiced after two weeks with pale stools and dark urine should be seen immediately by an LMC or GP.

Which babies are more likely to develop VKDB?

A small number of risk factors for the development of VKDB have been identified and include babies who:

- Are premature
- · Had a mother who took medication in pregnancy, eg. for epilepsy
- Take inadequate feeds from the breast in the first few days
- Had a complicated delivery, eg. forceps or ventouse

However, bleeding can happen unpredictably in some babies and it is not possible to identify them as being at higher risk with any certainty.

How is Vitamin K given?

There are two ways of giving Vitamin K:

- 1. As a single injection into the muscle at the top of the baby's leg (intramuscular or IM) soon after birth. This is recommended, especially for babies known to be at risk of VKDB.
- 2. As three doses by mouth. The first dose given soon after birth, the second dose five days later and the third at six weeks. It is important that all three doses are given.

Is Vitamin K safe to give to my baby?

Possible side effects of IM Vitamin K include pain, infection or local reaction to the injection at the site (this is very rare).

Research has not established a risk of childhood cancer with IM Vitamin K and no link has been shown between childhood cancer and oral Vitamin K.

Key points

- A small number of babies are at risk of VKDB.
- Giving babies Vitamin K can prevent almost all cases of VKDB.
- Vitamin K injection is slightly more effective in preventing VKDB than the oral method and is therefore the recommended method of administration
- It is your choice whether or not to give Vitamin K to your baby.
- If you choose not to give your baby Vitamin K, it is important that you observe your baby carefully for any signs or symptoms of VKDB.

Further information

Pamphlet: 'Vitamin K, does my new baby need it?' Women's Health Action Trust: www.womens-

health.org.nz

Consensus Statement: 'Vitamin K'

New Zealand College of Midwives: www.nzcom.org.nz

Conditions, Tests & Treatments: 'Vitamin K'

Kidshealth: www.kidshealth.org.nz

Notes