



NEWBORN EMERGENCY TRANSPORT SERVICE: INFORMATION FOR PARENTS

Meconium aspiration syndrome
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MECONIUM ASPIRATION SYNDROME

What is meconium aspiration?

Meconium is the first bowel motion that a baby passes. Meconium aspiration occurs when a baby passes meconium when still in the womb and then breathes in (aspirates) the meconium-stained amniotic fluid into his lungs. This can occur when he is still in the uterus or just after he is born. The baby develops a type of pneumonia, which can result in the baby developing breathing problems.

Which babies develop meconium aspiration?

Babies who are born after their due date are most at risk but meconium aspiration can occur earlier in any babies who are stressed in the uterus.

How do we treat meconium aspiration?

If your amniotic fluid has meconium mixed in and your baby is born not breathing then the delivery team may pass a tube into the airway of your baby to suck out the meconium from the upper airways. Some meconium cannot be removed because it is too far down. If your baby has already started to breathe at birth, he may have already inhaled some meconium.

If your baby shows signs of breathing problems he will need to be admitted and observed in the nursery. He may need breathing support and this may include oxygen and continuous pressure via nasal prongs (CPAP).

Babies with meconium aspiration can get very sick. If your baby's breathing worsens, he may need to be placed on a breathing machine. We may also give some medicine (surfactant) through the breathing tube into his lungs, to make them less stiff. Babies can also develop high blood pressure in the lungs, and a special medicine may be required to treat this. We will also start some antibiotics, and give fluids and sugar through his veins.

How long will my baby be sick?

Most babies with this condition will survive and will improve over 4-7 days. Some babies may need extra oxygen for up to 2-3 weeks.

Are there any complications?

Babies with this condition are at risk of developing a pneumothorax. A pneumothorax is when air gets trapped between the chest wall and the lung and stops the lung from inflating. We will treat this by putting a chest tube in to drain the trapped air and allowing the lung to inflate properly (see separate leaflet on pneumothorax.)

Are there any long-term problems?

Babies with this condition usually grow up without any long-term respiratory problems. If your baby was stressed in-utero and needed a lot of resuscitation then we may need to observe his development closely.

This information is intended as a guide only. If you have any concerns, please feel free to discuss with the NETS doctor retrieving your baby.