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LED Phototherapy Blankets —Bridging the Neonatal Jaundice Care Gap with Family-Centered Innovation

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LED Phototherapy Blankets—Bridging the Neonatal Jaundice Care Gap with Family-Centered Innovation

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Abstract

Neonatal jaundice remains the most prevalent clinical condition affecting newborns globally, impacting approximately 60% of term and 80% of preterm infants within the first week of life. For more than five decades, conventional phototherapy has served as the gold standard for preventing kernicterus secondary to severe hyperbilirubinemia. Despite its proven efficacy, the traditional hospital-based phototherapy model presents substantial public health challenges, particularly in developing countries such as Indonesia. Dependence on fixed, high-cost equipment within tertiary facilities often necessitates maternal–infant separation, disrupts early bonding and breastfeeding, and contributes to inequities in healthcare access based on geographic and socioeconomic factors. Technological advancements in Light Emitting Diode



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(LED) phototherapy blankets represent a paradigm shift toward family-centered neonatal care. By incorporating blue-green light sources into flexible, portable devices, these blankets enable effective treatment while maintaining skin-to-skin contact and direct breastfeeding. This approach supports maternal–infant attachment, enhances lactation success, and may facilitate bilirubin reduction through improved enteral feeding. From a public health perspective, LED phototherapy blankets promote decentralized care delivery by enabling deployment in primary healthcare facilities and remote settings, thereby reducing referral burden and treatment delays. Local innovations such as the BLUI Blanket demonstrate promising clinical efficacy and adherence to thermal safety standards, supporting their role as safe and effective first-line interventions. Furthermore, implementing home-based phototherapy programs for uncomplicated cases can reduce hospitalization costs, minimize the risk of nosocomial infections, and optimize hospital resource allocation. In conclusion, LED phototherapy blankets constitute a transformative innovation that integrates clinical effectiveness, psychosocial well-being, and health system efficiency. Their broader adoption has the potential to enhance equitable neonatal care delivery while preserving the integrity of the mother–infant dyad.

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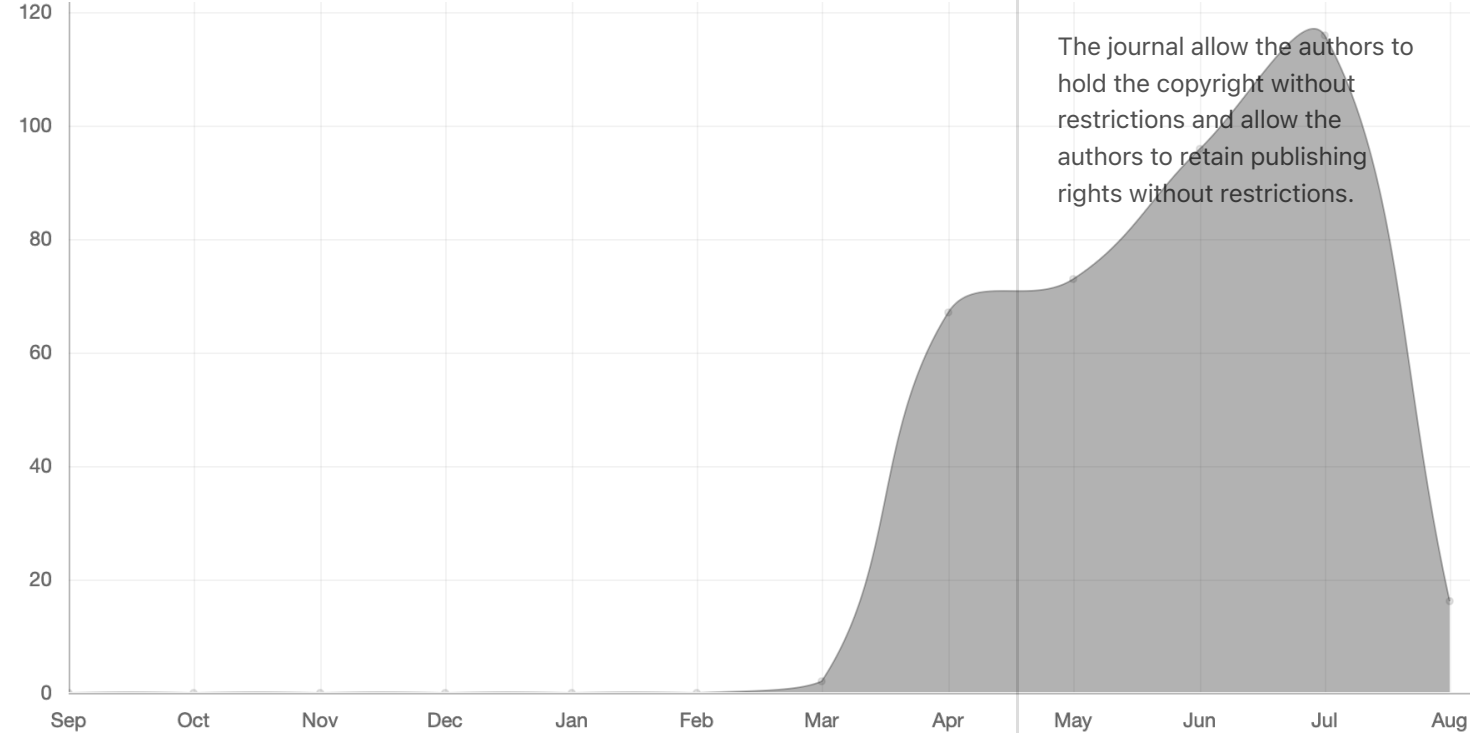
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EDITORIAL

