



Community Division

Gastro-Oesophageal Reflux

Information for parents and carers

Introduction

This leaflet is aimed at providing parents and carers with information about a condition called Gastro-oesophageal reflux

What is reflux?

Gastro-oesophageal reflux (GOR) happens when the contents of the stomach are brought back up into the food pipe (Oesophagus). In babies, the milk sometimes travels all the way up and this presents as vomiting or 'spitting up'.

Occasionally the stomach contents that travel back up the food pipe can be mixed with stomach acid and this can irritate the lining of the food pipe and cause pain. Very occasionally Gastro-oesophageal reflux can cause symptoms severe enough to require medical treatment such as persistent marked distress, refusing to feed, losing weight or not gaining weight as we would like. This is known as GORD or Gastro-oesophageal reflux disease and is much less common than GOR.

What Causes Reflux?

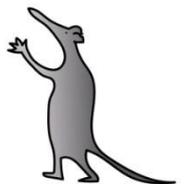
Reflux occurs because a baby's stomach is small in comparison to the large amount of milk they drink. It is very common in the first few weeks and months of life (affecting at least 40% of infants), as their sphincter muscle (ring of muscle that sits at the top of the stomach) is under developed and weak. This means that milk can travel back up the food pipe easily.

Many babies with reflux gradually improve as they grow, their sphincter muscle develops, and they adopt a more upright position and start to eat more solid food.

In some children, however, the reflux continues. This is caused by a combination of factors which may include a wider than usual opening in the diaphragm (muscle) around the food pipe and a weakened sphincter. Children with underlying conditions are more likely to continue to have reflux in childhood and adolescence.

What are the signs and symptoms of reflux?

The most common sign of reflux is frequent spitting up or vomiting. Some babies become distressed after feeds and can draw their knees up and/or arch their back. Occasionally babies may refuse feeds as they can associate feeding with discomfort.



Reflux should not be confused with Infantile Colic which is defined as crying for more than 3 hours a day, more than 3 times a week in an otherwise healthy infant. On average babies cry for up to 2 hours per day, this decreases by 10-12 weeks.

How is reflux treated?

Most babies do not require any specific treatment for reflux, vomiting on its own is not a cause for concern as long as baby is happy, healthy and gaining weight.

If your baby is vomiting excessively and/ or displaying signs of discomfort you could try the following methods to help settle them:

- Try changing their feed pattern to feed smaller amounts but more often. If a baby's stomach becomes too full it is more likely to overflow and this can cause reflux and vomiting
- If your baby is breastfed, ask someone to assess their feeding and latch to ensure they are feeding well and not taking in too much air (see below for contact details).
- Sitting the baby upright for half an hour after feeds might help
- Avoid putting the baby in a car seat straight after feeds
- Avoid clothes with waistbands and ensure nappies aren't fastened too tight

It can take up to 2 weeks for your baby to show signs of improvement after trying these methods. The good news is that most babies improve as they grow and develop, 90% of babies with reflux have no symptoms by the time they are 1. The aim of reflux treatment (if needed) is to have a happy, growing baby; it may not be possible to stop a baby vomiting altogether.

Occasionally reflux can become problematic causing babies to become very distressed, refuse feeds and not gain weight as we would like. If this happens your doctor may advise a thickened formula to try as this can help keep the stomach contents down. If your baby is breastfed you could try a thickener called Carobel which can be given on a spoon before or during feeding. This works by helping to thicken milk as it reaches the stomach (don't use this unless advised by a healthcare professional).

Are there any medications for Reflux?

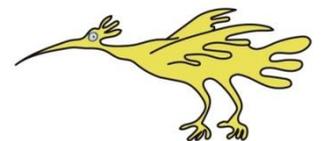
Most babies do not need medication for Reflux and it is best to try and avoid this if possible. There is no strong evidence to suggest that medicines work for babies with reflux and all medications have side effects. Medications that may be used for more severe reflux include:

- Gaviscon, this works by thickening the stomach contents and forming a protective coat over the bottom of the food pipe (this should not be used with any other thickener or pre thickened feeds such as anti-reflux formulas).
- Ranitidine works by reducing the amount of acid produced in the stomach. However, we know that stomach acid is important for killing bacteria in the stomach and reducing the risk of infection. We also know that ranitidine can reduce the amount of calcium absorbed into the body which could cause problems with bone strength later on. For these reasons, ranitidine is reserved for babies with severe reflux who have not responded to other measures mentioned above.

When should I see a doctor?

You should see a doctor if:-

- Vomiting becomes persistently projectile
- There is bile stained (green or yellow green) vomiting or blood in the vomit
- There are new concerns such as marked distress, feeding difficulties or faltering growth
- Your baby is under 3 months and develops a fever
- There is persistent, frequent regurgitation (vomiting) beyond the first year of life



It is a good idea for you to attend baby clinics regularly for ongoing advice and to ensure that your baby is gaining weight and growing well. Caring for a young baby with or without reflux can be hard work and very tiring, take any offers from friends or relatives to help out. Further support can be found below:

Who to contact for further information or support?

Useful Contacts/ information sources:

Your Health Visitor/ Midwife

Infant feeding helpline - 0151 702 4293 (babies under 6 weeks born at LWH)

Breast feeding support

- BAMBIS Liverpool - 0151 233 6874
- Breast feeding support Sefton - 0151 291 8010/ 07752661408
- Bosom Buddies (Knowsley) - 0151 244 3269



www.livingwithreflux.org

This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment.

This information can be made available in other languages and formats if requested.

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