

# The Cradle Coach ACADEMY

## Continued Education The In's and Out's of Babies with Reflux

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Holding my baby with  
reflux is kind of like  
cuddling a live  
grenade.

som<sup>ee</sup>cards  
user card



## What Is Reflux?

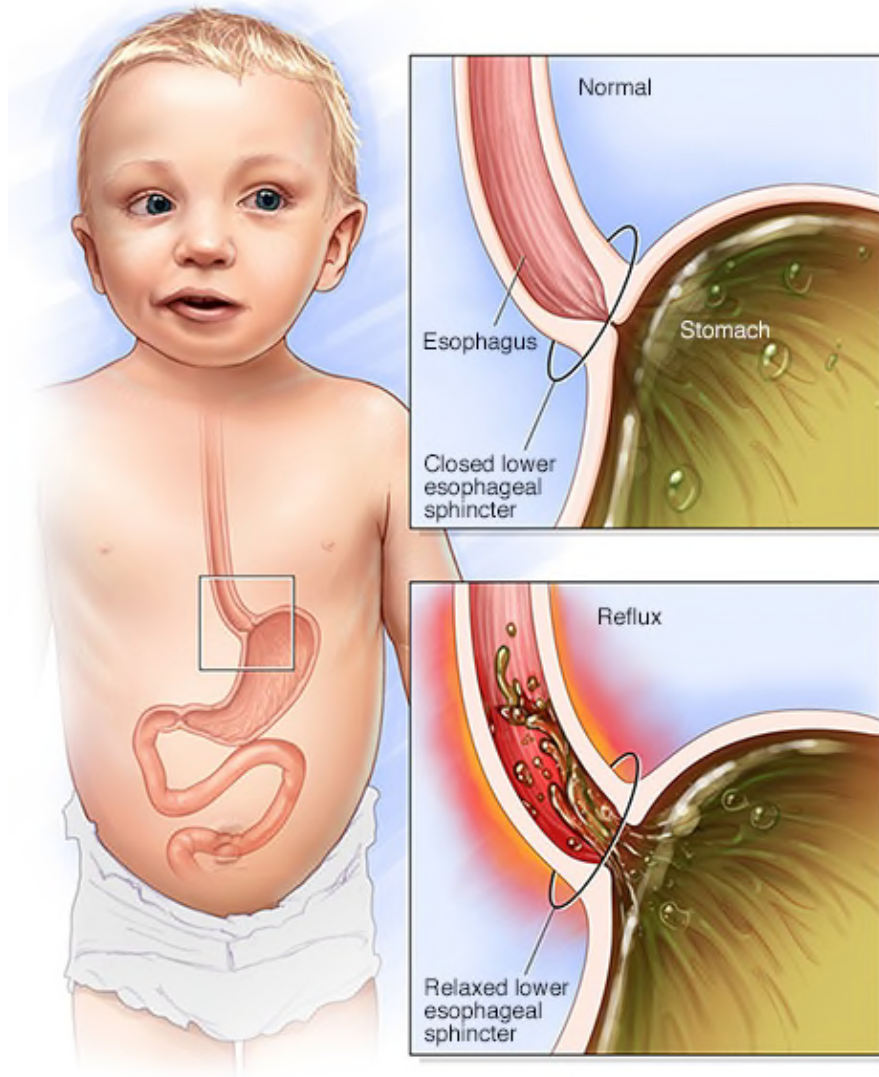
Infant reflux occurs when food backs up (refluxes) from a baby's stomach, causing the baby to spit up.

There are two types of reflux:

(GER) the condition is rarely serious and becomes less common as a baby gets older. It's unusual for infant reflux to continue after age 18 months.

(GERD) on the other hand, is a chronic condition that often needs intervention to prevent damage to babies' esophagi and mouths.

# What is the Cause of Reflux?



The ring of muscle between the esophagus and the stomach — the lower esophageal sphincter (LES) — is not yet fully mature. That allows stomach contents to flow backward. Eventually, the LES will open only when your baby swallows and will remain tightly closed at other times, keeping stomach contents where they belong.

# Symptoms of Reflux

- Constant crying
- Pulls legs up while crying - seemingly in pain
- Consistently Spits up forcefully, causing stomach contents to shoot out of his or her mouth (projectile vomiting)
- Spits up green or yellow fluid
- Spits up blood or a material that looks like coffee grounds
- Arching the back while crying
- Constant hiccups
- Refuses food
- Disturbed sleep
- Is unusually irritable after eating
- Chronic cough



# Infant Reflux Treatment

- Infant reflux usually clears up by itself and doesn't last longer than 18 months.
- Eliminating dairy products, beef or eggs from mom's diet if breast-feeding, to test if the baby has an allergy.
- Switching the type of formula mom feeds baby.
- Using a different size of nipple on baby bottles. A nipple that is too large or too small can cause the baby to swallow air.
- Reflux medications aren't recommended for children with uncomplicated reflux. However, a short-term trial of an acid-blocking medication — such as ranitidine for infants ages 1 month to 1 year or omeprazole magnesium (Prilosec) for children ages 1 year or older — might be recommended if your baby:
- Has poor weight gain and more-conservative treatments haven't worked
- Refuses to feed
- Has evidence of an inflamed esophagus
- Has chronic asthma and reflux



# What is “Silent Reflux”?

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Babies with Reflux



# Silent Reflux

While spitting up is considered a classic sign of reflux, there is such a thing as “silent reflux”. If your baby seems fussy and uncomfortable after eating (especially if you lay him down after eating), or if you hear lots of tummy gurgling after your baby eats, silent reflux may be to blame.

