Kona Birth & Midwifery Services

INFORMED CONSENT NEWBORN ERYTHROMYCIN

Why is Erythromycin given to my newborn?

Erythromycin is routinely given to newborns and is considered standard of care or standard of practice. Prophylaxis administration in the eyes of the newborn can greatly decrease the risk of blindness resulting from accidental exposure to gonorrhea and/or chlamydia by an infected mother. Although it is routine to screen women prenatally, generally at the initial visit, for sexually transmitted disease such as gonorrhea and chlamydia, there is always an assumption of continued sexual activity either by the mother or her partner during the pregnancy. Since gonorrhea and chlamydia do not always exhibit symptoms a mother can be infected during pregnancy and not be aware of the infection resulting in exposure to the newborn at birth. Hawaii, as do most states, requires routine administration of antibiotic eye ointment to all newborns.

What is Erythromycin?

The most common medication currently used is Erythromycin. Although less of an irritant than its predecessors, Erythromycin can still cause blurry vision, redness and burning in the newborn eye. Erythromycin can also lead to further infections due to the disruption of the good bacteria already naturally occurring. Erythromycin is a preventative medication, not a curative one.

Benefits:

- •Gonorrheal and chlamydial infections are reduced, especially in mothers not screened or unaware of exposure
- •It is inexpensive and less irritating than prior treatments

Risks:

- •There are adverse effects including irritation, redness, swelling and other infections
- •Continued use may increase the resistance of the bacteria
- •Erythromycin is not 100% effective in prevention

Are there alternatives?

Yes, there are alternatives.

One alternative to routine treatment often over looked is to wait to see if the newborn shows sign of any eye infection and treat on occurrence rather than assumption.

If you want to take a more presumptive or proactive approach you can consider the following as alternatives to Erythromycin:

Silver Nitrate

Breastmilk or Colostrum

Povidone-iodine

I have read and understand this information. I have been informed of my choice and have had an opportunity to ask questions. I am aware of the risks vs. benefits of prophylactic eye ointment and am responsible for and have freely chosen to take the following action:

Mother'	s Signature	Date			
	I have chosen to use an alternative to routine ca	are.			
	I decline eye treatment for my newborn.				
	I have chosen to have eye ointment administered	ed and I will obtain a p	rescription from a physicial	n prior to my hom	e birth.
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Resource: www.evidencebasedbirth.com