SYMPTOM

Jaundice

Jaundice is yellowing of the skin or eye whites caused by bilirubin buildup

WHAT IT FEELS LIKE
My skin or eye whites look yellow

WHERE IT IS FELT
Skin and whites of the eyes

MOST COMMON CAUSES
Gallstones, liver inflammation, medicine effects

WHEN IT IS URGENT
Any new yellowing of the skin or eye whites

USUALLY LASTS
Until the bilirubin problem improves; timing follows the cause

SEE A DOCTOR IF
Previously assessed yellowing persists or returns

Overview

Jaundice is yellowing of the skin or the whites of the eyes. It is a symptom, not a disease.

The yellow colour comes from a substance called bilirubin . Bilirubin forms when old red blood cells break down. The liver normally processes it and sends it into bile, a digestive fluid that leaves the body through the bowel.

Jaundice can develop if too much bilirubin is being made, the liver cannot process it properly, or bile cannot drain. Possible causes range from temporary or inherited conditions to liver inflammation and blocked bile ducts.

New jaundice should be assessed promptly. Its appearance alone cannot show what is causing it.

What it may feel or look like

Yellowing often appears first in the whites of the eyes. On darker skin, it may be easier to see in the eyes, inside the mouth, or on the palms and soles. Check in natural light when possible.

Jaundice itself may not hurt. Other symptoms depend on the cause and may include:

Eating large amounts of foods rich in carotene, such as carrots, can make skin look yellow-orange. This usually does not turn the whites of the eyes yellow and is not true jaundice. A clinician can help tell the difference.

- Dark brown or tea-coloured 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

Gallstones and blocked bile flow: Gallstones can move into the tube that carries bile from the liver and gallbladder to the bowel. A blockage may cause jaundice, dark urine, pale stools, itching, or upper abdominal pain.

Liver inflammation: Viral infections, alcohol-related injury, and fat buildup in the liver can interfere with bilirubin processing. Symptoms may include tiredness, nausea, abdominal discomfort, or dark urine, although some people have few other symptoms.

Medicines and supplements: Some prescription medicines, non-prescription products, and herbal or bodybuilding supplements can injure the liver or affect bile flow. Do not stop prescribed medicine without medical advice unless emergency services tell you to do so.

Gilbert syndrome: This common inherited condition affects how the liver processes bilirubin. It can cause mild, temporary yellowing during illness, fasting, dehydration, stress, or strenuous exercise. It does not usually damage the liver, but new jaundice still needs assessment rather than being assumed to be Gilbert syndrome.

Less common causes include rapid breakdown of red blood cells, autoimmune liver or bile-duct disease, inherited disorders, and narrowing of a bile duct. Growths affecting the liver, gallbladder, bile ducts, or pancreas can also obstruct bile flow.

In newborn babies, jaundice is often related to the liver still maturing. A baby's bilirubin level may need checking because very high levels can be harmful.

When to seek medical care

Seek same-day medical advice for any new yellowing of your skin or eye whites. This remains important if the yellowing is mild, painless, or comes and goes.

Seek urgent same-day assessment if jaundice occurs with:

Call emergency services for jaundice with confusion, unusual difficulty staying awake, fainting, vomiting blood, black stools, or severe abdominal pain. These symptoms can occur with serious liver problems, bleeding, or an infected bile-duct blockage.

A newborn needs prompt medical assessment if jaundice appears during the first 24 hours after birth. Urgent assessment is also needed if a jaundiced baby is hard to wake, feeds poorly, has a fever, develops a high-pitched cry, or seems floppy or unusually stiff.

For routine follow-up, book an appointment if previously assessed jaundice does not clear as expected, returns, or is joined by ongoing itching, appetite loss, or weight loss.

- Fever, chills, or worsening upper abdominal pain
- Repeated vomiting or difficulty keeping fluids down
- Very dark urine or pale stools
- New easy bruising or bleeding
- Rapidly worsening yellowing

How the cause is found

A clinician will ask when the yellowing began and whether you have pain, fever, itching, urine changes, or pale stools. They may ask about alcohol, recent travel, infections, pregnancy, past gallstones, family history, and all medicines or supplements you use.

Blood tests can measure total bilirubin and its different forms. Liver tests help show whether the pattern suggests liver-cell injury or reduced bile flow. A blood count can look for anaemia or increased red blood cell breakdown. Tests of blood clotting and proteins made by the liver may show how well the liver is functioning.

An ultrasound can look for gallstones, enlarged bile ducts, or changes in the liver. Depending on the findings, further testing may include CT or MRI scans, infection tests, or tests for immune-system and inherited conditions. A procedure called ERCP may be used to examine and treat a blocked bile duct.

Treatment and self-care

Treatment is directed at the cause rather than the yellow colour itself. A blocked bile duct may need a procedure to remove a stone or improve drainage. Liver inflammation may need monitoring, supportive care, or treatment for a specific infection or immune condition. Medicine-related liver injury may require a clinician to change or stop the responsible product.

While waiting for assessment:

Do not try to treat jaundice with diet alone. A low-fat meal may reduce gallbladder discomfort for some people, but it cannot clear a blocked bile duct.

Itching may improve once the underlying problem is treated. If it is affecting sleep or damaging your skin, ask about safe treatment rather than starting antihistamines or supplements on your own.

- Avoid alcohol
- Do not use "liver detox" products or new supplements
- Follow medicine labels and avoid taking extra doses
- Drink enough fluid if you are not vomiting
- Note changes in urine, stool colour, pain, or temperature

What to expect

How long jaundice lasts depends on why bilirubin has built up and how quickly that problem improves. Yellowing from a temporary illness or Gilbert syndrome may settle over days. A blockage or ongoing liver condition may continue until the cause is treated.

Bilirubin levels and other blood tests may be repeated to check whether they are improving. Some people need imaging or specialist follow-up even after the yellow colour begins to fade.

Return for medical review if jaundice worsens, comes back, or new symptoms develop. Follow any planned testing even if you feel well, because bilirubin and liver-test changes can remain after visible yellowing improves.

Common questions

Is jaundice contagious?

Jaundice itself is not contagious. Some infections that can cause liver inflammation may spread between people, but gallstones, Gilbert syndrome, and most other causes do not.

Can jaundice happen without liver disease?

Yes. Bilirubin may rise because red blood cells are breaking down quickly or because of Gilbert syndrome. Jaundice can also result from a blockage outside the liver. Testing is needed to identify the pattern.

Does yellow skin always mean jaundice?

No. Lighting, tanning products, and carotene-rich foods can change skin colour. True jaundice usually affects the whites of the eyes as well.

Can jaundice go away without treatment?

Some causes improve without specific treatment, but others require prompt care. New jaundice should not be watched at home without medical advice.

Sources

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