



MECONIUM ASPIRATION

WHAT IS MECONIUM ASPIRATION?

Meconium is the first feces of a newborn. It is thick, sticky, and dark green in color. Meconium aspiration results when a fetus or newborn inhales meconium, which can block the airways and irritate the lungs.

WHAT ARE THE SYMPTOMS OF MECONIUM ASPIRATION?

Meconium can stain the amniotic fluid a dark greenish color. The infant's skin may be stained greenish if the meconium passed quite a while before delivery. The infant may exhibit rapid, labored, or absent breathing, a bluish skin color from lack of oxygen, limpness, or post-term weight loss or peeling skin.

WHAT CAUSES MECONIUM ASPIRATION?

Meconium aspiration generally happens during labor if the fetus becomes distressed. The meconium can be released into the amniotic fluid which the infant then inhales in the process of gasping for air. Inhaled meconium can cause difficulty breathing and cause inflammation of airways and lungs. It may also occur prior to the onset of labor, or at the time of delivery.

HOW IS MECONIUM ASPIRATION DIAGNOSED?

Fetal monitoring can show slow heart rate. Streaking or staining of the infant or amniotic fluid indicate the meconium has passed. A laryngoscope may be used to examine the vocal cords, in addition to tests that analyze blood gases; chest x-rays, and stethoscope examination.

HOW IS MECONIUM ASPIRATION TREATED?

Immediate suction of the newborn's mouth, nose, and throat removes amniotic fluid that contains meconium. Deep suctioning of the trachea, as well as a saline wash, may remove particularly thick meconium. If problems develop, the infant may be administered antibiotics to fight infection, chest physiotherapy to help loosen secretions, and mechanical ventilation.

SPECIAL CONSIDERATIONS:

Meconium aspiration most often occurs in post-term infants - those over 40 weeks gestation.

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