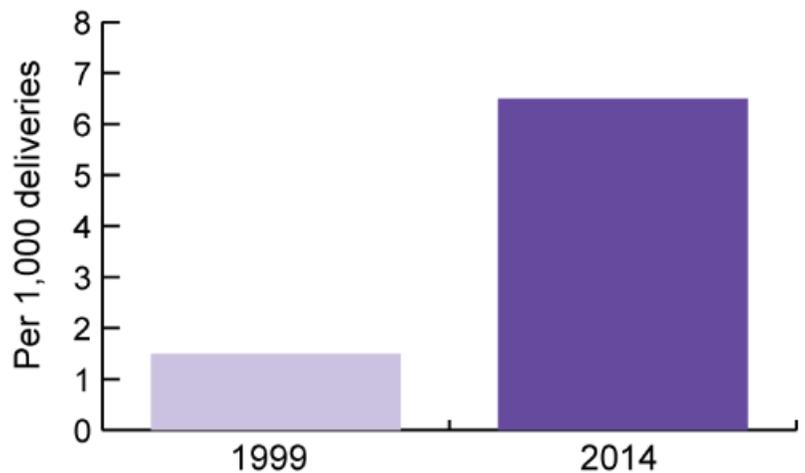


Neonatal Abstinence Syndrome Awareness

Neonatal Abstinence Syndrome (NAS) is a group of conditions caused when a baby withdraws from certain substances (most often opioids), from which they were exposed to in the womb before birth (marchofdimes.org). NAS may also result from the use or abuse of prescription drugs, stimulants such as amphetamines or cocaine, antidepressants, depressants, and nicotine. TCHP recognizes Neonatal Abstinence Syndrome with hopes to increase awareness, education and encourage providers and pregnant women about the dangers of using opioids during pregnancy.

America is currently in the state of a public health crisis surrounding opioid abuse, which has led to devastating consequences including overdoses and, subsequently, opioid use among pregnant women has increased during this epidemic. As such, the rate of babies born with NAS has drastically increased since 2013. Additionally, the Texas Maternal Mortality Task Force found that drug overdose, typically opioids, was the leading cause of maternal mortality for women typically happening after 61 days postpartum (hhs.gov).



Opiod use disorder rates at delivery from 1999 to 2014.

Source: (CDC)

Symptoms of NAS may vary depending on the type of drug use, the last use of the drug, and whether the baby is full-term. Withdrawal symptoms may start between 24 hours to 10 days after birth. The most common symptoms of NAS in full term babies include:

- Excessive and high-pitched crying
- Sleeping difficulties
- Overactive reflexes
- Seizures
- Trembling
- Fever or unstable temperature
- Excessive sweating
- Excessive yawning
- Diarrhea

In addition to withdrawal symptoms, babies may also experience complications such as birth defects, seizures, poor growth and others. Babies with NAS may require medications to relieve symptoms or complications. Morphine, methadone, and buprenorphine are most commonly used in treating severe NAS withdrawal symptoms. Fluids may be administered to babies via IV to prevent dehydration, and higher calorie formulas may be given to babies who need extra calories to help them grow.

Data from the 2016 [Healthcare Cost and Utilization Project](#):

- Seven newborns were diagnosed with NAS for every 1000 newborn hospital stays.
- The cost of a hospital stay for a newborn with NAS was \$9,500 in 2016, compared with \$1,000 for other newborn hospital stays
- The average hospital length of stay for a newborn with NAS was 12 days in 2016, compared with 2 days for other hospital stays
- From 2004 through 2013, the neonatal abstinence syndrome was responsible for a substantial and growing portion of resources dedicated to critically ill neonates in NICUs nationwide

It is important to note that NAS is 100% preventable. Women who are looking to get pregnant should speak to their healthcare provider. Providers are encouraged to develop a treatment plan for opioid use disorder and other health conditions. Below are available resources to assist you and your patients with screenings, outreach and support:

- Outreach, Screening, Assessment and Referral (OSAR) centers are available in all 11 Health and Human Service regions in Texas. Please visit the OSAR [website](#) to find local resources and other assistance.
- Patients who need support may contact the Pregnant, Postpartum Intervention [program](#) in their area.
- [Improving Outcomes for Families Impacted by Neonatal Abstinence Syndrome](#) toolkit.

Screening Brief Intervention and Referral to Treatment (SBIRT)

SBIRT is an approach to the delivery of early intervention and treatment to people with substance use disorders and those at risk of developing these disorders SBIRT services can be performed by the following providers: Physicians, registered nurses (RNs), advanced practice nurses (APRN), physician assistants (PA), psychologists, licensed clinical social workers (LCSW), licensed professional counselors (LPC), certified nurse midwives (CNM), outpatient hospitals, federally qualified health centers (FQHC) and rural health clinics . ([SAMHSA](#))

SBIRT Codes for Reimbursement:

- H0049 - Alcohol and/or drug screening
- G2011 - Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., audit, DAST), and brief intervention, 5-14 minutes
- 99408 - Alcohol and/or substance (other than tobacco) abuse structured screening (eg, AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes

This information is found in the Behavioral Health and Case Management Services Handbook of the TMPPM, Section 8.5. The link to the handbook is [here](#).

Additional SBIRT resources are available [here](#).