

INFANT GER/GERD

Gastroesophageal Reflux



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WHAT IS GER/GERD?

A condition in which the stomach contents move backwards along the digestive tract into the esophagus due to stomach muscle contractions. GER in infants specifically could be due to the immaturity of the gut and can interfere with feeding patterns. Infants with reflux are often seen as irritable or difficult to feed due to their discomfort associated with eating. (3)

The main difference between GER and gastroesophageal reflux disease (GERD) is that GERD is accompanied by troublesome symptoms that often lead to further medical complications. Most reflux resolves in infants by the end of the first year of life. (2)

NUTRITION & SUPPLEMENT MOM'S DIET CHANGE

When a baby has shown signs of GER it is important to keep a food diary or do an elimination diet of major allergens to rule out if any of these foods are contributing to the GER (7). A good place to start is with the top eight food allergens: cow's milk, eggs, tree nuts, peanuts, wheat, soy, and shellfish/fish (8). Another major dietary change that can be made by the mother if the baby is experiencing GER is to eliminate or decrease caffeine in their diet, as this can affect the breast milk and affect the baby (1).

Formula fed infants can be put on a trial of extensively hydrolyzed or amino acid formula to see if this can help with symptoms. (2)

Breastfeeding women require higher RDAs for vitamins & minerals than their non-breastfeeding counterparts. These include vitamins A, C, E, D, all the B vitamins, and choline. When the breastfeeding mother is low on these vitamins so is her breastmilk, and therefore her baby. Supplementation and/or foods high in these vitamins are necessary for optimal nutrition (5).

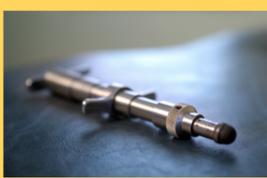
LIFESTYLE BREASTFEEDING

Infants should breastfeed in smaller volume, but more frequently, and only feed from one breast at a time. After feeding, keep the infant in an upright position for about 30 minutes. (6)



INTEGRATIVE HEALTH CHIROPRACTIC

Regular chiropractic care, which consists of 2x/week for 4 weeks, then 01x/week for 6 weeks, using the Activator instrument method by a Pediatric certified Chiropractor (4).



CRANIOSACRAL & MYOFASCIAL THERAPIES

Both use gentle pressure to help relieve specific stresses and strains within the tissues around the infant's skull, neck, thoracic (upper back of spine), and sacrum (base of spine) (10).

RESOURCES

To find a local Pediatric Chiropractor:
<https://icpa4kids.com/> & click 'Find an ICPA Chiropractor,' then enter your zip code.

La Lecha League for Breastfeeding support:
<https://llusa.org/>

GER/GERD info/support:
<https://www.healthychildren.org/English/health-issues/conditions/abdominal/Pages/GERD-Reflux.aspx>

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