

Gastroesophageal Reflux in Infants

Natural History:

- * Extremely common in infants!
- * Generally decreases by the end of year one of life (frequency and quantity decreases with age). One study showed ~50% at 0-3mo, 61% at 4mo, 21% at 6-7mo, 14% at 7mo, and 5% at 10-12mo.

Diagnosis:

- * In most infants, cases are uncomplicated, and little intervention is needed-- just patience, lots of cloths/bibs, and willingness to do laundry! We call these babies “HAPPY SPITTERS”.
- * All children regurgitate milk at times. Let your physician know if this is causing frequent pain/crying, arching of neck, poor weight gain, or refusal to eat. If these things are present some further investigation may be needed.
- * If your child has good weight gain, feeds well, is not unusually irritable, and has an absence of other warning signs that your physician screens for....you can be reassured that this is likely benign.

Interventions:

- * Uncomplicated—“Happy Spitters”
 - no intervention
 - trial of milk & legume free diet if breast feeding
 - trial of thickened feeds if >4mo old
 - use of slow bottle nipples
 - smaller more frequent feeding
 - feeding upright and frequent burping
- * “Un-Happy Spitters”
 - Your physician may consider testing for a milk protein allergy
 - Acid suppressing medications can be discussed with your physician
 - Referral to Pediatric Gastroenterologist Specialist, if family and physician are still concerned, to consider further testing.