






Symptoms of colic

Colic has been defined as lasting three hours a day on more than three days a week for at least three weeks, starting after the third week and ending by the third month (Wessel's so-called 'rule of three', 1954). Clearly this is not a particularly useful definition as it takes no account of the potential physical placement or cause of the pain.

It has more usefully been defined as "spasmodic contraction of the smooth muscle of the intestine, causing pain and discomfort".

Symptoms are usually described as:

-  **high pitched, inconsolable crying**
-  **flushing of the face**
-  **drawing up of the legs**
-  **passing wind, and**
-  **straining when doing a poo**

It is easy to see how some of the common treatments or management techniques might reduce colicky symptoms, if the symptoms were caused by trapped wind from a slightly mis-managed feeding technique, a reaction to a foreign protein from the baby's milk, or to a drop-out in the enzyme required to digest milk sugars.

About this leaflet

This informational leaflet was prepared by LIFIB; a multi-disciplinary group based in the northwest of England, comprising staff from the NHS, councils, plus voluntary sector charities, companies and not-for-profits, as well as individual volunteers and lay people.

This leaflet was put together from the best evidence we have available, and was written to support families who are managing diagnosed or suspected feeding issues in babies. We are not promoting any products, and we aim to give completely impartial information.

Whilst we are not able to comment on specific cases, we hope to support health professionals as they support families. We provide literature and training to complement this leaflet, for frontline staff working with young families, via www.LIFIB.org.uk

Updates on new literature and issues we believe may be of interest to families and healthcare staff, are via Twitter through [@The_LIFIB](https://twitter.com/The_LIFIB)

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Colic in Infants: Information for Parents & Carers



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What is colic?

The cause remains unclear, however, systematic review has suggested:

problems within the gut where excessive crying is the predominant symptom. May be caused by cows' milk protein allergy, a lactose intolerance, or trapped wind

a behavioural problem resulting from parental interaction

excessive crying is simply at the extreme end of normal

it is a collection of different things with different causes, and so difficult to pinpoint clinically, including gut bacteria.

In most babies, symptoms resolve by 3-5 months of age but this period can be exhausting for parents who may be frantic to find a "cure", particularly as symptoms are often worse in the evenings. Incidence is up to 25%.

Babies of mothers who smoke or who live in smoking households are twice as likely to experience symptoms of colic as those who don't. It is reported that colic is less frequent in breastfed babies, certainly **there is no evidence that stopping breastfeeding is beneficial in reduction in colic symptoms**. However, observation of feeding technique by someone skilled and experienced, may help to identify any problems with baby's milk transfer.

Commonly used products

The most commonly used products include:

Lactase drops: these sit for 20-30 minutes in baby's whole feed to reduce lactose in the feed, so that a baby with a temporary intolerance to lactose can digest milk more comfortably. This turns lactose in milk into galactose and glucose. Glucose in the mouth can cause tooth decay.

Simethicone: this lowers the surface tension of bubbles of gas trapped in liquid, allowing many small bubbles to join together, with the intention of making baby's wind easier to get up.

Gripe water containing **dill extract** (which may work as a prebiotic, feeding positive bacteria in the gut), and **sodium bicarbonate**, which reacts with stomach acid to make carbon dioxide.

Chamomile, which may be useful for its anti-inflammatory and anti-anxiety properties. **This is the treatment which is most likely to work.**

Management techniques

Remember: colic is temporary!

Because colic might be caused by trapped wind or crying a lot before feeds, improving feeding technique first of all so baby is not **taking in air**, might improve the situation. This technique improvement can apply to both breast- and bottle-fed infants.

Keeping baby upright after feeds for up to 30 minutes, for example in carer's arms or in a supportive sling, may help relieve symptoms.

Some parents find that **baby massage** and **baby yoga** techniques are helpful, particularly the 'Tiger in a tree' pose, circular sweeping strokes on the abdomen, or cycling the legs. Do not cycle baby's legs until after the baby's paediatric check at around 6 weeks.

As the colicky symptoms may be an early sign of a **cows' milk protein allergy** (see also our leaflet on CMPA), if CMPA seems to be the culprit (after taking health professional advice) it may be wise to try cutting dairy from mum's diet, or - for babies who are not breastfed - to try the baby on a special hydrolysed or amino acid infant milk (available on prescription).

Some parents find that special infant probiotics and prebiotics can bring some relief, but there is currently no good evidence to support this.

The most important things are that a crying baby is **cuddled and loved**, and that the baby's parents have **emotional support**.

