

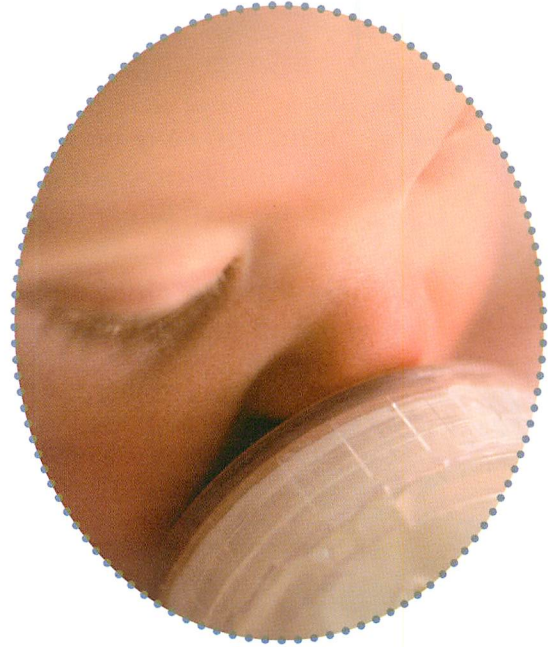
**While the exact cause of colic hasn't yet been determined, experts have suggested several factors that may be associated with the malady. Some physicians think the condition may result from factors acting on the infant's digestive system, which is immature at that age.**

**a**bout one in five infants between two weeks and four months suffers from colic, an unexplained state of fussiness or crying that lasts more than three hours a day at least three days per week. Some infants cry up to 14 hours a day.

Because physicians don't know what causes colic, there are no medical treatments for the condition, which disappears on its own within several months. There are a few methods, however, that seem to provide temporary relief to colicky babies. While colic isn't a serious or dangerous condition, the crying associated with it can be tiring for both infant and parent.

Temporary relief for colicky babies is sometimes achieved by cuddling, rocking or carrying them while walking. An infant may respond best when being carried around, in an infant carrier that is worn over the chest or back to free arms and hands for other tasks. Constant vibrations also appear to be comforting to a colicky infant. Taking the baby for a car ride may help calm the infant.

Because colicky babies tend to have more abdominal gas than other infants, it helps to be very conscious of feeding and burping them correctly. Parents should make sure that the baby is in an upright position when being fed and they should burp the baby after the feeding. In addi-



# COLICKY BABIES

In addition to crying excessively, a colicky infant may display other symptoms indicating the condition. He may draw his knees up toward his chest and appear to be in great pain. He also may pass more gas, be more sensitive to stimuli and more easily irritated than other infants.

While the exact cause of colic hasn't yet been determined, experts suggested several factors that may be associated with the malady. Some physicians think the condition may result from factors acting on the infant's digestive system, which is immature at that age. Such factors include recurring abdominal gas and constipation. Others suggest that hypersensitivity to the noise of a busy environment leads to the condition. Still others believe a combination of these factors causes colic.



tion, parents should check the bottle's nipple to make sure that the holes are not too large; large holes may allow the baby to swallow too much air.

In some cases in which the infant is breast-fed, the foods that the mother eats appear to irritate the child. Potentially irritating foods include broccoli and cauliflower, which can cause gas, caffeine-containing drinks and heavily spiced foods. In addition, many physicians believe that dairy products may be linked to colic, especially in families that have a strong history of food allergies.

Mom should keep a record of her diet to see whether there's an association between what she eats and the onset of her baby's fussiness or crying. If so she should adjust her diet accordingly.

Other techniques to soothe a colicky infant include applying general heat to the baby's

abdomen or giving a warm bath; keeping it away from noisy environments; wrapping him snugly in a small blanket or sheet and offering

a pacifier. It helps to respond quickly to the infant's crying before he becomes too distressed and soothing him becomes much more difficult.

Although colic itself isn't dangerous, one of the problems associated with the condition is it can hinder the development of a good relationship between the infant and the parents. The stress of caring for a constantly crying baby is very great, and parents should not feel guilty about needing a break from their child. Parents with colicky babies should take comfort knowing that colic disappears within a few months.

*Because colicky babies tend to have more abdominal gas than other infants, it helps to be conscious of feeding and burping them correctly. Parents should make sure that the baby is in an upright position when being fed and they should burp the baby after the feeding. Also, parents should check the bottle's nipple to make sure that the holes are not too large; large holes may allow the baby to swallow too much air.*

*At the Pediatric & Adolescent Center, we try to make every parent and child's experience a little easier by making everyone feel safe and secure. Family involvement promotes healing in young patients.*

*We encourage parents to participate in their child's medical care every step of the way.*

*Call 281-374-9700 / 281-357-5678 for an appointment with one of our caring physicians.*