Your gut tells you something is wrong. Your baby doesn’t act like her big sister or the baby next door. You wonder if something could be wrong. The first step to diagnosis and treatment is learning about the symptoms of reflux. Keep in mind that some babies with reflux have one or two of the symptoms listed while other babies have many.

Most children only have a few of the common symptoms you will read about in this chapter. Your child will probably never have any of the serious or scary symptoms. The fact that you are reading this book and learning about the potential problems may actually help your child avoid the worst symptoms and unnecessary discomfort.

**Noticing Symptoms**

Nobody else spends as much time with your baby and nobody else can see her symptoms as well as you can. It is not surprising that parents are the best observers of their child’s symptoms and often notice things about their child that nobody else could possibly notice. Maybe you had a hunch something was not right well before everyone else.

The doctor only spends a few minutes with your baby during check ups so it is important to report what you see at home. All of your little observations are clues for the doctor and may make a huge difference in determining treatment. The doctor depends on you to provide this information. You are a very important part of your baby’s medical team.

> Within a few days of my daughter's birth, I knew something wasn’t quite right. Often, I would cry and tell my husband there was something wrong with our baby. Everyone assumed I just had post partum depression. But I listened to my gut and started writing down what I saw that didn’t seem right. Instead of telling the doctor, “Something’s wrong,” I could tell her that my baby woke up crying three times last night and didn’t seem hungry and she was very fussy during meals this week. This factual information helped the doctor realize we were dealing with reflux.
Most babies have symptoms that start right after birth, but some babies don’t seem to have any trouble right away.

_I had the world's happiest baby. She was so easy to calm and soothe. At 2 months, she was sleeping 4 and 5 hour stretches. She never so much as spit up. In comparison to what I had gone through with my then 2.5-year-old son, she was a dream. I thought that I'd learned a lot with my first-born and I was reaping the benefits with my second. Then at 3 months, the reflux started and all hell broke loose._

**Confusion About Symptoms**

Keep in mind that most babies only have one or two symptoms from the very long list that follows. As you read the following pages, you might be overwhelmed by the number of other symptoms listed. It may seem impossible for one disease to have so many different presentations. You can see why it is sometimes so difficult to recognize reflux.

_The other mom in the waiting room said her son spits up after each meal but my baby hardly ever needs a burp cloth after a feeding. How can they both have reflux?_

Some doctors are leaning toward a theory that reflux is not a single disease, but a cluster of symptoms that can have many different causes. Diseases that have several variations or causes are called heterogeneous. This term is starting show up in medical journal articles about reflux. It might explain why there are many confusing and contradictory medical studies and why no two patients have the same symptoms.

It might be useful to think of reflux as a “syndrome.” Syndromes are not diagnosed based on tests or a short list of mandatory symptoms. They are diagnosed based on clusters of symptoms and every patient has a unique set of symptoms.

**Symptoms Get Worse and Better at Times**

It may help to know that your child’s symptoms may change a bit from day to day and may change a lot from month to month. Sometimes these
changes can be important clues that will help you identify something like a food that bothers her tummy. Other times, the symptoms may just flare up or subside for no reason at all.

An illness such as an ear infection or the stomach flu can cause a temporary disinterest in feeding and an increase in reflux symptoms. Even the eruption of baby teeth with the increase in saliva can cause reflux symptoms to worsen. Sometimes, an illness will cause an older child to stop eating a previously tolerated food. This can be very discouraging if your child is already eating a limited number of foods. It may be necessary to increase the dose of reflux medications for a short period during illnesses. Consult with your doctor.

Parents report that it can take up to one month following an illness for reflux symptoms to abate and eating to return to normal. If your child has been on antibiotics, it is possible that the medication destroyed the good bacteria in the gut and caused stomach distress or diarrhea. Some doctors recommend giving probiotics (beneficial bacteria) to help the body recover quicker.

As reflux starts to go away, the symptoms may stop abruptly or they may go away gradually. Mostly likely, you will see a mix of good days and bad days with the good days gradually outnumbering the bad days. It can be very stressful when a flare-up happens after a quiet week or two and you were starting to think the reflux was gone. The reflux probably is going away – just not in nice, neat steps.

