If there is no change what happens next?

- Your doctor may prescribe Infant Gaviscon®. This is a thickener as well as a mild antacid. It should not be given with any of the above thickeners.

- If there is no improvement after about 2 more weeks your doctor may prescribe Ranitidine. Ranitidine is an antacid that works to reduce the acid in the stomach. It may not reduce the vomiting initially, and will need about 4 weeks to show a real improvement.

- The acid in the reflux will have inflamed or irritated your baby’s food pipe and the sphincter muscle that works to keep the stomach contents in the stomach. This inflammation needs to heal to allow it to work properly. The Ranitidine will reduce the acid in the reflux and allow the healing to begin. Once healed, the sphincter muscle should start to work properly, allowing the vomiting to reduce.

- If Ranitidine does not help other medication such as Omeprazole may be prescribed.

- Reflux often improves once your child is eating solids and is sitting and standing upright.

The aim of treatment is to have a happy growing baby. It will not always be possible to stop all the vomiting but it should reduce.

For telephone advice: NHS Direct 08454647
Further information: www.nhs.uk/Conditions
What is Gastro-Oesophageal Reflux (GOR)?

Gastro-Oesophageal Reflux (GOR) is also referred to as infant reflux or simply, reflux. It is the regurgitation of the baby’s stomach contents; usually milk, back up the oesophagus (food pipe). It usually starts soon after birth, and almost always resolves between 6-12 months of age. Reflux is a very common problem.

Signs and Symptoms

- Frequent, effortless vomiting, during or after feeds
- Frequent coughing/hiccups
- Swallowing/Gulping after burping, back arching
- Unexplained pain/discomfort, particularly during or after feeding (although the most likely explanation for discomfort and irritability in babies under 3 months old is colic)

How can I help my baby?

Most babies’ symptoms will improve with very simple changes:

- Feeding your baby in an upright position and helping him/her to stay as upright as possible for as long as possible after a feed.
- Giving smaller, more frequent feeds, particularly bottle-fed babies. Whatever your baby takes at the moment, make the feeds smaller (even if that means feeding every 1½ hours to begin with). Your health visitor can advise a suitable amount.
- Raising the head end of the cot to allow a slightly more upright sleeping position by putting something under the legs of the cot.

- The baby should always sleep on their back with their feet at the bottom of the cot.
- Following these simple tips can lead to an improvement in many babies’ symptoms in 2 weeks. It is important to know however, that it is normal for all babies to bring back small amounts of milk (also known as possetting) this may continue without causing any harm.

Will my baby need treatment?

If your baby is happy and growing well despite the vomiting, treatment may not be needed. If however, after making the above changes for 2 weeks you have seen no improvement to your baby’s symptoms then there are treatments available that may help.

- Breast fed babies may be given a feed thickener such as Carobel®. This can be mixed with expressed breast milk (EBM) or water and given on a spoon immediately before breastfeeding.
- Bottle fed babies can either be given a thickener mixed with their formula or a pre-thickened formula, such as SMA Staydown® or Enfamil AR®.
- Babies over 4-6 months may improve when they start some solid foods.

Whichever treatment you choose allow about 2 weeks for it to begin to make an improvement. Many babies respond well to the above thickeners. Both Carobel® and the pre-thickened formulae are available to buy over the counter, or on prescription.