

Patient information

Vitamin K

Introduction

The Department of Health strongly recommends that all newborn babies are given a Vitamin K supplement at birth. This is to avoid the rare but serious (and sometimes fatal) disorder called Vitamin K Deficiency Bleeding (VKDB for short).

Vitamin K

Vitamin K is a substance that is found naturally in our body. It plays an essential role in the normal process of blood clotting. We get vitamin K from the foods we eat.

Babies are born with very small amounts of vitamin K stored in their bodies and when fed entirely on milk they are unable to build these stores up. The good bacteria that produce vitamin K are not yet present in the newborn's gut.

VKDB occurs when babies cannot stop bleeding because their bodies do not have enough vitamin K to form a clot. The risk of bleeding is effectively removed when extra Vitamin K is given to babies at birth.

The risk to babies

Bleeding due to vitamin K deficiency only occurs in a very small number of babies; approximately 1 in every 10,000. The impact can be mild, or in rare cases cause damage that cannot be repaired and may lead to death. Giving Vitamin K can prevent this bleeding problem.

Babies at risk

Certain babies are at extra risk of Vitamin K Deficiency Bleeding and should be given an injection of Vitamin K. These babies are:

- Babies who are preterm (born early, less than 37 weeks)
- Sick babies
- Babies born by forceps or ventouse delivery where bruising might occur
- Babies whose mothers are taking anticonvulsant or anticoagulant (warfarin) drugs
- Babies who have severe difficulty breathing at birth
- Babies who need operations around the time of birth
- Babies at risk of malabsorption (for example those with a family history of liver disease or cystic fibrosis)

Even if your baby is not at a higher risk of developing VKDB, they could still develop a vitamin K deficiency. About one third of babies with VKDB do not have any of the risk factors above. VKDB is completely preventable by giving your baby extra vitamin K after they are born. It is strongly recommended that all newborn babies receive vitamin K soon after birth in order to prevent this disease until they can build up their own supplies.

How vitamin K is given

Consultant paediatricians (specialist children's doctors) at the West Suffolk Hospital believe that it is best for all babies to have one injection of Vitamin K soon after birth.

Injection

Vitamin K can be given by a single injection

If you choose for it to be given by injection, a midwife or a healthcare professional usually gives it as just one dose at birth. This is given into the muscle of your baby's thigh.

Oral vitamin K

If you choose the oral method, a regime of either two or three doses will be required, the third dose will depend on whether you are breast or artificially feeding your baby.

The Vitamin K regime by mouth involves:

- One dose of Vitamin K is given to the baby at birth or soon after by the midwife or health care professional.
- A second dose will be given between 4 - 7 days by the midwife or health care professional. If your baby is being exclusively breast fed at one month of age, a third dose will be required, your midwife will return to administer this. This third dose is not required for bottle fed babies; this is because Vitamin K is added to formula milk.

Please note, it is important to finish the course of oral Vitamin K or the baby will not be protected.

Controversy about vitamin K

Concerns about a possible link between the use of vitamin K injection and childhood cancer were raised by a study in the early 1990's. Several large studies have examined this issue. A review of data from the UK Children's Cancer Study Group in 2003 found no evidence that neonatal vitamin K administration, irrespective of the route, influenced the risk of children developing leukaemia or any other cancer.

Evidence suggests that it is not harmful to newborn babies. Vitamin K injection has been given to babies in this country since 1958 and is still the only sure way to prevent VKDB.

Further questions

Please speak to your community midwife if you have any further questions or discuss with the midwife caring for you during and after your birth.

References

Centres for Disease Control and Prevention. Vitamin K Deficiency Bleeding (2019). [cdc.gov/ncbddd/vitamink](https://www.cdc.gov/ncbddd/vitamink)

DOH (1998)

Vitamin K for Babies

Department of Health (DOH)

Guys' and St Thomas' Vitamin K and your newborn baby (2018)

Guys' and St Thomas' NHS Foundation Trust

NICE guidelines (2016) Postnatal Care.
www.nice.org.uk/guidance/postnatalcare

Women's Health (2004)

Vitamin K for Newborns
www.womens-health.co.uk

RCM (1999)
Position Paper N0 13b – Vitamin K
Royal College of Midwives (RCM) July 1999

West Suffolk NHS Foundation Trust is actively involved in clinical research. Your doctor, clinical team or the research and development department may contact you regarding specific clinical research studies that you might be interested in participating in. If you do not wish to be contacted for these purposes, please email info.gov@wsh.nsh.uk. This will in no way affect the care or treatment you receive.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo)
<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



© West Suffolk NHS Foundation Trust