SYMPTOM

Jaundice causes

Jaundice is yellowing of the skin or eyes caused by bilirubin buildup.

WHAT IT FEELS LIKE
Often painless, sometimes itchy or generally unwell

WHERE IT IS FELT
Skin and whites of the eyes

MOST COMMON CAUSES
Liver inflammation, gallstones, Gilbert syndrome

WHEN IT IS URGENT
New yellow skin or eyes needs same-day medical advice

USUALLY LASTS
Days to weeks, depending on the underlying cause

SEE A DOCTOR IF
Dark urine, pale stools, or itching persists without yellowing

Overview

Jaundice is yellowing of the skin or the whites of the eyes. It happens when a yellow substance called bilirubin builds up in the body.

Bilirubin forms when old red blood cells are broken down. The liver normally processes it and releases it into bile, a digestive fluid that passes into the intestine. Jaundice can develop if too much bilirubin is produced, the liver cannot process it properly, or bile cannot drain normally.

Jaundice is a symptom, not a disease. It has many possible causes, from a harmless inherited condition to liver inflammation or a blocked bile duct. New jaundice in an adult or older child should be assessed promptly.

What it may feel or look like

Yellowing may first be noticeable in the whites of your eyes. Changes in skin colour can be harder to see on brown or black skin, so check the eyes in natural light if possible.

Jaundice itself is often painless. Other symptoms depend on its cause and may include:

Eating large amounts of foods rich in beta-carotene, such as carrots, can make skin look

yellow-orange. This usually does not turn the whites of the eyes yellow and is not jaundice.

- Dark brown urine
- Pale, grey, or clay-coloured stools
- Itchy skin
- Tiredness, nausea, or reduced appetite
- Pain under the ribs on the right side
- Fever or chills
- Unplanned weight loss

Common causes

Gilbert syndrome is a common inherited condition that affects how the liver processes bilirubin. It can cause mild, occasional yellowing, especially during illness, dehydration, fasting, stress, or lack of sleep. It does not usually damage the liver.

Liver inflammation or injury can prevent bilirubin from being processed normally. Possible causes include viral hepatitis, heavy alcohol use, and reactions to medicines or herbal products. Fatty liver disease does not usually cause jaundice unless liver damage is advanced or another problem is present.

Gallstones can block the tube that carries bile from the liver and gallbladder into the intestine. This may cause jaundice, dark urine, pale stools, and pain in the upper right or middle abdomen.

Less common causes include increased breakdown of red blood cells, autoimmune liver disease, inherited blood or liver conditions, and inflammation of the pancreas. Narrowing or growths affecting the liver, pancreas, gallbladder, or bile ducts can also block bile flow.

Some causes need urgent treatment. A blocked bile duct that becomes infected may cause jaundice with fever, chills, and upper abdominal pain. Sudden severe liver injury may cause jaundice with unusual sleepiness, confusion, easy bleeding, or swelling.

Newborn jaundice has different causes. It often develops because a young baby's liver is still learning to process bilirubin, but babies still need timely assessment because very high bilirubin levels can be harmful.

When to seek medical care

Arrange same-day medical advice if you or an older child develops new yellowing of the skin or

eyes. Do not wait for it to become more noticeable. Dark urine, pale stools, widespread itching, or ongoing upper abdominal discomfort also need prompt assessment.

Go to an emergency department or call emergency services if jaundice occurs with:

Contact a maternity or newborn care service promptly if a baby looks jaundiced. Jaundice during the first 24 hours after birth needs urgent assessment. Seek immediate care if a jaundiced baby is difficult to wake, feeds poorly, has unusual movements, or seems very unwell.

Routine follow-up may be appropriate if you already have a confirmed condition such as Gilbert syndrome and the symptoms follow your usual pattern. Book an appointment if episodes become more frequent, last longer, or occur with new symptoms.

- Confusion, collapse, or unusual difficulty staying awake
- Severe or rapidly worsening abdominal pain
- Fever or shaking chills with abdominal pain
- Vomiting blood or passing black, tar-like stools
- Severe weakness, breathing difficulty, or uncontrolled bleeding

How the cause is found

A healthcare professional will ask when the yellowing began and whether you have pain, fever, itching, urine or stool changes, weight loss, recent travel, or possible exposure to hepatitis. They may ask about alcohol, prescribed medicines, non-prescription products, and supplements.

Blood tests can measure bilirubin and substances that show how the liver and bile ducts are working. A complete blood count can look for anaemia or increased red blood cell breakdown. Tests may also check blood clotting, infection, or specific liver conditions.

An ultrasound can look for gallstones, widened bile ducts, or changes in the liver. Depending on the findings, further scans or a procedure to examine the bile ducts may be needed.

Treatment and self-care

Treatment targets the underlying cause rather than the yellow colour itself. For example, a blocked bile duct may need a procedure to restore drainage. An infection may require antibiotics like amoxicillin or doxycycline , while a medicine-related liver injury may require a

clinician to change or stop the responsible product.

Do not stop a prescribed medicine on your own unless emergency services advise you to. Avoid starting herbal remedies or "liver detox" products, as some can worsen liver injury or affect test results.

Until you have been assessed, avoid alcohol, drink enough fluid if you can, and eat small meals if nausea affects your appetite. Ask a healthcare professional before using pain medicines because some may be unsuitable when liver problems are possible.

Newborn jaundice may only need monitoring, but some babies need phototherapy. This uses special light to help the body remove bilirubin. Sunlight is not a safe substitute.

What to expect

How long jaundice lasts depends on its cause and how quickly that cause can be treated. Yellowing from a temporary illness or a passing gallstone may improve over days or weeks. Gilbert syndrome can cause brief episodes that return from time to time.

The colour may take time to fade even after blood tests begin improving. Follow-up tests may be needed to confirm that bilirubin and liver measurements are returning toward normal.

Seek further medical advice if jaundice worsens, returns unexpectedly, or continues despite treatment. New pain, fever, confusion, bleeding, or vomiting should not wait for a routine follow-up visit.

Common questions

Does jaundice always mean liver failure?

No. Many conditions can raise bilirubin, including gallstones, Gilbert syndrome, hepatitis, and increased red blood cell breakdown. Tests are needed to identify the cause.

Is jaundice contagious?

Jaundice itself is not contagious. Some causes, including certain viral hepatitis infections, can spread between people.

Can jaundice go away without treatment?

Some mild episodes, such as those caused by Gilbert syndrome, can settle without treatment. Because new jaundice can also signal a condition needing care, it should not be assumed to be harmless.

Can jaundice cause itching?

Yes. Reduced bile flow can allow bile substances to build up in the body, causing widespread itching. Persistent or severe itching should be discussed with a healthcare professional.

Sources

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