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Colic: What it is and what to do about it

Colic is a general term used for babies who cry *more than three hours a day for more than three days a week*. A baby with colic will often cry inconsolably despite all attempts to comfort and soothe. The cause of colic, which affects one in five babies, is not clear. Some experts think that colic may be connected to the development of the infant's intestinal system, or, in some cases, that it may be related to acid reflux (GERD) or food allergies.

What colic looks and sounds like

Parents of babies with colic often say that the babies look like they are angry or in pain, have gas or trying to go the bathroom without success. Other characteristics of a baby with colic:

- Higher pitched, more frantic crying
- Sudden crying, starting out of nowhere and for no apparent reason
- Rigid or stiff body, often with clenched fists
- Bent legs and stomach may feel hard

Timing of colic

Colic, and the inconsolable crying that goes with it, often begins at two weeks after a baby's due date, reaches a peak about six weeks past the due date and generally ends by the time the baby is 12-14 weeks old (or four months past the due date). Your baby's crying may taper off gradually past the six-week mark, or one day your baby might just stop the extended crying spells altogether. It may feel endless and unbearable while you are in the midst of it, but it will end.

What to do about colic

Pediatricians may be sympathetic and recommend mylicon drops or gripe water, but, often doctors will tell parents to "just be patient," because colic is not harmful to the baby and it will go away on its own. If you are in week three or four of the crying, having someone tell you to "be patient" for 12 more weeks may seem impossible to consider. In order to make it through the time, you will have to develop some great self-care strategies and enlist support. Here are a few things you can do in the meantime:

- Focus on one day at a time (you should even mark off the days on a calendar if that helps).
- Ask your doctor to consider the possibilities of **food allergies or acid reflux (GERD)**, which can be remedied. If you are breastfeeding, you can try adjusting your diet to see if that affects your baby's crying spells.
- Ask for help—support from your spouse, family, friends and a babysitter or nanny will be essential to getting through the first few months of your baby's life.