**Clues and Symptoms of Reflux**

These clues are listed vaguely in order from very common to very rare. None of the symptoms are mandatory – not even the common ones. For instance, some babies with significant reflux don’t spit up, some don’t have any pain and some sleep just fine.

**Excessive Spitting up or Vomiting**

The common definition of spit up is a small amount of stomach contents dripping or spiting out of the mouth after a meal. Spitting-up is effortless
and the baby may not even notice. Most babies with reflux tend to spit up quite a bit.

*Our baby just dripped all day long like a leaky faucet. My poor wife kept trying to dress her in those cute outfits – it was a complete waste of time.*

Vomiting is the more forceful release of stomach contents and is often associated with expelling most or all of the meal. It may come out of the nose and mouth at the same time. Vomiting, especially though the nose, is very distressing for the baby and parents.

All the spitting and vomiting should start to get better at about six months of age.

There is an easy way to estimate the amount a baby has vomited. Take an ounce of milk or water and pour it on a burp rag or the floor. Note the size of the watermark. One ounce of liquid looks like half a bottle!

In some cases, a baby or toddler may have projectile vomiting. This is a more forceful, often violent form of vomiting. Babies have been known to vomit clear across the room (right onto the new sofa of course). The baby may not be terribly distressed. Occasional episodes of projectile vomiting are not uncommon but they are always frightening to parents. Be sure to report projectile vomiting episodes to your doctor as it is sometimes a sign of a more serious problem such as pyloric stenosis.

*She just vomited. I know she did. I heard it as I walked down the hall with her on my shoulder. I put her down and grabbed a towel from the laundry basket. I looked everywhere. No vomit. Finally, I went into the next room and found the smelly pool of formula I had just fed her. My little 14-pound baby had vomiting over 4 feet. We went to the doctor to be sure it wasn't anything dangerous. It was just Olympic worthy reflux.*

**Pain**

Reflux can cause pain and may make your baby cry in a variety of ways. She may cry endlessly no matter what you try: holding, feeding or driving in the car. On the other hand, she may be happy most of the time with sudden outbursts of crying or wake up from a deep sleep and cry out.
Some babies with reflux are fussy and irritable with short, fleeting periods of happy alertness.

Toddlers may express pain by being extra clingy or fussy with a short frustration tolerance. They are notoriously bad at being able to identify the source of their discomfort and may lash out or switch moods suddenly.

It is painful to be in the same room with a baby who will not stop shrieking, arching her back, clawing and flailing. The piercing pain of a baby who is crying inconsolably can be very distressing to a caretaker. Some babies with severe pain from reflux have been known to cry for hours.

*She cried so hard and so long that she was hoarse. Her face was red and she was covered in sweat. I was also in tears and completely exhausted. Nothing helped. My husband and I took tums holding her, rocking her, changing her diaper, feeding her and we even gave her a bath. She just would not calm down.*

*After crying most of the day my neighbor took the baby to her house. I was exhausted and went right to bed. When I opened my window for fresh air, I could hear her screaming from next door.*

Some babies arch their back as a response to pain during eating or reflux episodes. Even though babies may not be very mobile, they can use their strong back muscles to pull away from the breast or bottle. You may notice arching most during mealtime as you both change positions and struggle to find a comfortable position. It may feel like you are baby wrestling rather than providing nourishment. (See Sandifer’s Syndrome)

Remember, not all crying and pain is from reflux. Constipation, milk protein allergy and many other medical conditions need to be considered when evaluating a baby who is in pain.

**Poor Sleep**

Many babies with reflux are such poor sleepers that there is a whole chapter devoted to this subject. Most babies with reflux have some difficulty falling asleep and staying asleep. During sleep, a combination of relaxed
muscles (including the stomach muscles) and a reclined sleeping position, allows acid to escape from the stomach and burn the esophagus and mouth.

*When I took him in for his 4-week checkup, I mentioned to the doctor that he seemed to be crying more and more often especially at night. I asked the doctor if he could have nightmares or night terrors at his age because he would sleep for about an hour and then wake up screaming and did this all night. We soon learned that it was reflux and not night terrors that was causing the night waking.*

**Wet Burps, Hiccups and Gulping**

Your baby may not spit up at all. She might just have wet burps, wet hiccups or you might hear food coming part way up her throat. Some parents report that they can hear loud rumbling and strange noises coming from the very tiny digestive systems of their babies. The wet burps and wet hiccups may be quite painful for some babies. Parents learn pretty fast what all of these gurgles and burps mean.

