Managing Colic in Infants Pathway





Infant presenting with Colic (repeated episodes of excessive and inconsolable crying)

- Started in the first weeks of life
- Crying most often occurs in the late afternoon or evening
- The baby draws its knees up to its abdomen or arches its back when crying

Consider differential diagnosis if sudden onset

Take history and examine:

- •General health of the baby including growth
- Antenatal and perinatal history
- Onset and length of crying
- Nature of the stools
- Feeding assessment
- Mother's diet if breastfeeding
- Family history of allergy (see Allergy Focused History Click here)
- Parent's response to the baby's crying
- Factors which lessen or worsen the crying

Treatable causes:

- Hunger or thirst
- •Too hot / too cold / too itchy
- Nappy rash
- Poor feeding technique
- •Wind (Ensure infant is upright if bottle feeding)
- Constipation if bottle fed
- •Gastro-oesophageal reflux disease (See <u>GORD</u> section)
- •Cow's milk protein allergy (See CMPA section)
- •Transient lactose intolerance (see section)
- Parental depression or anxiety
- Mother's intake if breastfeeding (anecdotal, e.g. medication, high intake of caffeine/ alcohol/certain foods)
- •Rare serious causes (seizures, cerebral palsy, chromosomal abnormality)

Treatable causes excluded



Management:

Reassure and acknowledge (do not ignore/dismiss concerns) colic usually resolves by 4 months
Offer ongoing support and review

Advise strategies one at a time, e.g.:

Holding baby through crying (although putting the baby somewhere safe is sometimes needed) Gentle motion

White noise

Bathing in warm water

Encourage parents to look after their own health



Only consider medical treatment if parents unable to cope (see additional notes):

- 1 week trial of OTC simeticone drops (e.g. Infacol[®], Dentinox[®]) OR
- 1 week trial of OTC lactase drop (e.g. Colief, Care-Co Lactase infant drops)

Only continue if improvement. Simeticone can be prescribed if strong rationale present but Lactase drops are not licensed for colic even if some small trials have shown some effects. Low lactose and /or lactose free formula are NOT recommended.

Click here for additional guidance