

## BLOOD TESTS FOR YOUR BABY

Very occasionally it might be suggested that a blood test for jaundice be performed on your baby. Some jaundice (yellowing of the skin) is commonplace in babies, however if your baby is particularly sleepy and not feeding well a blood test to measure the bilirubin in the blood can be useful to decide whether your baby requires further treatment.

You will also be offered a blood test for your baby when s/he is about five days old. It involves pricking his/her heel and taking a small sample of blood onto "blotting" paper.

The tests are to identify a range of rare, but serious conditions for which treatments are available. You will be offered a test for some, or all, of the following conditions:

Phenylketonuria, affects 1: 10,000 babies. These babies cannot utilise part of a protein in their food. As a result this substance builds up in the blood and can lead to brain damage unless corrected.

Congenital Hypothyroidism affects 1: 4,000 babies and is caused by underactivity of the thyroid gland in the baby's neck. This gland fails to provide enough of the hormone thyroxin, which is essential for normal growth and development.

Cystic Fibrosis is a genetic disease that affects a number of organs in the body (especially the lungs and pancreas) by clogging them with thick, sticky mucus, early diagnosis can ensure that appropriate treatments are given.

Sickle cell disorder affects 1 in 2,500 babies born in the UK. These are inherited disorders that affect the red blood cells which can change to a sickle shape and become stuck in the small blood vessels.

About 1 in 2,500 babies born in the UK has cystic fibrosis (CF). This inherited condition can affect the digestion and lungs. Babies with CF may not gain weight well, and have frequent chest infections.

About 1 in 10,000 babies born in the UK has MCADD. Babies with this inherited condition have problems breaking down fats to make energy for the body.

Occasionally a sample will need to be repeated, this does not necessarily indicate that something is wrong; your midwife, health visitor or G.P. will contact you should the test give a positive result and follow-up tests will be suggested. Clearly it is worrying to even think that these disorders might affect your baby, but it is highly unlikely that the test will be positive. Early detection and treatment will prevent the harmful effects and allow your baby every chance of normal development.

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