

Tremor is a common manifestation of neonatal abstinence syndrome and is likely related to changes in the neurotransmitter levels (e.g., increased norepinephrine, acetylcholine).

Increased Moro Reflex

[Moro-monster Up-arrow](#)

The Moro reflex is an infantile reflex characterized by involuntary abduction of the arms followed by involuntary adduction of the arms and crying in response to a rapid lowering of the infant. An exaggerated Moro reflex is characterized by a hyperactive response with excessive abduction at the shoulder and extension at the elbow. Neurotransmitter changes likely contribute to this.

Tachypnea

[Tac-P-lungs](#)

Cholinergic symptoms (e.g., congestion), irritability, crying, and withdrawal from opioids (which normally decrease respiratory rate) lead to tachypnea, which is defined by abnormally increased breathing.

Management

Maternal Screening

[Screen-door Pregnant-woman](#)

Maternal screening for substance use and early screening of newborns who are at risk is the key to the prevention and effective management of this condition.

Nonpharmacologic Therapy

[Nun-pharmacological](#)

Nonpharmacologic therapy is mainly targeted at alleviating symptoms and preventing complications. Gentle vertical rocking and caring in a quiet room is used for neonates with hyperirritability. Positioning and swaddling can be used to prevent motor hyperactivity in neonates with tremors.

Opioids

[Poppy-droid](#)

Opioids can be used for the treatment of neonatal abstinence syndrome if symptoms are severe (e.g., severe irritability, severe diarrhea). Oral morphine sulfate is the preferred medication.