

What is NAS?

Neonatal Abstinence Syndrome (NAS) is a group of symptoms that some babies experience **after birth** if they were exposed to **opioids or other substances** during pregnancy.

When a baby is in the womb, they receive drugs (like heroin, methadone, codeine, or oxycodone) through the placenta. After birth, the baby is suddenly cut off from those substances—and their little body may go into **withdrawal** as it adjusts.

Common Substances Linked to NAS

- Opioids (e.g., heroin, methadone, buprenorphine, codeine, oxycodone)
- Sometimes: benzodiazepines, alcohol, antidepressants, or stimulants
- Babies exposed to **multiple substances** may show more severe symptoms

▲ Signs of NAS

Not all babies show symptoms, but common signs include:

System Affected Possible Symptoms

CNS (nervous system) Tremors, high-pitched cry, irritability, trouble sleeping

Feeding Poor suck, vomiting, slow weight gain

Digestive Loose stools, dehydration

Autonomic Sweating, sneezing, fever

Other Stiff or floppy tone, frequent yawning or hiccups

Symptoms usually appear within 24–72 hours of birth, but can be delayed for up to a week or more.

How is NAS Treated?

 Comfort-based care is always the first step: holding, swaddling, skin-to-skin, quiet rooms

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- Some babies need medications (like morphine or clonidine) to manage withdrawal
- Babies are usually monitored in hospital for 5–7 days or longer, depending on severity
- The **Finnegan scoring tool** is often used by medical staff to track symptoms

What Carers Can Do

- Follow the baby's care plan and attend medical appointments
- Use gentle, consistent routines—quiet, dark rooms, slow transitions, soft voices
- Try soothing strategies: swaddling, skin-to-skin, rocking, white noise
- Be patient—withdrawal symptoms can take weeks to settle
- Document behaviours (feeding, sleep, crying) to help professionals monitor progress
- Ask for help: your child health nurse, caseworker, or paediatrician can support you

Market Important to Know

- NAS is not the baby's fault—it's a medical condition caused by substance exposure
- These babies are **not "addicted"**—they are withdrawing from substances
- With the right care, love, and early intervention, babies with NAS can thrive
- Your calm, responsive care plays a huge role in their healing

You don't have to be perfect—just present, consistent, and kind. That's what these babies need most.



References

Hudak, M. L., & Tan, R. C. (2012).

Neonatal Drug Withdrawal. Pediatrics, 129(2), e540-e560.

https://doi.org/10.1542/peds.2011-3212

Royal Women's Hospital Melbourne.

Neonatal Abstinence Syndrome Clinical Practice Guidelines.

https://www.thewomens.org.au

Wachman, E. M., et al. (2019).

The opioid-exposed newborn: Assessment and pharmacologic management. Clinics in Perinatology, 46(2), 219–234.

https://doi.org/10.1016/j.clp.2019.02.007

Fraser Health Authority (Canada).

Caring for Babies Exposed to Opiates: A Guide for Parents and Caregivers.

https://www.fraserhealth.ca

Substance Abuse and Mental Health Services Administration (SAMHSA).

A Collaborative Approach to the Treatment of Pregnant Women with Opioid Use Disorders.

https://ncsacw.samhsa.gov

National Institute on Drug Abuse (NIDA).

Substance Use in Pregnancy and Neonatal Outcomes.

https://nida.nih.gov

Eat, Sleep, Console (ESC) Care Model.

Yale New Haven Children's Hospital.

https://www.ynhh.org