

Colic

Does your infant have a regular fussy period each day when it seems you can do nothing to comfort her? This is quite common, particularly between 6:00 P.M. and midnight—just when you, too, are feeling tired from the day's trials and tribulations. These periods of crankiness may feel like torture, especially if you have other demanding children or work to do, but fortunately they don't last long. The length of this fussing usually peaks at about three hours a day by six weeks, and then declines to one or two hours a day by three months. As long as the baby calms within a few hours and is relatively peaceful the rest of the day, there's no reason for alarm.

If the crying does not stop, but intensifies and persists throughout the day or night, it may be caused by colic. About one-fifth of all babies develop colic, usually between the second and fourth weeks. They cry inconsolably, often screaming, extending or pulling up their legs, and passing gas. Their stomachs may be enlarged or distended with gas. The crying spells can occur around the clock, though they often become worse in the early evening.

Unfortunately, there is no definite explanation for why this happens. Most often, colic means simply that the child is unusually sensitive to stimulation. As she matures, it will decrease, and generally it stops by three months. Sometimes, in breast-feeding babies, colic is a sign of sensitivity to a food in the mother's diet. The discomfort is only rarely caused by sensitivity to milk protein in formula. Colicky behavior may also signal a medical problem, such as a hernia or some type of illness.

Perhaps you'll find it reassuring that there's a time limit to this problem, but that doesn't stop the crying now. It may be that you simply will have to wait it out, but there are also several things that might be worth trying. First, of course, rule out any medical reason for the crying.

The five S's

The five S's are a technique to promote calming behavior in your colicky baby by mimicking the peace of your womb. This is the initial response I recommend to colic.

Swaddling

Tight swaddling is the cornerstone of calming. Swaddling also helps keep babies from accidentally flipping onto their stomach. Avoid overheating and loose blankets.

Side or stomach position

All babies should be put to sleep on their back. However, being on the side or stomach is best for calming the baby; it turns on the calming reflex and shuts off the Moro reflex. (The Moro reflex makes a baby's arms shoot out when his own crying startles him.) Lie her on her tummy and gently rub or pat her back.

Shushing

Loud, harsh, white noise mimics the noise of blood flowing through placental arteries when a fetus is in the womb. The louder a baby cries, the louder the shushing has to be to calm him.

Swinging

Lying motionless deprives newborns of sensory stimulation. Swinging (rhythmic, jiggly movement) in rapid, tiny movements, like a shiver (two to three times a second), soothes agitated babies. Use slow, broad swinging to keep your baby soothed. Never shake a baby in anger.

Sucking

Sucking triggers the calming reflex and deepens a baby's level of relaxation.

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To stop a baby's cycle of crying, you must *meet his level of intensity*. Once the screaming diminishes for a few moments, you can gradually lessen the *vigor* of the calming maneuvers.

Other responses to colic you may try.

- If nursing, eliminate milk products, caffeine, onions, cabbage, and any other potentially irritating foods from your diet.
- Walk your baby in a body carrier to soothe her. The motion and body contact will reassure her.
- Run the vacuum in the next room, or place her where she can hear the clothes dryer.
- When you're feeling tense and anxious, have someone else look after the baby—and get out of the house. Even an hour or two away will help you maintain a positive attitude.