

If there is no change what happens next?

- 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.
- If your baby does not improve on medicines your doctor may suggest a trial of a low-allergy milk.
- 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 further information talk to your health visitor, GP or paediatrician

There is more information on-line at

<http://www.patient.co.uk/health/childhood-gastro-oesophageal-reflux>

RUH

Information for Families

Gastro-Oesophageal Reflux in Infants



What is Gastro-Oesophageal Reflux (GOR)?

Gastro-Oesophageal Reflux (GOR) is a very common condition which is often simply called 'reflux'. It is the regurgitation of the baby's stomach contents (mainly milk) back up the oesophagus (food pipe). It usually starts soon after birth, and almost always goes away between 6-12 months of age.

Signs and Symptoms

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

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. To may mean feeding every 2 hours in the day. Your health visitor can advise a suitable amount.
- Some babies seem better if you raise the head end of the cot to allow a slightly more upright sleeping position.
- Placing your baby on his/her tummy or side to sleep is **not** recommended, but is encouraged when s/he is awake.

- Following these simple tips can show 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) and this will not cause 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 which 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 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[®] (these can be purchased in most pharmacies)
- Your doctor may prescribe Infant Gaviscon[®]. This is a thickener as well as a mild antacid. It should not be given in the same feeds as any of the above thickeners.
- Babies over 4-6 months may improve when then start some solid foods.

Whichever treatments you choose allow about two weeks for it to begin to make an improvement.