

Crying babies

by Doctor Jo Jones, Paediatrician – www.healthcare4kids.co.uk

“When you were born, you cried and everyone else was happy...” Tony Campolo

That first cry is the most wonderful thing, but in my experience both as a mother and a Paediatrician, some babies go on crying... and crying... and that is what this article is all about.

Why do babies cry? It's all about communication – that they're hungry, dirty, tired, uncomfortable, in pain, bored, or just feeling a bit grumpy. Many mothers 'learn' the different cries their child makes within a few weeks. The urgent, high-pitched scream of pain, the 'revving up' sound of a hunger cry, the waxing and waning of a tired cry when sleep is near. This seems to be an instinctive gift to a mother – to 'read' their child's request - but many things get in the way, such as utter exhaustion, low mood and the myriad stresses, pressures and worries that come with motherhood.

Most mothers, however, correctly interpret that pain cry which generates an overpowering urge to comfort and take the pain away. When it becomes associated with difficulties in that other primaeval need - to feed one's child, feelings of inadequacy and utter desperation can be overwhelming.

Which crying babies need medical attention? Those with significant Reflux, for a start. There are different 'types' of Reflux, where the 'valve' that shuts off the gullet from the stomach is leaky, and allows stomach contents to wash back up towards the throat. One type causes often profuse vomiting soon after a feed or even between feeds and is easily spotted. These babies do well with feed thickeners, Gaviscon or sometimes medications to switch off stomach acid. Very few vomit enough to affect growth. Nevertheless, it's soul-destroying to have to feed or bath and dress your baby all over again after the whole lot has poured out just as you've gently laid her a little flatter to change her nappy.

It's also worth noting how difficult it is to get Gaviscon down a breast fed baby; easy enough to put it in a bottle, but you're meant to give it after a feed and few babies will take 15 mls of 'yack' straight after (or even straight before!) a warm breast feed.

The other type of Reflux is 'acid reflux'. These babies may well not vomit much more than normal possetts, but are often tremendously unsettled whilst feeding and soon after. Such babies tend to pull off the nipple or teat constantly, arch back and cry out, often red in the face, then return to the feed frantically trying to suckle again. This suckling is often for comfort as the acid from the stomach washes up at the back of the throat and causes a burning sensation. The best way to treat these babies is to 'switch off' the burning by turning off stomach acid production with a medication.

The other 'biggie' that causes an extremely unsettled baby is those with Cows Milk Protein or Lactose Intolerance. These children are often even more fractious than the Reflux babies and it's not uncommon to have both, which makes for a very distressed mother and child. Some babies fail to thrive as they take feeds so poorly, but others overfeed which worsens the irritable tummy and starts a vicious cycle. I remember the fear and reluctance on a young mother's face when I asked her to reduce the feeds, as she said that feeding was the only thing that briefly stopped her son crying. Reducing his feeds along with anti reflux medication turned a screaming, writhing baby boy into a settled, happy little lad – the best outcome ever.

If Colief (an enzyme supplement) doesn't help, your baby may need a 'fully broken down' formula from your GP such as Nutramigen. This type of milk works much better than the supermarket brands for unsettled babies which are not as carefully formulated.

Many children will completely grow out of these intolerances by their second year of life. There's no point doing allergy tests, as testing in small babies is very unreliable due to their immature immune systems. Also, because it is not a true 'allergy', the intolerance does not show up on testing.

For breast-feeders, you may find that if you followed every bit of dietary advice given to you, you'd end up eating nothing at all! Nevertheless, a few things make complete sense, one of which is cutting back on wind-producing vegetables and chilli. I'd also recommend a separate dairy free diet for a maximum of two weeks to see if the small amounts that enter breast milk from a mother's diet are upsetting your baby. It's important to return to a dairy rich diet if there is no benefit seen in your baby, as breastfeeding mothers need plenty of calcium. Try drinking fennel or peppermint tea, as these are known gut relaxants.

Dads can also help here. Instead of saying, "The baby's crying; he must be hungry!", and giving the baby back to an exhausted Mum, which worsens the vicious cycle, Dads can take the baby for a walk which is often settling in itself. Tummy massage is another treat for your baby which will help expel trapped wind.

Babies who cry incessantly are rarely seriously ill. Mothers worry that they are though. The advice of your Health Visitor and GP will help get you through those extremely difficult first months until the crying subsides and the smiles take over.