



Eliminating oral vitamin K for newborns

Issue

All newborns are required to receive a dose of vitamin K at birth to prevent vitamin K deficiency bleeding (VKDB), a potentially fatal disease. All states require this dose, and the only completely effective delivery method is as an intramuscular (IM) injection. Only six states, including Oregon, allow practitioners and parents to elect an oral dose of vitamin K, which is not as effective as the IM injection.

Background

Vitamin K is essential to blood clotting. Children are born with a vitamin K deficiency because vitamin K is not absorbed through the placenta from the mother. Vitamin K slowly develops in infants over their first six months of life, mostly from intestinal bacteria.

This vitamin K deficit causes a syndrome called VKDB, a hemorrhagic newborn disease. This excessive bleeding often occurs in the brain and can cause lifelong brain damage or even death.

Fortunately, vitamin K deficiency can be easily addressed with a dose of vitamin K at birth. The American Academy of Pediatrics, the U.S. Centers for Disease Control, and the World Health Organization all recommend IM vitamin K at birth because it is the only completely effective means to prevent VKDB.

Recent research shows that the oral dose of vitamin K is not fully effective. This puts newborns at risk if their practitioners or parents choose an oral dose of Vitamin K.

Proposed Solution

Whereas current law allows practitioners to give infants IM or oral vitamin K at birth, HB 2644 requires practitioners to give infants a vitamin K IM injection at birth. If parents object to vitamin K by injection, practitioners can offer oral vitamin K. In accordance with current law, parents can object to a vitamin K supplement at birth by signing a statement that the procedure conflicts with their religious practices.

Cost

There is no cost associated with this change.

Questions?

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