

## Your choice

It is your choice whether your baby should have Vitamin K and how. Discuss your choice with your lead maternity carer (LMC) and include your choice in your birth plan.

If you are worried about giving Vitamin K, a paediatrician will be happy to discuss your concerns. Ask your LMC to make an appointment for you.

## Signs of Vitamin K deficiency bleeding

You should see your doctor or midwife urgently if your baby has any of the following warning signs:

- Unusual or unexpected bruising or tendency to bruise easily
- Any bruising around the face or head (sometimes present at birth)
- Bleeding from the umbilical cord, nose or from the heel prick test
- Blood in poo or nappy
- Irritability, vomiting or pale skin (this may be due to internal bleeding)
- If your baby is over three weeks old and there is prolonged or worsening jaundice, or pale poo and dark urine.

## Further information

For further information search for 'Vitamin K' on Kids Health [www.kidshealth.org.nz](http://www.kidshealth.org.nz), or within the references listed below.



## References

National Health and Medical Research Council (2010), Joint statement and recommendations on Vitamin K administration to newborn infants to prevent VKDB.

New Zealand College of Midwives (2000) Consensus statement – Vitamin K.

**Te Whatu Ora**  
[Health New Zealand](#)  
Waitematā

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**Vitamin K**  
KONAKION® MM Paediatric

Information for parents

## About Vitamin K

Vitamin K is an essential part of our blood clotting system. Vitamin K is made in our intestines from food.

Your baby does not have the capacity to make Vitamin K until after they are born. As your baby grows they develop the necessary bacteria in their intestines to make enough of their own Vitamin K.

Too little Vitamin K puts your baby at risk of a serious disease called Vitamin K deficiency bleeding.

It is recommended that all newborn babies receive a dose of Vitamin K shortly after birth to prevent serious bleeding.

One study from 1992 suggested that injection of vitamin K may be linked with a childhood cancer, however many and more recent studies have shown that Vitamin K does not cause childhood cancers.

The following professional organisations recommend Vitamin K for newborns:

- The Paediatric Society of New Zealand
- The New Zealand College of Midwives
- The New Zealand College of General Practitioners

## Vitamin K deficiency bleeding

Vitamin K deficiency bleeding (VKDB) is a serious condition that can cause internal bleeding, brain damage or death.

Vitamin K deficiency bleeding occurs most often in the first 7 days of life, but can occur up to 8 months in babies with bowel or liver problems.

Some babies are more at risk, especially those who are born prematurely, are sick, or whose mothers are taking certain medicines (especially medications for epilepsy, clotting and treatment for TB).

The risk of your baby developing Vitamin K deficiency bleeding is about **1 in 1439**.

However, if your baby receives Vitamin K the risk reduces to less than **1 in 100,000**.



## How Vitamin K is given

The recommended way to give Vitamin K is as a single injection.

An alternative is to give it as drops into baby's mouth at birth, 5-7 days and 4-6 weeks, but this method is less reliable.

## Vitamin K injection

A single injection is given into your baby's thigh muscle, usually in the first 2-3 hours after birth. This is the most effective way of preventing Vitamin K deficiency bleeding.

There may be a little redness, swelling or bleeding at the injection site and your baby may cry briefly when the injection is being given, although many do not.

## Vitamin K by mouth

Vitamin K can also be dropped into your baby's mouth; this is less effective because:

- Vitamin K is not absorbed as well by mouth
- The protection does not last as long so all three doses are needed
- Babies may spit out or may vomit after the dose. If this occurs the dose must be repeated
- Giving Vitamin K by mouth is only suitable if your baby has no risk factors for Vitamin K deficiency bleeding.