

LETTERS

SUPPORTING PARENTS WORRIED ABOUT THEIR NEWBORN'S SLEEP

Parents worried about their newborn's sleep need professionals to support, not patronise, them

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Ball's editorial falls short of supporting parents by suggesting that parents need to learn coping strategies.¹ The paper also implies that parents of breastfeeding infants are more likely to struggle with interrupted sleep.¹

Parental expectations of babies' sleep patterns have changed little in the past few decades. Many parents are pleasantly surprised and sometimes worried if the infant doesn't wake during the night. Most breastfeeding mothers understand that babies have diurnal variation in feeding. Infants offered formula milk without restriction consume much larger amounts than breastfed infants.² Gastric emptying is about 43 minutes in breastfed babies compared with 67 minutes with formula feeding.³ Consumption of smaller volumes of milk and shorter gastric emptying times may partly explain the lower prevalence of gastro-oesophageal reflux in breastfed infants.

Parents seek help from clinicians not for brief nocturnal infant wakeful states but mainly when these interruptions are frequent, prolonged, or associated with persistent crying. The peak age for infant crying occurs earlier in formula fed infants and intense crying or colic behaviour occurs in 43% of formula fed babies compared with 16% of breastfed ones.⁴ Of 94 full term healthy infants (age <3 months), referred to our feeding clinic with colic or persistent crying, 76 were formula fed, with gastro-oesophageal reflux and cows milk protein allergy being the most common causes. Multiple or prolonged nocturnal infant

wakeful states that do not respond to comforting or feeding often indicate discomfort or pain and warrant a thorough review by the clinician.⁵

Parents have usually tried various feeding strategies before seeking help. It is wrong to advocate that parents should just learn coping strategies. Instead, healthcare professionals should actively listen to parents' concerns and should look for and deal with any underlying causes for the infant's prolonged wakefulness.

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Full response at: www.bmj.com/content/346/bmj.f2344/rr/642239.

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