

The Irritable Baby

The 'irritable baby' may present as the unsettled baby who is experiencing one or more of the following:

- sleep issues
- breastfeeding issues
- digestive issues such as excessive wind and/or pain, perhaps constipation
- excessive crying
- extreme sensitivity
- startled and jerky movements
- reflux
- general discomfort



From a research perspective, the irritable/colicky baby has been perhaps one of *the* most commonly investigated conditions within the chiropractic profession over recent years. The results indicate that chiropractic may have a role to play in the management of the unsettled child.^(1,2,3,4,5,6,7,8,9,10,11)

In addition to the importance of re-establishing normal neurological communication between the child's brain and body, there may be other aspects of the child's well-being which may need to be addressed.

Cow's Milk

Studies have shown an improvement in colic after dairy products have been removed from the baby's diet. The protein in cow's milk, which is present in many infant formulas and in the milk of breast-feeding mothers who eat dairy products, may be responsible for symptoms of colic in the unsettled child. You may wish to look at changing the baby's formula (there are many soy-based formulas available) or if you are breast-feeding, staying off dairy products, may have a positive effect on your child's symptoms. If there is no change to your child's condition after two weeks, then it is safe to assume that dairy is not part of the problem.

'Gassy' foods

Certain foods such as cabbage, broccoli, cauliflower, brussels sprouts, beans, leeks, garlic, onions, legumes, and large amounts of fruit, have the reputation of creating symptoms of colic. Citrus fruits like oranges, grapefruits, limes, and other acidic fruits such as strawberries and pineapples contain more acid than some babies can handle, and also therefore may contribute to symptoms of colic. It therefore maybe worthwhile if you are breast-feeding to limit your consumption of these types of foods.

Other foods to avoid

If you are breast-feeding, it is also a good idea to remove wheat and sugar from your diet. Anecdotal evidence suggests that these can contribute to the symptoms of an unsettled child. You should also restrict the amount of stimulants you take, such as coffee, tea, caffeine and alcohol. Numerous studies have clearly demonstrated that caffeine and alcohol enter the breast milk, and may affect the behaviour of the child.

Probiotics

Research has clearly demonstrated that probiotics may have a beneficial effect on a child with symptoms of colic.⁽¹²⁾ In a study published in *Pediatrics* in 2007, 90 breastfed colicky infants were assigned randomly to receive either a probiotic or Simethicone (Infacol) each day for 28 days. The daily median crying times in the probiotic and simethicone groups were 159 minutes per day and 177 minutes per day, respectively, on the seventh day and 51 minutes per day and 145 minutes per day on the 28th day. On day 28, 39 patients (95%) had improved in the probiotic group and 3 patients (7%) had improved in the simethicone group. No adverse effects were reported. This study certainly suggests that probiotics may have a role in the management of the irritable baby.

This information handout is designed to help you potentially address all aspects of your child's health and well-being which may be contributing to the symptoms your child is currently experiencing. The advice is designed to be followed only under the supervision of your chiropractor, so please always inform your chiropractor of any dietary changes you chose to implement.

References:

1. A Retrospective Study of Chiropractic Treatment of 276 Danish Infants With Infantile Colic *J Manipulative Physiol Ther.* 2010 (Sep); 33 (7): 536-541
2. Long-Term Effects of Infant Colic: A Survey Comparison of Chiropractic Treatment and Nontreatment Groups *J Manipulative Physiol Ther* 2009 (Oct); 32 (8): 635-638
3. Sixteen Infants with Acid Reflux or Colic Undergoing Upper Cervical Chiropractic Care to Correct Vertebral Subluxation: A Retrospective Analysis of Outcome *J Pediatric, Maternal & Family Health - Chiropractic* May 2009: 1-7
4. Comparison of the Short-term Effects of Chiropractic Spinal Manipulation and Occipito-sacral Decompression in the Treatment of Infant Colic: A Single-blinded, Randomised, Comparison Trial *Clinical Chiropractic* 2008 (Sep); 11 (3): 122-129
5. Chiropractic Management of Infantile Colic *Clinical Chiropractic* 2004 (Dec); 7 (4):180-186
6. Vertebral Subluxation Correlated with Somatic, Visceral and Immune Complaints: An Analysis of 650 Children Under Chiropractic Care *Journal of Vertebral Subluxation Research* 2004 (Oct 18): 1-23
7. Differential Compliance Instrument in the Treatment of Infantile Colic: A Report of Two Cases *J Manipulative Physiol Ther* 2002 (Jan); 25 (1): 58-62
8. Chiropractic Management of an Infant Experiencing Breastfeeding Difficulties and Colic: A Case Study *J Clinical Chiropractic Pediatrics* 2000; 4 (1): 245-247
9. The Short-term Effect of Spinal Manipulation in the Treatment of Infantile Colic: A Randomized Controlled Clinical Trial with a Blinded Observer *J Manipulative Physiol Ther* 1999 (Oct); 22 (8): 517-522
10. Chiropractic Care of Infantile Colic: A Case Study *J Clinical Chiropractic Pediatrics* 1999; 3 (1): 203-206
11. Infantile Colic Treated by Chiropractors: A Prospective Study of 316 Cases *J Manipulative Physiol Ther* 1989 (Aug); 12 (4): 281-288
12. *Lactobacillus reuteri* Versus Simethicone in the Treatment of Infantile Colic: A Prospective Randomized Study *Pediatrics* Vol. 119 No. 1 January 1, 2007
pp. e124 -e130 Francesco Savino, MD, Emanuela Pelle, MD, Elisabetta Palumeri, MD, Roberto Oggero, MD, Roberto Miniero, MD