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Your Baby's Health

Get medical help immediately anytime your baby becomes unresponsive or difficult to rouse, has a fit or seizure, a fever or a rash.

Keeping your baby healthy is one of the most important parenting tasks.

Immunisation

Immunisations may be something you are already aware of and comfortable with, or they may be one of the questions and concerns that you have as a new parent.

It's important to know that immunisation programs have made a massive difference to the survival and health of babies and children – they are one of the safest methods and the single most effective method in preventing disease and death to date*. Since immunisations were first introduced in Australia in the 1930's, deaths from preventable infectious diseases have fallen by 99%.

Because the evidence supporting immunisation is so compelling, Tresillian fully supports current health policies for the immunisation for babies, children and adults.

Sometimes babies can experience a side effect following an immunisation. These are usually mild, and may result in your baby being more irritable or unsettled for a short period of time, or developing a mild fever, or redness and swelling at the injection site. You can help your baby to be comfortable by offering more cuddles and more frequent feeds. If you are at all concerned, seek further advice from your nurse or doctor.

**(Royal Australasian College of Physicians, 2012)*

Thrush – White patches on your baby's tongue or inside the mouth; a mild fungal infection. Easily treated; see your doctor.

Cradle Cap – A build up of a thick, pale, yellowish oily scale on the scalp. It's very common, and easily treated. Wash and massage your baby's head regularly, but avoid picking at it.

Milia – Tiny white spots on your baby's nose, cheeks or chin in the first few weeks or months. Newborn milia – dead skin cells that have collected under the skin and should eventually disappear on its own. See your family doctor if the spots become red or swollen.

Eczema – Skin dryness and infantile eczema are common in the first 6 months; babies with eczema need special care to reduce their skin dryness and avoid things that might irritate their skin.

Tongue-tie – When some babies the skin under their tongue has not yet separated from floor of the mouth, so the tongue is "tied", restricting movement. Most of the time this won't cause any difficulty feeding and will resolve over time.

Fever – Infections can cause a fever of 38°C+ in babies. Whilst a fever is a normal response to infection, it can be unpleasant and uncomfortable for your baby. They may become irritable and hard to settle, or lethargic and sleepy. Most infections causing fever are mild and resolve on their own, it is important to seek help earlier for your baby if they are less than 3 months old.

Diarrhoea – The infections that lead to diarrhoea can be very easily spread from person to person. Maintain good hygiene, particularly hand washing, to reduce the spread, and keep your baby away from other people who have diarrhoea and/or vomiting.

Constipation – In the early days and weeks, breast-fed babies may have quite soft-liquid, frequent bowel motions that are generally not smelly, a few times each day. Once the baby gets to about 6-8 weeks, their bowel motions may become less frequent – some babies will still 'go' every day or more, while other babies may take up to a week before they poo. Babies who drink formula milk will have more regular and predictable bowel motions, and they will smell a lot worse than a breast-fed baby! If you are concerned, visit your doctor or child and family health nurse.

Sun exposure

Your baby's skin is delicate and very sensitive to the sun. Keep your baby's face and eyes out of direct sunlight, and cover baby's skin with clothing and a hat; keep in the shade, and avoid having the pram outside during peak UV light times. Download The Cancer Council's SunSmart app for more info. Sunscreens are generally not widely recommended for babies under 6 months.

Birthmarks

Many babies will have some sort of redness or marking in the first few days after birth, as well as moulding of their head, due to the physical pressures as they travel down the birth canal during birth. This is very common. Some babies have more distinctive birthmarks that linger. These may need treatment with a specialised laser to remove or reduce them.

- **Stork marks** These common pink/red patches are present at birth, most often seen on a baby's face, head or neck. Stork marks are caused by a concentration of blood vessels, and generally fade in the first 3 years.
- **Mongolian spots** This mark is a blue/purple coloured patch that may occur on a baby's bottom or lower back. These marks are present due to a larger concentration of skin pigment cells, and generally fade during infancy-early childhood.
- **Port wine stains** As the name suggests, these marks are pink-red-purple marks, typically seen on the face or other parts of the baby's body from birth, and persist – these marks do not fade and can become darker over time.

See a doctor if YOUR BABY....

- has a fever and is less than 3 months
- has had a fever for 3 days+
- has a chronic illness and has a fever
- has a headache
- is vomiting or has difficulty swallowing or breathing
- has a rash
- has drowsiness, sleepiness or irritability
- has travelled overseas recently
- has had contact with someone with a serious infection
- has neck stiffness, or if light is hurting their eyes

Our friendly team at Tresillian are here to support your family!

Book a visit to Tresillian:

Visit tresillian.org.au, fill in the short online contact form and one of our Nurses will call you back

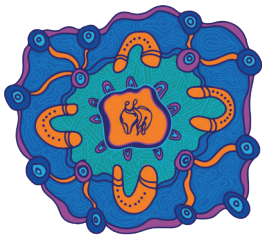


Ask your local Health Professional, Child & Family Health Nurse, GP or early parenting support service to refer you and your child



Tresillian Parent's Help Line
FREECALL 1300 272 736

In Tasmania
FREECALL 1300 827 282
1300 TAS BUB



Acknowledgement of Country

Tresillian acknowledges Aboriginal and Torres Strait Islander People as the First Peoples of Australia, the Traditional Owners and Custodians of the land in the countries on which we live and work in NSW, the ACT and TAS. We pay our respects to Aboriginal and Torres Strait Islander Elders past and present and acknowledge all Aboriginal and Torres Strait Islander people living in the communities we serve.

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