LED Phototherapy Blankets—Bridging the Neonatal Jaundice Care Gap with Family-Centered Innovation

Selimut Fototerapi LED—Solusi Inovatif Berbasis Keluarga dalam Mengatasi Kesenjangan Tatalaksana Ikterus Neonatorum

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Neonatal jaundice is the most common condition affecting newborns worldwide, with 60% of term and 80% of preterm infants developing jaundice within the first week of life.^{1,2} For over 50 years, conventional phototherapy has been the standard treatment to prevent kernicterus—a form of permanent brain damage caused by severe hyperbilirubinemia.^{3,4} However, from a public health standpoint, its care model poses significant challenges. The dependence on hospital facilities, high costs, and separation of mother and baby create access issues and psychosocial impacts that can no longer be ignored, especially in developing countries like Indonesia.⁵

Traditional phototherapy methods, characterized by large, immobile illumination equipment, inherently create a treatment approach focused on technology rather than patient-centered care. Neonates receiving such therapy are necessarily confined within incubation units, often leading to maternal-infant separation during the crucial early postpartum period. The effects of this separation go beyond simple logistical issues; such practices significantly disrupt the vital maternal-neonatal bonding process, hinder the establishment of successful breastfeeding, and increase parental psychological distress. From a healthcare system perspective, this treatment method places a substantial burden on tertiary care facilities and results in noticeable disparities in access to treatment, where geographic location and socioeconomic status become determining factors in the availability of potentially life-saving medical care.

Technological innovation in the form of Light-Emitting Diode (LED) phototherapy blankets offers more than just a technical upgrade; it represents a paradigm shift.⁶ By integrating an effective blue-green light source into a flexible, portable blanket, therapy can be administered while the infant remains in its mother's arms.⁷ This fundamental change transforms the care model into one that is family-centered—a practice globally recognized as a best practice in neonatal care.

The public health benefits of phototherapy blankets are significant: (1) **Decentralized Care and Equal Access:** Their portability and lower operating costs enable these devices to be used in primary healthcare settings, such as community health centers (Puskesmas) in remote areas. This greatly reduces the time to treatment, cuts unnecessary hospital referrals, and ensures equal

access for rural infants who previously faced higher risks. Local innovations like the BLUI (Blue Light Universitas Indonesia) Blanket, which has undergone advanced development to meet thermal safety standards, enhance this potential; (2) **Supporting Mother-Infant Bonding and Breastfeeding:** By allowing skin-to-skin contact and direct breastfeeding without disrupting treatment, phototherapy blankets actively promote the foundations of long-term infant health. Effective breastfeeding is essential for nutrition and also helps lower bilirubin levels by encouraging gut motility; (3) **Health System Efficiency:** In many countries, phototherapy blankets have facilitated the shift to home-based phototherapy programs for uncomplicated cases. This approach has been shown to significantly lower inpatient costs, reduce the risk of hospital-acquired infections, and free up hospital capacity for critically ill neonates.

The successful deployment of this technology depends on standardizing devices and establishing comprehensive clinical guidelines. Evidence from existing clinical research supports the effectiveness of these devices. A preliminary clinical study of the BLUI Blanket showed a significant decrease in bilirubin levels in patients with neonatal jaundice, confirming its use as a therapeutic treatment.⁸ This evidence, along with advances in thermal regulation mechanisms,⁹ provides strong justification for adopting this technology as a safe and effective first-choice therapeutic option.

In conclusion, the LED phototherapy blanket is more than just an alternative treatment option; it is a groundbreaking advancement in neonatal care.⁶ It serves as a technological link that not only treats jaundice but does so while respecting the family unit, empowering parents, and actively promoting health equity for all newborns, no matter where they are. Emerging evidence from evaluations of new, affordable portable phototherapy devices further supports the feasibility of increasing access to effective phototherapy in resource-limited settings.^{8,10}

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