Colic in Infants Pathway

Clinical Assessment/ Management tool for Children

Management - Primary Care and Community Settings

Healthier Together

NHS

Infant presenting with Colic (repeated episodes of excessive and inconsolable crying)

Started in the first weeks of life

Crying most often occurs in the late afternoon or evening

The baby draws its knees up to its abdomen or arches its back when crying

Consider differential diagnosis if sudden onset

Take history and examine:

- General health of the baby including growth
- Antenatal and perinatal history
- Onset and length of crying
- Nature of the stools
- Feeding assessment
- Mother's diet if breastfeeding
- Family history of allergy (see Allergy Focused History Click here)
- Parent's response to the baby's crying
- Factors which lessen or worsen the crying

Treatable Cause

- Hunger or thirst
- Too hot / too cold / too itchy
- Nappy rash
- Poor feeding technique
- Wind (Ensure infant is upright if bottle feeding)
- Constipation if bottle fed
- Gastro-oesophageal reflux disease (See GORD section)
- Cow's milk protein allergy (See CMPA section)
- Transient lactose intolerance (see section)
- Parental depression or anxiety
- Mother's intake if breastfeeding (anecdotal, e.g. medication, high intake of caffeine/ alcohol/certain foods)
- Rare serious causes (seizures, cerebral palsy, chromosomal abnormality)

Treatable causes excluded

Management

Reassure and acknowledge (do not ignore/dismiss concerns) colic usually resolves by 4 months

Offer ongoing support and review

Advise strategies one at a time e.g.

Holding baby through crying (although putting the baby somewhere safe is sometimes needed)

Gentle motion

White noise

Bathing in warm water

Encourage parents to look after their own health

Only consider medical treatment if parents are unable to cope

- 1 week trial of OTC simeticone drops
- 1 week trial of OTC lactase drops

Only continue if improvement. Simeticone can be prescribed if strong rationale present but Lactase drops are not licensed for colic even if some small trials have shown some effects.

Low lactose and /or lactose free formula are NOT recommended.

Colic in infants - parent information leaflet

This guidance has been reviewed and adapted by healthcare professionals across North East and North Cumbria with consent from the Hampshire development groups