- Medical intervention may be necessary because the same complications can arise as in other forms of gastro-oesophageal reflux; however, it may be harder to recognize without any noticeable vomiting.
- If they feed as a means of soothing their pain i.e are comfort feeders as well, then poor growth may not be an issue, and they may in fact have huge weight gains. This can also contribute to a delay in diagnosis.
- Some people mistakenly believe the term ‘silent reflux’ refers to a child who does not cry with their reflux, but this is not the case.



# Why Does Reflux Interfere with Sleep?



Babies with GERD/Reflux are in fairly constant pain and discomfort. The stomach acid that comes up repeatedly after feedings can seriously irritate the lining of the baby's throat, and cause a feeling of constant heartburn.

Laying the baby flat on his/her back to sleep (which is the safest way for babies to sleep, in order to reduce the risk of SIDS) tends to make the symptoms of reflux and GERD even worse. So really, the best and safest sleep position for your baby is also one of the worst positions for the child's acid reflux!

Babies with reflux tend to have trouble sleeping through the night and taking long, restorative naps, since their discomfort makes it hard for them to stay asleep.

# Why Does Reflux Interfere with Sleep?

## **Sleep issues that can be due to reflux include:**

- waking in the middle of the night with a burst of crying (Pantley 2002);
- waking frequently overnight (Blanch 2010), your child may initially sleep for three or four hours, but then will wake every one or two hours for the rest of the night and be difficult to resettle (Shilkin 2010);
- infants and children may be more comfortable in a fully upright position and may object or cry when you go to lie them down (Blanch 2010);
- trouble self-settling and they can be restless sleepers who are easily disturbed from sleep (Blanch 2010);
- day time sleeping tends to be for short periods and usually are cat naps for 10 to 40 minutes with the child waking distressed (Shilkin 2010);
- older children with reflux can be restless during sleep and may cry, moan or swallow even when asleep (Blanch 2010);
- older children with reflux may ask for drinks of water overnight and/or want water immediately upon waking (Blanch 2010).

# How to Help Babies with Reflux Sleep Better

**If the baby is young (3 months old or younger), or if the baby's reflux symptoms are fairly mild, there's a lot you can do to alleviate the problem at home, without medication. Those steps include:**

- Keeping a log of the baby's feeding times, as well as periods of discomfort. If mom is breastfeeding this is especially important as it could highlight certain foods that they are eating that may be exacerbating symptoms.
- Don't put baby to bed straight after a feed. When baby lies down, food is more likely to travel back up the throat, so aim to make your feeds at least 30 minutes before sleep time.
- Have parents hold or sitting your baby slightly upright after feedings, for 20 or 30 minutes.
- Consider using a wedge under baby's crib mattress, to help elevate her upper body.
- Comfort baby often, but try to begin weaning away from sleep associations as baby grows.
- Chiropractic

# Sleep Training a Baby with Reflux



- The first step is to always make sure the family sees their pediatrician and get's the reflux under control. Minor reflux usually resolves itself as the baby grows, but more serious GERD often requires medication.
- Move the last feeding up to an earlier point of the bedtime routine, since they need to hold baby upright for 20-30 minutes.
- Be realistic in the feeding expectations. Remember, babies with reflux need to eat smaller, more frequent meals.
- Put the crib at an incline.
- Burp. Burp. Burp.
- Weaning feedings at night might take longer with babies with reflux so create a plan that follows this idea.
- Gentle and easy plans are a must - pick up put down is usually the way to go!

# Breaking the Cycle

If baby goes to sleep and wakes after 45 minutes crying, there are usually two culprits.

- Baby has trouble transitioning through sleep cycles from passive to active (or vice versa) sleep. If baby has reflux it could be that while trying to transition they felt pain, gas or otherwise, and woke up.
- Baby has gas and wakes up crying. This type of cry is usually more one of pain or distress than the cry from #1 and you'll know this was the case if you pick baby up and he or she burps quickly.



## If All Else Fails...

Consider baby wearing during naps. It may help parents get things done around the house while the baby sleeps upright (Blanch 2010). Even if it means the baby gets an extra 10 or 15 minutes sleep, this can make a significant difference to their mood.







## **Just Remember ...**

**It will easily take an extra week or two for reflux babies to work on a new sleep habit.**