PRACTICE

WHAT YOUR PATIENT IS THINKING

“It’s just a bit of colic,” they said

Salma Patel shares the feeling of trying to be heard rather than reassured when accessing care for her child

Salma Patel

The first four months of our daughter’s life were very difficult. She cried constantly during the day, napped for only five to 10 minute durations, breastfed for two to five minutes at a time, hiccupped at least 50 times in one go three to four times a day, and made strange grunting noises in her sleep. When I sought help from healthcare professionals, they always began by asking if I was a first time mother. I was. They would then sigh and tell me that my baby’s behaviour was completely normal: “It’s just a bit of colic, it’ll pass.” I began to feel as if they’d labelled me as a hypochondriac because my daughter was my first child. I wanted them to investigate, to ask for details about when she cried, how much she cried, whether there was anything else we were worried about; we wanted them to explain colic. On the suggestion of other mothers, we got our daughter’s posterior tongue tie and lip tie lasered, and took her for cranial osteopathy, but they didn’t help.

The difference a diary can make

I developed mastitis three times in a row, and my daughter completely refused to take a bottle. At 12 weeks she refused to feed at all while she was awake. At that point we decided this had to stop and our concerns had to be taken seriously. I kept a diary for four days of exactly what my daughter did during the day (mostly crying), when she napped, how much she slept, and what I ate. Going in to see my doctor armed with the diary gave us confidence that our concerns would not be dismissed; the diary convinced the doctor to refer our daughter to a paediatrician, who used it to understand the pattern of my daughter’s behaviour.

“How are YOU managing?”

The paediatrician was the first person to sit me down and ask how I was managing. I broke down in tears; but I am so grateful

that he asked, because it was the first time someone had acknowledged how difficult this experience was for me too. He recognised that the situation must be very difficult to deal with, and reassured me that even his medical colleagues found colicky behaviour in their own babies very distressing. Like the doctor, he thought that our daughter’s condition might just be a case of colic—but he took our concerns seriously. He listened when I explained why, after discussion with other mothers online, I wanted my daughter to try silent reflux treatment, and he agreed to that.

After less than two weeks receiving this treatment, our daughter was completely transformed. The constant crying stopped and so did the hiccupping, and she started feeding again while awake. She was for the first time happy for most of the day, and we were so utterly relieved.

Finding the underlying problem

Her night sleep, however, took a turn for the worse. She woke up without fail every 45 minutes during the night, and sometimes cried in pain. We worked with an allergy clinic to discover the reason—she was having a non-anaphylactic allergic reaction to dairy, egg, soya, and wheat. When these were cut out of her diet and mine, she was much happier, but her sleep only improved after she was completely weaned off breast milk. I now know that her unsettled behaviour and stomach pain were mainly due to the food allergies.

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What you need to know

Colicky-type behaviour in a baby could be the result of an underlying problem, so don't dismiss it without taking a careful history and considering other diagnoses

Asking parents to keep a diary or to take a video or pictures of an ongoing problem will help give them confidence, and will give you a better understanding of the severity of the situation as well as aiding diagnosis

An unsettled colicky baby can be utterly exhausting—ask how parents are coping, and encourage them to ask family and friends for support

Further resources that may be of use to your patients

The Children's Allergy Foundation. For help along your journey with childhood food allergies (<http://cowsmilkproteinallergysupport.webs.com/diagnosis>)

Kelly Mom. Dairy and other food sensitivities in breastfed babies (<http://kellymom.com/health/baby-health/food-sensitivity/>)

Royal Berkshire NHS Foundation Trust. Milk free diet for children with milk allergy (www.royalberkshire.nhs.uk/patient-information-leaflets/milk-free-diet-january-2015.htm)