

NUTRITIONAL MANAGEMENT OF COLIC IN FORMULA-FED BABIES

Colic is estimated to affect up to **1 in 5 infants**,¹ and **CALM** is a stepped-care approach designed by Nutricia to help healthcare professionals in the management of this common condition.

C

Consider the signs

The **ROME IV** criteria has defined that for clinical purposes, colic must include all of the following in infants from 0–4 months of age²:

- An infant who is <5 months of age when the symptoms start and stop
- No evidence of infant failure to thrive, fever, or illness
- Recurrent and prolonged periods of infant crying, fussing, or irritability reported by caregivers that occur without obvious cause and cannot be prevented or resolved by caregivers.



A



Advise and offer parental support

Suggest strategies that may help parents soothe their baby, such as:³

- A gentle swaying motion in your arms, cot or pram
 - 'White noise' such as the sound of a vacuum cleaner or hairdryer
 - Holding the baby throughout the crying episode
 - Bathing baby in warm water.
- Provide reassurance and encourage parents to look after their own wellbeing:
- Colic is a common condition
 - It's okay to take some time out to look after yourself
 - Try and rest when their baby is asleep
 - There are support groups for parents and families.

Look at diet

If parents are still finding it difficult to cope with colic in formula fed babies, consider a nutritional approach.

Specialist Comfort milks are designed specifically to help support babies with colic.

The precise cause of colic is not fully understood,³ but some associated digestive factors may include:

- Less diverse gut microbiota⁴
- Issues affecting gut motility^{5,6}
- Sensitivity to milk proteins⁷
- Lactose maldigestion⁸



COMFORT MILK INGREDIENT

BENEFIT

GOS/FOS (9:1):

Blend of Galacto- and Fructo-oligosaccharides

Shown to support a healthy gut microbiota by increasing the number of beneficial bacteria^{9,10}

Structured vegetable oil

May help to produce softer stools and aid the absorption of fat and calcium^{11,12}

Partially hydrolysed whey protein

To help aid easier digestion^{13,14}

Reduced lactose

In cases of lactose maldigestion, can help to reduce flatulence and abdominal discomfort¹⁵

Encourage a full 14 day trial

M



Monitor compliance

Encourage parents to persist with their practical strategies and monitor any changes in symptoms.

If using a specialist Comfort milk, **please note they are thicker** than standard formulas, so it is recommended that a variable flow teat or a single-hole teat with a medium or fast flow is used.

Parents may notice some minor changes to their baby's stools after transitioning to a **specialist Comfort formula**. This is completely normal.

The greatest improvement in symptoms has been shown after 2 weeks of using a Comfort milk.^{16,17}

For further information visit eln.nutricia.co.uk/infants-feeding/colic/

References: 1. Vandenplas Y *et al.* J Pediatr Gastroenterol Nutr; 2015;61(5):531–537. 2. Benninga MA *et al.* Gastroenterology 2016;150:1443–55. 3. NICE Clinical Knowledge Summaries. Colic – infantile [online]. 2017. Available at: <https://cks.nice.org.uk/colic-infantile> [Accessed March 2020]. 4. Pärtty A, Kalliomäki M. Acta Paediatr 2017;106(4):528–9. 5. Gupta SK. Curr Opin Investig Drugs 2007;8(11):921–6. 6. Savino F *et al.* Acta Paediatr 2006;95:738–41. 7. Gupta SK. Curr Opin Pediatr 2002;14(5):588–92. 8. Heine RG. J Pediatr Gastroenterol Nutr 2013;57(Suppl 1):S25–7. 9. Moro G *et al.* J Pediatr Gastroenterol Nutr 2002;34:291–5. 10. Knol J *et al.* J Pediatr Gastroenterol Nutr 2005;40:36–42. 11. Carnielli VP *et al.* J Pediatr Gastroenterol Nutr 1996;23(5):553–60. 12. Kennedy K *et al.* Am J Clin Nutr 1999;70:920–7. 13. Billeaud C *et al.* Eur J Clin Nutr 1990;44(8):577–83. 14. Tolia V *et al.* J Pediatr Gastroenterol Nutr 1992;15(3):297–301. 15. Kanabar D *et al.* J Hum Nutr Dietet 2001;14:359–63. 16. Savino F *et al.* Acta Paediatr 2003;91(Suppl 441):86–90. 17. Savino F *et al.* Eur J Clin Nutr 2006;60:1304–10.

IMPORTANT NOTICE: Breastfeeding is best for babies. Infant formula is suitable from birth when babies are not breastfed. We advise that all formula milks be used on the advice of a doctor, midwife, health visitor, public health nurse, dietitian, pharmacist or other professional responsible for maternal and child care. Foods for special medical purposes should only be used under medical supervision. May be suitable for use as the sole source of nutrition for infants from birth and/or as part of a balanced diet from 6–12 months.

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