

GUIDELINES FOR THE MANAGEMENT AND PRESCRIBING FOR INFANTILE COLIC

Summary

Parents should be reassured that infantile colic will resolve and as colic always improves on its own, medical treatment is not usually recommended.

If parents feel unable to cope despite advice and reassurance, then consider treatments as below, but there is currently little evidence to support the treatments.

Infantile colic - is repeated episodes of excessive and inconsolable crying in an infant that otherwise appears to be healthy and thriving ^{1,2}.

- Colic starts in the first weeks of life and usually resolves by around 4 months of age.
- Crying most often occurs in the late afternoon or evening.
- The baby may draw its knees up to its abdomen, or arch its back.
- New presentations in previously unaffected babies may indicate an alternative diagnosis and a full assessment may be warranted.

Management - reassure the parents that their baby is well, they are not doing something wrong, the baby is not rejecting them, and that colic is common and is a phase that will pass within a few months ^{1,2}.

- Breastfeeding mothers should avoid too much caffeine, spicy foods and alcohol ².
- Prevent the baby swallowing air by sitting them upright during feeding ^{2,3}.
- Check holes in bottle teats are large enough, burp after feeds ^{2,3}.
- Holding the baby through the crying episode or wrapping the baby snugly may be helpful. However, if there are times when the crying feels intolerable, it is best to put the baby down somewhere safe (e.g. their cot) and take a few minutes' 'time out'. Some evidence suggests that 'over-stimulating' a baby by continually picking them up and putting them down may aggravate the crying ^{1,2}.
- Health Visitors can advise on management of crying babies ³.
- Other strategies that may help to soothe a crying infant include ^{1,2}:
 - **Gentle** motion (e.g. pushing the pram, a ride in the car or rocking them over your shoulder or carrying them around the house).
 - 'White noise' (e.g. vacuum cleaner, hairdryer, running water).
 - Bathing in a warm bath/ gentle stomach or back rubs
- Encourage parents to look after their own well-being :
 - Ask family and friends for support - rest when the baby is asleep.
 - Meet other parents with babies of the same age. CRY-SIS support group for families with crying, sleepless, demanding children 08451 228 669.

Medical Treatments - only consider trying medical treatments if parents feel unable to cope despite advice and reassurance ¹.

The options for medical treatments are ^{1,2}:

- A 1-week trial of simeticone (activated dimeticone) drops (breastfed or formula-fed). This product may be purchased from pharmacies or prescribed.
- A 1-week trial of diet modification to exclude cow's milk protein:
 - Breastfed babies: dairy-free diet for the mother (advise a calcium supplement if remain on dairy free diet long term)
 - Formula-fed babies: hypoallergenic formula (not soya milk) which should be purchased unless prescribed as a borderline substance according to ACBS (see definition below). The use of soya formula is not recommended due to possible interference with sexual development ^{2,6}.
- A 1-week trial of lactase drops (off-licence use) (breastfed or bottle-fed) which should be purchased unless prescribed as a borderline substance according to ACBS (see definition below).

Only continue treatment if there is a response (i.e. the duration of crying shortens). If the baby does respond to lactase or hypoallergenic diet, this does not necessarily mean that they are lactose intolerant or allergic to cow's milk. These are rare conditions that affect very few babies with infantile colic. Low lactose formulae and soya formulas are not recommended ¹.

Simeticone (activated dimeticone) drops (Dentinox Infant Colic drops/ Infacol)

Simeticone / activated dimeticone has no contraindications or adverse effects listed in the manufacturer's literature and both products are licensed for colic. Simeticone / activated dimeticone is an antifoaming agent and helps to break up bubbles in the stomach. Give with or after the feed using the oral syringe / dropper in the pack ⁴.

Hypoallergenic milk ¹

Hypoallergenic infant milk formulas are made from hydrolysed cow's milk protein (casein or whey) and are also low in, or free of, lactose. The following hypoallergenic infant milk formulas are available on prescription as borderline substances according to ACBS advice as described below. Prescriptions should be endorsed "ACBS" ⁵.

Parents should try to purchase whenever possible:

- Casein hydrolysate — Nutramigen 1[®] LIPIL and Pregestimil LIPIL[®].
- Whey hydrolysate — Pepti-Junior

Lactase drops (Colief)

Colief is not a licensed medicine. Lactase is an enzyme that helps break down lactose in milk (both breast milk and bottle milk). Colief should be purchased unless prescribed as a borderline substance according to under ACBS advice as described below. Prescriptions should be endorsed "ACBS" ⁵.

- **Breastfeeding:** express about a tablespoon of foremilk into a sterile container; add four drops of lactase; breastfeed as usual, and then give the foremilk with the lactase at the end of the feed using a sterilized plastic teaspoon ¹.
- **Formula feeding:** Make-up carefully according to the manufacturer's instructions. Add 4 drops to formula that is warm, not hot. Shake the feed occasionally, and feed the baby after half an hour having checked that the bottle is at the correct temperature ¹.

Stopping Treatment - If there is no response to the trial of treatment stop it. If there is a response to treatment after the age of 3 months (and by 6 months of age at the latest), wean off treatment over a period of about 1 week¹.

Further Advice¹

Seek advice from a paediatrician if:

- The parents are not coping despite advice, reassurance, *and* primary care interventions.
- There is diagnostic doubt (e.g. the baby is not thriving; crying is not starting to get better or is getting worse after 4 months of age; significant gastro-oesophageal reflux is suspected).
- Unable to wean off treatment by the age of 6 months.

ACBS advice on Borderline Substances⁵

Prescribing Colief and hypoallergenic milks is governed by the Advisory Committee on Borderline Substances (ACBS) advice that they should only be prescribed if lactose / sucrose intolerance is confirmed by the presence of reducing substances and / or excessive acid in stools (1.0pH), a low concentration of the corresponding disaccharide enzyme on intestinal biopsy or by breath hydrogen test or lactose intolerance tests. Prescribers should endorse the prescription "ACBS" to avoid investigation.

References

1. Clinical Knowledge Summaries: cks.library.nhs.uk ;
2. NHS Choices your health, your choices: www.nhs.uk
3. Local Health Visitors
4. Summary of Product Characteristics for Dentinox and Infacol drops: www.medicines.org.uk
5. NHS Drug Tariff : Department of Health
6. The Chief Medical Officer letter: [CMO, 2004](#), [Committee on Toxicity, 2003](#)