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Neonatal Hyperbilirubinemia

Ictère du nouveau-né : évaluation de l'acupuncture

1. Systematic Reviews and Meta-Analysis

2. Clinical Practice Guidelines

⊕ positive recommendation (regardless of the level of evidence reported)
Ø negative recommendation, (or lack of evidence)

2.1. Queensland Clinical Guidelines (Australia) 2022 Ø

Neonatal jaundice. Queensland Clinical Guidelines. 2022:40p.https://www.health.qld.gov.au/__data/assets/pdf_file/0018/142038/g-jaundice.pdf

There are treatments which do not reduce neonatal hyperbilirubinaemia. For these, is no evidence of benefit and but possible harm to the baby . [Acupuncture]

2.2. Queensland Clinical Guidelines (Australia) 2019 Ø

Neonatal jaundice. Queensland Clinical Guidelines. 2019:40p. [196986].

There are treatments which do not reduce neonatal hyperbilirubinaemia. For these, is no evidence of benefit and but possible harm to the baby. [Acupuncture]

2.3. National Institute for Health and Care Excellence (NICE, UK) 2016 Ø

Jaundice in newborn babies under 28 days. Clinical guideline [CG98]. London (UK): National Institute for Health and Care Excellence (NICE). 2016.

1.10 Other thérapies. 1.10.1 Do not use any of the following to treat hyperbilirubinaemia: agar, albumin, barbiturates, charcoal, cholestyramine, clofibrate, D penicillamine, glycerin, manna, metalloporphyrins, riboflavin, **traditional Chinese medicine, acupuncture**, homeopathy,

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