Calderdale and Huddersfield
NHS Foundation Trust

Patient Information Leaflet

SDEC Patient Information – New Jaundice

Diagnosis: Jaundice (New Onset)

Following your visit to the Same Day Emergency Centre (SDEC), you have been found to have jaundice. This is a condition where the skin and eyes turn yellow due to a build-up of bilirubin in the body.

What is Jaundice?

Jaundice occurs due to a build-up of bilirubin, a yellow pigment produced when red blood cells break down.

Additional information:

- Red blood cells live for about 120 days, then break down to form bilirubin
- The liver processes bilirubin and makes it water-soluble so it can be excreted in bile
- Bilirubin gives stools their normal brown colour
- Jaundice occurs when bilirubin builds up in the blood and tissues

What Are the Symptoms of Jaundice?

- Yellowing of the eyes (often first sign) and skin
- Dark urine
- Pale stools
- Itching (pruritus)
- Fatigue

Other symptoms may include:

- Abdominal pain
- Nausea or vomiting
- Weight loss
- Fever (depending on cause)

What Causes Jaundice?

Causes are best grouped into four key categories:

1. Blood-related (Pre-hepatic)

- Increased breakdown of red blood cells (haemolysis)
- Examples:
  - Sickle cell disease
  - Thalassaemia
  - Malaria

2. Liver cell problems (Hepatic)

- Liver unable to process bilirubin properly

Causes include:

- Hepatitis (viral, alcohol-related, autoimmune)
- Cirrhosis (scarring of liver)
- Drug or toxin-related liver injury
- Genetic conditions (e.g. Gilbert's syndrome – common and usually harmless)

3. Bile duct problems inside the liver

- Issues with small bile ducts affecting bile flow

4. Blockage outside the liver (Post-hepatic / Obstructive)

- Gallstones
- Pancreatic or bile duct tumours
- Bile duct strictures

What Tests or Investigations Are Needed?

To identify the cause, you may need:

Blood tests (Liver Function Tests – LFTs)

Important:

- LFTs can detect liver problems before symptoms appear
- The pattern of results helps identify the cause

Other Tests

- Urine test (bilirubin levels)
- Ultrasound scan (first-line imaging)
- CT or MRI scan
- Liver biopsy (in selected cases)

What Are the Treatment Options?

Treatment depends on the underlying cause:

1. Medical Treatment

- Treat infections (e.g. hepatitis)
- Stop or adjust medications
- Manage liver disease

2. Procedures

- Endoscopic procedures (e.g. ERCP) to relieve obstruction
- Stenting if required

3. Surgery

- For gallstones or tumours

What Complications Should I Be Aware Of?

- Liver failure
- Infection (e.g. cholangitis)
- Bleeding problems (due to clotting issues)
- Malnutrition

Important:

- Jaundice itself is a sign, not a disease – identifying the cause is essential

What Is the Outlook (Prognosis)?

- Depends on the cause
- Some causes are temporary and reversible
- Others may require long-term treatment

- Early diagnosis improves outcomes

When Should I Seek Help Urgently?

Call 999 or attend A&E immediately if you have:

- Fever with jaundice (possible cholangitis - a life-threatening condition)
- Severe abdominal pain
- Confusion or drowsiness
- Vomiting blood or black stools
- Rapid worsening of symptoms

Lifestyle Advice

- Avoid alcohol
- Maintain hydration
- Eat a balanced diet
- Avoid unnecessary medications (especially those affecting the liver)

Who Should I Contact for Other Concerns?

Contact SDEC if you:

- Have worsening symptoms
- Are awaiting results
- Have concerns about diagnosis

Contact your GP if you:

- Require follow-up
- Have mild symptoms
- Need medication review

If GP is closed, call NHS 111

Contact information

If you have concerns after leaving SDEC, please contact:

SDEC / Hospital Advice Line: _____

GP: _____

Out of hours: NHS 111

In an emergency, call 999.