



Oxford University Hospitals
NHS Foundation Trust

Oxford Craniofacial Unit

Infant Reflux Advice

Information for parents and carers



Babies often bring up milk during or shortly after feeding. This is known as possetting or reflux. This is very common (affecting around 40 in every 100 babies).

It's different from vomiting, where a baby's muscles forcefully contract to push out the content of their stomach.

Reflux is just your baby effortlessly spitting up whatever they've swallowed.

Information about normal reflux in babies

- Reflux usually begins before a baby is 8 weeks old.
- It may be frequent (5 in 100 babies with reflux have 6 or more episodes a day).
- Reflux usually becomes less frequent with time. 90 in 100 babies won't have reflux after 1 year of age.

Causes of reflux in babies

It's normal for some babies to have reflux. It usually just occurs because a baby's food pipe (oesophagus) is still developing.

It normally stops by the time a baby is a year old, when the ring of muscle at the bottom of their oesophagus fully develops and stops stomach contents leaking out.

Signs that your baby may have reflux

- spitting up milk during or after feeds – this may happen several times a day
- feeding difficulties, such as refusing feeds, gagging or choking
- hiccups that last for a long time or coughing
- excessive crying, or crying while feeding
- frequent ear infections.

These signs of reflux do not need any further investigation or treatment.

When to get medical advice

Reflux isn't usually a cause for concern and you don't normally need to get medical advice if your baby seems otherwise happy and healthy and is gaining weight as expected.

Contact your child's GP, or your midwife or health visitor, to arrange a referral for review by a medical professional if your child experiences any of the following:

- reflux which starts after six months of age
- reflux which continues beyond 1 year of age
- reflux which turns into frequent projectile vomiting
- vomit which has blood in it
- excessive distress, crying or irritability
- vomit which is a yellow or green colour
- blood in their poo or on-going diarrhoea that causes you concern
- a swollen or tender tummy
- a high temperature (fever) of 38°C or above
- not much weight gain or losing weight
- arching their back during or after a feed, or drawing their legs up to their tummy after feeding.

These can be signs of an underlying cause and may mean your baby needs tests and treatment.

Treatments and advice for reflux in babies

Reflux doesn't usually require treatment if your baby is putting on weight and seems otherwise well.

The following advice and treatments may be offered if your baby appears to be in distress or their reflux has a specific, identified cause.

Feeding advice

Your child's Speech and Language Therapist, your midwife or health visitor may want to check how you feed your baby and suggest some changes to help with their reflux.

These changes might include:

- burping your baby regularly throughout feeding
- giving your baby smaller but more frequent feeds
- holding your baby upright for a period of time after feeding.

You may be advised to try using a thicker milk formula that is less likely to be brought back up by your baby. It is important that you seek advice before trying any anti-reflux milk (these milks all act differently and some cannot be used alongside anti-reflux medication).

Allergy advice

If your GP thinks your baby could have a cows' milk allergy, they may suggest trying special formula milk that doesn't contain cows' milk.

Medication

Babies with reflux don't usually need to take any medication to treat reflux, but sometimes this may be offered if your child's GP feels the problem is severe enough.

How to contact us

Oxford Craniofacial Unit

Level LG1, West Wing
John Radcliffe Hospital
Headington
Oxford OX3 9DU

Tel: **01865 234 041**

Email: **craniofacial@ouh.nhs.uk**

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALS@ouh.nhs.uk**

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Oxford University Hospitals NHS Foundation Trust
Oxford OX3 9DU
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