Spitting Up by Infants (GE Reflux)

What is spitting up?

Spitting up (also called regurgitation or reflux) is the effortless spitting up of one or two mouthfuls of stomach contents. Formula or breast milk just rolls out of the mouth, often with a burp. It usually happens during or shortly after feedings. It begins in the first weeks of life.

Spitting up is harmless as long as your infant doesn't spit up large amounts that interfere with normal weight gain.

This condition is also called gastroesophageal reflux (GE reflux).

What is the cause?

Spitting up results from poor closure of the valve (ring of muscle) at the upper end of the stomach. Spitting up is normal and harmless for over half of all babies. It becomes a problem if it causes poor weight gain (from spitting up large amounts), choking and breathing it back in, or acid damage to the lower esophagus (esophagitis).

How long does it last?

Spitting up improves with age. By 7 months of age, most reflux has decreased or is gone. The reasons for this are probably because the baby is old enough to sit up or is eating solid foods. By the time your baby has been walking for 3 months, even severe reflux should be totally cleared up.

How can I take care of my child?

Feed smaller amounts.

Overfeeding always makes spitting up worse. If the stomach is filled to capacity, spitting up is more likely. Give your baby smaller amounts (at least 1 ounce less than you have been giving). Your baby doesn't have to finish a bottle. Wait at least 2 and 1/2 hours between feedings because it takes that long for the stomach to empty itself.

Avoid pressure on your child's abdomen.

Avoid tight diapers. They put added pressure on the stomach. Don't put pressure on the stomach or play vigorously with him right after meals.

• Burp your child to reduce spitting up.

Burp your baby two or three times during each feeding. Do it when he pauses and looks around. Don't interrupt his feeding rhythm in order to burp him. Keep in mind that burping is less important than giving smaller feedings and avoiding tight diapers. Also cut back on pacifier time. Constant sucking can pump the stomach up with air.

Keep your child in a vertical position after meals.

After meals, try to keep your baby in an upright position using a frontpack, backpack, or swing for 30 minutes. When your infant is in an infant seat, keep him from getting scrunched up by putting a pad under his buttocks so he's more stretched out. After your child is over 6 months old, a jumpy seat or infant activity station can be helpful for maintaining an upright posture after meals.

Use a proper sleep position.

Spitting Up by Infants (GE Reflux)

Most infants with spitting up problems can sleep on their backs, the position recommended by the American Academy of Pediatrics to reduce the risk of SIDS. Sleeping in a car seat will also reduce reflux. Again, put a pad in the low spot so your baby isn't too scrunched up. Try to elevate the head of the bed a bit. If your child is having breathing problems (choking or sleep apnea), talk to your provider.

Add rice cereal to formula.

If your infant still spits up large amounts after all the previous treatments have been tried, you can try thickening the formula with rice cereal. Add 1 level teaspoon of rice cereal to each ounce of formula. You also need to make the nipple opening bigger.

Acid blockers or liquid antacids.

Children with so stomach acid.	evere reflux or sym	ptoms of heartburr	need tempo	orary reduction of	
Your child's oral medicine is			. Give	every	
hours for	days.			•	

When should I call my child's health care provider?

Call IMMEDIATELY if:

- You see blood in the spit-up material.
- The spitting up causes your child to choke or stop breathing for more than 10 seconds.

Call during office hours if:

- Your baby doesn't seem to improve with this approach.
- Your baby does not gain weight normally.
- You have other concerns or questions.

Written by B.D. Schmitt, M.D., author of "Your Child's Health," Bantam Books.

This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.