

What is Reflux?

Breastfeeding your baby with gastroesophageal reflux.

Gastroesophageal reflux is the medical term for milk and stomach acid backwashing out of the stomach into the throat. Reflux is also called wet burps or spitting-up.

The valve between the stomach and the esophagus is only supposed to open when your baby swallows or burps. Reflux happens when the valve doesn't close tightly or opens for no reason.

English (Stomach + Esophagus + Backwash) = Latin (Gastroesophageal Reflux)

Any baby on this spectrum can benefit from the ideas in this publication.

- 1. Most babies have occasional episodes of reflux every day. This is perfectly normal and doesn't usually cause any problems for the baby.
- 2. Some babies spit up large amounts after every meal. You and your doctor will want to watch your baby carefully for signs of trouble.
- 3. Some babies experience problems when the stomach acid burns the delicate lining of the throat or airway or the baby can't gain enough weight. This is called Reflux Disease.

Reflux Symptoms

If your baby experiences any of these problems, please discuss them with your doctor so you can work together and prevent them from becoming serious.

- Spitting up large quantities very frequently or hours after eating
- Vomiting (more forceful than spitting-up and usually emptying the stomach)
- Painful crying after wet burps or spitting-up
- Crying, fussing or arching the neck and back during feeding
- Baby seems reluctant to nurse or pulls away from the breast
- Unusual eating patterns, constant feeding or feeding only when sleepy
- Noisy breathing or congestion
- Breath-holding spells, skipping several breaths
- Frequent gagging, coughing, choking or sneezing
- Poor weight gain, falling to a lower weight percentile
- Frequent throat infections, red throat, colds, ear congestion or infections
- Any serious respiratory problems such as bronchitis, pneumonia, asthma
- Breath that smells sour/acidic
- \bullet Frequent hiccupping and burping
- Waking suddenly with painful crying, unusually poor sleeping habits

When a baby has acid backwashing from the stomach into the esophagus, this can cause throat pain. The pain can range from minor to severe. It may last for a few minutes or all day.



When a baby has throat pain, it can affect nursing.

Pattern #1 Babies with reflux who nurse for comfort:

- Many babies with reflux find that breastmilk is soothing on their sore throats. Breastmilk helps wash the acid back down into the stomach.
- She may nurse constantly all day and night.
- She may want to nurse after every wet burp or spit-up.
- She may gain a lot of weight until the pain is gone.

Pattern #2 Babies with reflux who feel pain when they

- This baby will probably behave in ways that confuse her mother. When she is hungry her tummy wants food, but if her throat is sore from acid she might not want the milk to touch her throat. She is confused and is not sure whether to eat or not.
- She may fuss and act hungry but refuse to eat until she is starving.
- She may eat very fast, but stop after only a few minutes.
- She may become afraid of eating.
- She may eat better when she is sleepy because she feels less pain.

• She may have poor weight gain until the pain is gone.

Tips that minimize reflux episodes:

- Use breastfeeding positions that don't put pressure on the baby's stomach. When her tummy is being squeezed, the milk comes back up more easily.
- Use breastfeeding positions that keep your baby's head higher than her stomach. She may also prefer to keep her right ear up. This keeps the top of the stomach higher than the milk in her stomach.
- If your baby chokes during the letdown, try positions that let her face your body, not the ceiling. These positions allow her to release the breast and let some milk dribble out of her mouth when the flow is too fast. You can also try taking her off for a few seconds and pressing your breast with your palm to slow the milk flow a bit.
- Encourage your baby to nurse frequently and take small amounts at a time. Overfilling her stomach makes the milk come back up easier.
- Nursing at one breast per feeding can help your baby avoid overfilling her stomach. It also helps her get a balance of foremilk from the front of the breast and hindmilk from deeper in the breast. Both are important



to good nutrition. If she nurses frequently and takes small amounts, you can try switching breasts every few hours.

- Make sure that your baby is latched onto your breast properly so that she doesn't swallow air. When air comes up, it can bring up milk.
- Good burping is very important to minimizing reflux. You may find that you need to burp her before, during and after nursing. You need to get the air up right after meals—before the stomach mixes acid into the milk.
- Your baby should never be exposed to second-hand smoke. Smoke greatly increases reflux.
- Loosen your baby's diaper and try not to put pressure on her tummy after meals.
- Keep your baby upright after meals—30 minutes for breastmilk and longer for other foods.
- Don't jiggle or bounce your baby after meals.
- Your baby may sleep better at night when the head of her bed is elevated.