*When my son reflexes, it sounds like hiccups. If he starts to have a distressed look on his face and his little arms start waving, I know it is time to get ready for the whole meal to come up.*

Silent reflux is the term that doctors use to describe a baby who reflexes but doesn’t spit up. The medical term is occult (hidden) reflux. The food and stomach acid come half way up and your baby may swallow hard to keep the stomach contents from getting all the way into her mouth. Your baby may make disgusted faces or cry out suddenly. You may also hear grunting, choking or coughing.

Doctors call this silent reflux. I call it “invisible” reflux since babies who have it are rarely silent. And if you listen closely, you can hear the stomach contents bouncing.

There is some concern that silent/invisible reflux may be under diagnosed and under treated. Without an obvious symptom such as spit-up or vomiting, it may be less obvious that there is a problem. The fact that the stomach contents don’t come out of the mouth means there is less laundry, but it can still cause all the same medical problems.
Some babies spit and vomit for months and then stop. In most cases, this means that the reflux is gone, but unfortunately, some of these babies and young children have become silent refluxers.

**Poor Eating**
Many children with reflux are poor eaters. When they swallow food, it hurts, so they avoid eating. (See the three chapters about feeding for more information.)

**Underweight**
Reflux can have a big impact on growth. Frequent vomiting or poor feeding can lead to a pattern of slow growth or weight loss.

Your doctor will measure your baby's growth frequently during the course of well baby check-ups. If a worrisome pattern of slow weight gain develops, the doctor may ask you to bring your baby in more frequently for weight checks. Poor weight gain can be a sign that something is wrong and weight loss of more than a few ounces should be investigated right away.

Gaining the right amount of weight is very important to help your child grow and stay healthy. Very small babies can get in danger quicker if they get sick. (See Failure to Thrive on page 67??.)

> Our son had to be coaxed to drink a 4-ounce bottle. As soon as he was finished, he would vomit half of it right up. We kept a very close eye on our baby’s weight. The pediatrician has us bring him in every other week for weight checks because he had fallen to the fifth percentile. She was concerned that he didn't have enough weight to spare if he got a fever and couldn't eat for a few days. My wife and I really had to work hard to get nudge his weight back up past the 5th percentile.

**Overweight**
Some babies with reflux grow just fine or even become quite over weight. Your baby may have learned that it feels better to have a sip of milk to push the acid back down. From her point of view, she is trying to “fix”
the reflux. It is important to watch that she doesn’t get her stomach overly full because overeating can aggravate reflux too.

*My story: My son was huge! He didn’t care a bit when he vomited as long as I fed him again...immediately! The pediatrician urged me to cut him back a bit. It was a fine balance between letting him soothe his sore throat and letting him eat till he threw up – again. Letting him suck a pacifier helped.*

**Drooling**

Immediately after a reflux event, the saliva glands may produce large amounts of saliva to help wash any acid out of the esophagus. You may notice your baby drools a lot even if she is not teething. This is called water brash or hyper-salivation.

*I could tell when my baby’s reflux was acting up – his shirts would be wet from drooling on them.*

**Bad Breath**

Many babies and children have bad smelling breath when their reflux is acting up. Some parents say that the sour milk smell is one of the easiest clues to monitor.

*I’m the father. I’m allowed to have bad breath in the morning. But in our family, it’s the baby who could drop a moose at ten paces with her breath. At least it’s only bad when her reflux is acting up!*

**Respiratory Clues and Choking**

Little babies have little airways so any irritation or swelling in the airway can make their breathing sound loud and congested.

A baby with reflux may cough and gag during and after a meal if the meal she just ate is being refluxed back up again and aggravating her airway. She may make throat-clearing noises when this happens.

If acid or acid vapors get all the way into the lungs, it can cause more serious complications such as pneumonia or bronchitis. If your child with reflux develops a severe or nagging cough, call your doctor.