# Introduction

- **Problem**: The prevalence of NAS is increasing along with the need for evidence-based practice (EBP) interventions to treat NAS.
- **NAS**: Infants exposed to opioids and other drugs in utero and experiencing withdrawal symptoms shortly after birth.
- **Purpose**: To determine if nonpharmacological interventions included in UTMC’s NAS treatment policy reflect EBP.

## Review of Literature

<table>
<thead>
<tr>
<th>Intervention</th>
<th>Effects</th>
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| **Swaddling / Kangaroo Care**                    | - Decreases pain  
- Decreases excessive crying  
- Increases sleep time  
- Promotes bonding between mother/baby |
| **Rooming-In**                                    | - Decreases length of stay  
- Decreases pharmacological treatment |
| **Decreased Stimulation**                         | - No research studies found                                           |
| **Breastfeeding**                                 | - Decreases length of stay  
- Decreases pharmacological treatment  
- Evidence shows drug exposure via breast milk is too low to be harmful |

## Current Policy

Includes:
- Swaddling
- Decreased stimulation – noise level reduced, lights dimmed, speak softly
- Rooming-in

## Recommendations

- Continue to use swaddling & rooming-in.
- Add breastfeeding & kangaroo care to policy.
- Conduct studies to examine the effects of decreased stimulation.