Tips that minimize the pain:

- Some babies feel less pain when they are entertained. She may eat better in public or when you sing and talk to her.
- Some babies feel less pain when they are sleepy and eat better when they are half-awake. Tell your doctor if your baby seems to be in so much pain that she won't eat if she is fully awake.
- Your baby may need to be held and comforted nearly 24 hours per day. There are many tricks that you can learn from other moms. Slings, front packs and cosleeper beds can be helpful.

Can mom's diet affect reflux?

You may find your baby has more reflux on certain days. You may suspect this happens after you eat certain foods. Some babies do have reflux because of food sensitivities or allergies.

A few mothers find that eliminating foods can help their baby. But many mothers never find a specific food that makes a big difference. Elimination diets can be frustrating and confusing because it can take days for an offending food to be eliminated from breastmilk and a several more days till your baby feels better. Elimination diets require a lot of planning and patience.

Easy ingredients to avoid:

- Caffeine—even the small amounts in "decaf" coffee
- Alcohol—even in cold medicine
- Tobacco and nicotine
- Tomatoes in all forms
- Oranges, lemons, limes, grapefruit, strawberries, kiwi and other acidic (sour) fruits
- Broccoli, cabbage, cauliflower, peppers, onions, garlic, cucumber skins, beans and other veggies that tend to make people burp or have gas.
- Peppermint and spearmint. Wintergreen may be OK.
- Chocolate. White chocolate may be OK.
- Peppers and hot spices. Herbs may be OK.
- Fish
- Shellfish
- Nuts

These ingredients are harder to avoid and often hidden in common foods—even medicines and vitamins. If you decide to eliminate these foods, please work with a doctor or nutritionist to be sure you are getting a balanced diet.

- Milk
- Wheat
- Soy
- Corn

Medication

If the doctor prescribes medicine, use it properly. Some medicines for reflux work best when taken at a specific time of day or on an empty stomach. Measure it carefully and store it properly. Don't stop the medicine until the doctor says that your baby no longer needs it. It can take two weeks for the medicine to start working and several months for her throat to heal completely. If the first medicine doesn't work for your baby, ask for a different brand. It can take several tries to find the medicine that works best for your baby. The dose may need to be adjusted every time your baby gains 1–2 lbs/0.5–1 Kg.

Coping

If your baby has pain due to reflux, she may need all of your attention 24 hours a day. It may be difficult or impossible for you to do chores or work until your baby's pain is under control. It can help to talk to other mothers of high-need babies or babies with reflux. They know what you are experiencing and can offer support and practical tips. You will probably need help from your family, friends and neighbors. Make sure they understand your baby is in pain and needs special care. Be sure to get enough sleep, fluids, nutritious food and "down time" so that you can continue to make milk for your baby.

Non-nutritive sucking

Many babies with reflux find that sucking their thumb, a drained breast or a pacifier feels comforting. Having something in her mouth may also help your baby produce more saliva which soothes her throat. If your baby spits-up onto your breast, be sure to wipe the acid off right away. Be cautious of introducing pacifiers —they are shaped differently from a breast and encourage your baby to move her tongue and jaw a different way. When she returns to the breast, she may not remember how to suckle from it properly.

Breast is best

Continue breastfeeding as long as you can. In the past, mothers were told that formula is best for babies with reflux but research has shown that breastmilk is easier to digest for most babies. Many babies with reflux who are switched to formula don't tolerate the typical formulas

and end up drinking amino acid based formulas which are extremely expensive. Milk from bottles often flows faster so she may overfill her stomach when drinking from a bottle. It may take several weeks for you and your baby to develop a breastfeeding rhythm. Some days, your milk may be excessive and overfill her tummy. Other days, she may spit-up and want to feed again so often that your breasts have trouble making enough milk. Usually, this evens out with time. Some mothers learn how to pump and store extra milk on the days that they make too much. The pumped milk can be offered from a spoon or cup when your baby needs it.

Reflux Rollercoaster

Babies with reflux may have good weeks and bad weeks. Your baby's reflux may be worse when she is teething or has an illness such as a cold or ear infection. Some babies who take medicine may need a bit extra when the reflux flares up. Ask your doctor about adjusting the dose if you see this pattern. Reflux is often the worst at four to six months of age. As your baby's digestive system matures, the top of her stomach will stay shut better. Often babies improve at six months when they learn to sit upright and start eating solid foods. There is often more improvement at nine months when they learn to stand up. Reflux usually improves a lot when your baby starts to walk and is upright most of the day. Only a few babies continue to have problems with reflux after age two.

References:

La Leche League International *The Womanly Art of Breastfeeding*, 8th edition, 2010, pages 163, 383-84, 416-17 or The Ger Group, reflux.org

