

Vitamin K for Newborns

Vitamin K is a critical part of the formation of several clotting factors that prevent bleeding. Newborns are at risk for Vitamin K deficiency because they do not receive enough Vitamin K from the placenta during pregnancy, and because they do not yet have a sufficient amount of special bacteria in their intestines that help make Vitamin K. Babies receiving breast milk are especially at risk due to the limited amount of Vitamin K in the breast milk.

Vitamin K deficiency in the newborn can lead to bleeding within the first week after birth (early Vitamin K deficiency bleeding), as well as bleeding between 2-12 weeks of age (late Vitamin K deficiency bleeding). Infants may bleed from the skin, nose, mouth, umbilicus, gastrointestinal tract or the site of circumcision, or bleed inside the brain, which may result in permanent brain damage, seizures, and death.

WHICH IS THE BEST WAY FOR NEWBORNS TO RECEIVE VITAMIN K?

Since 1961, the American Academy of Pediatrics (AAP) has recommended that Vitamin K be given as a single injection soon after birth. This helps prevent both early and late Vitamin K deficiency bleeding.

Although Vitamin K may be given orally (by mouth) and may help reduce the risk of early bleeding, studies have shown that oral Vitamin K is not as effective as Vitamin K injection in reducing the risk of late Vitamin K deficiency bleeding. Even if multiple doses or oral Vitamin K are used in the newborn's first month, cases of bleeding in the brain due to late Vitamin K deficiency have been reported. For this reason, the AAP continues to recommend the use of Vitamin K by injection for all newborns after birth and considers the administration of injectable Vitamin K to be safe and effective.

For more information about Vitamin K, please talk directly with your healthcare provider.

Sources: "Policy for Vitamin K in Newborns," *Pediatrics*, Vol 94, No. 1, 1994

Contact your pediatrician's office for more information
or to schedule an appointment, **650.498.6500**