

Vitamin K and your newborn baby

This leaflet explains why we advise extra vitamin K to be given to your baby once they are born. If you have any questions or concerns, please speak to your midwife, health visitor or GP who will be happy to help you.

What is vitamin K?

Vitamin K is a substance that is found naturally in the body. It plays an essential role in the normal process of blood clotting.

Why is it important for my baby?

Newborn babies have low levels of vitamin K in their blood and occasionally start to bleed. This is called Vitamin K Deficiency Bleeding (VKDB) in newborn babies. (It used to be called haemorrhagic disease of the newborn (HDN)).

If your baby develops VKDB in the first few months, they may have obvious bleeding:

- from their umbilical stump
- in their urine
- from their bottom
- from their skin and mucous membranes, for example, the nose and gums
- appearing as bruises on the skin
- there is also a risk of internal bleeding, for example, inside the head

Bleeding because of a vitamin K deficiency only occurs in a very small number of babies; approximately one in every 10,000. The impact of VKDB can be mild, or in rare cases (seven in 100 babies with VKDB) can lead to death. Approximately 30 out of 100 of babies with VKDB are left with a mental impairment because of bleeding to the brain.

Which babies are most at risk?

Babies are more at risk if:

- they were born prematurely (before 37 weeks)
- they were delivered by forceps, ventouse (suction cap) or caesarean section
- they are bruised after birth
- they had breathing difficulties at birth
- you are on certain drugs during your pregnancy, such as anticonvulsants (medication for epilepsy)
- your baby is circumcised.

Babies who are entirely breastfed are more likely to develop VKDB compared to babies that are bottle-fed. This is because manufacturers add vitamin K to formula milk. However, although formula milk contains higher levels of vitamin K than breastmilk, this is not a reason to bottle feed your baby. Breastfeeding is always the best choice for your baby.

Why should my baby be given vitamin K?

Even if your baby is not at a higher risk of developing VKDB, they could still develop a vitamin K deficiency. About one third of babies with VKDB do not have any of the risk factors listed above.

VKDB is completely preventable by giving your baby extra vitamin K after they are born. It is strongly recommend that all newborn babies receive vitamin K soon after birth to prevent VKDB, until they build up their own supplies.

How is the vitamin K given?

The best method of giving your baby vitamin K is an injection soon after the birth. The injection is given by a midwife into the muscle of your baby's thigh.

If you don't want your baby to have the injection, vitamin K can be given by mouth, unless your baby cannot accept feeds by mouth.

Are there any drawbacks to vitamin K supplements?

In the early 1990s it was suggested that vitamin K injections might increase the risk of leukaemia (a type of cancer of the blood) in children, however, there have been many more reports disproving this. Current well-informed scientific opinion is that there is no link.

Are there any alternatives?

The alternative is to not give vitamin K. This increases the risk of the baby getting VKDB from one in 1,000 up to 100 in 1,000.

Will further doses be necessary?

As an injection, a single dose of vitamin K is enough.

Given by mouth, three doses are necessary:

- the first dose soon after birth
- a second dose when your baby is around seven days old (given by your midwife), and
- a third dose when your baby is about six weeks old (given by your health visitor or GP).

If you are bottle-feeding your baby formula milk, they will only need the first two doses, as vitamin K is added to all formula milk.

Does my baby have to be given vitamin K?

As a parent you have the right to refuse. However, we strongly encourage you to allow your baby to have this simple treatment. If you do not wish your baby to have vitamin K, please discuss this with your midwife or paediatrician in order to get further information before making your decision.

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch.

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

t: 111

NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk

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Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, please get in touch.

t: 0800 731 0319 **e:** members@gstt.nhs.uk **w:** www.guysandstthomas.nhs.uk/membership

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