

#### **Full Episode Transcript**

With Your Host

**Devon Clement** 

Reflux is a very common ailment in young babies, and a lot of times parents are concerned that they aren't going to be able to get their baby sleeping better while they're still dealing with the reflux issues. I'm going to tell you whether or not that's true. Stay tuned.

Welcome to *Parenthood Prep*, the only show that helps sleep-deprived parents and overwhelmed parents-to-be successfully navigate those all-important early years with their baby, toddler, and child. If you are ready to provide the best care for your newborn, manage those toddler tantrums, and grow with your child, you're in the right place. Now here's your host, baby and parenting expert, Devon Clement.

Hello and welcome back to *Parenthood Prep*. It is a gorgeous summer day. I feel like we've just been having such nice weather this summer here on the East Coast. There's definitely been some heat waves, but for the most part, it's been pretty mild and just warm enough during the day to really enjoy being outside, so I'm happy about that.

I currently have six foster kittens, a group of four that are just starting to eat food on their own, and an older one who is doing very well, except that I accidentally closed his tail in the door the other day and he was pretty unhappy about that. They bounce back pretty quickly, though. I felt terrible. It's funny, sometimes when something happens to your kid or obviously to your pet that's your fault, a total accident - he was trying to get out the door in a flash. I didn't even realize he was there. I just opened the door, came in the room, shut the door behind me, and in that split second, he had tried to run through it and I pinched his tail.

Sometimes you bop your kid's head into the doorframe when you're walking through into a new room. These different things happen and of course, they get upset, but they get over it so much more quickly than we do as adults, which is funny, but I guess it does help us be a little bit more conscientious going forward. I will be checking doorways from now on to make sure that there's no kittens trying to go through.

So, today, we're going to switch gears a little bit and go back to our ongoing series, Can I Sleep Train My Baby If? We talked about whether you could sleep train your baby if you're body feeding, breastfeeding. Now we're going to talk about whether you can sleep train your baby if they have reflux, which is a question that I get all the time. And sometimes not even a question as much as a statement, like, "Oh, well, I have to wake up every 2 hours and feed my baby because they have reflux and there's nothing I can do."

I'm going to reiterate what I always say: there is always something you can do. If your baby has reflux, first of all, what is reflux? In adults, it's called acid reflux and it's heartburn. It's when the food that you eat doesn't fully settle in your stomach and the stomach acid and stuff that's breaking it down comes back up your esophagus. And we have something in the middle of the esophagus or somewhere in the esophagus called the esophageal sphincter. I can never say that word without thinking of Beavis and Butthead and wanting to giggle. But that is what it's called. And basically, it just means an opening that can also close. So when we want food to go down, the esophageal sphincter is open, the food goes down into our stomach through our esophagus. Anyone who's seen that episode of Magic School Bus knows how that works.

The food goes down into your stomach through the esophageal sphincter. If it does not close all the way, then the food is able to come back up. It should close all the way, keeping the food and the acid down in your stomach. What happens a lot of times with babies, and the reason why reflux can be very common in newborns, is that they are growing so fast, especially if they're a little early or a preemie, it's more common. They are growing so fast that things are growing at different rates and the sphincter can't keep up with how fast they're growing. So it actually can't even fully close all the way and that's why their food comes back up.

A great remedy that you'll often be told either by your pediatrician or you'll read it online or hear it from other parents is to hold them upright after a feeding. So if you can imagine, we want gravity on our side. So, if you fill a baby's belly with milk and then they lay on their back and that esophagus isn't fully closed, the

milk is going to be able to come back up, which gives them gas. It makes them burp. It makes them sort of feel uncomfortable. A lot of times a sign of reflux is that your baby arches their neck and their back and their head backwards in a backward C-shape because they're just trying to get away from that food that's repeating back up their esophagus.

So, if you're holding them upright, then it would take a lot of effort for that milk to come back up the esophagus, and if we have gravity on our side, we can keep it sitting in their stomach while it digests into the next stages of the digestive system. So, sometimes people say, "Well, I try to put her down awake, but I have to hold her upright for 10 to 15 minutes after feeding, so I hold her on my shoulder and she always falls asleep." Which of course, it's very cozy. You're tired. You have a belly full of milk. You're very happy. You're snuggled up with your parent. Of course, you're going to fall asleep. I would.

So, there's lots of different reasons why people struggle with sleep training if their baby has reflux. Another is that a reflux baby a lot of the time doesn't want to eat as big of a feed as a baby that doesn't have reflux. Which again makes sense. You fill your stomach with all this food and it's going to repeat back up. That's more likely to happen if your stomach is very full. So a lot of times a reflux baby will want to eat a smaller amount because as they eat more and more, it gets uncomfortable for them.

But another reason for that is if your esophagus and by continuation, your throat was kind of bothering you and felt uncomfortable, what is very soothing to that? Warm liquid. What feels better when you have a sore throat than a nice hot cup of tea or something cold like ice cream? You want that temperature change to soothe that pain.

So, a reflux baby will look for an ounce or two ounces or a few minutes of nursing rather than doing a full feed, and they'll just be snacking instead because they really want to soothe that discomfort.

Obviously, if you suspect your baby has reflux, you should talk to your pediatrician. It's kind of the wild west out there now for reflux treatment. They

used to put every baby on Zantac and then they realized there was some reason that was dangerous and was causing cancer, I think. So now they really don't put babies on Zantac anymore. And they haven't really settled on a different medicine that they like.

I think most things, when they first realize something is wrong, they just start throwing this medication at everybody, this treatment. I see the same thing with tongue tie. Every lactation consultant is going to tell you your baby has a tongue tie. And they probably do to an extent. Is it so terrible that's what's causing your issues with nursing? Is it so terrible that they're going to have a speech impediment when they get older? Not necessarily, but let's treat it and see what happens. And that's the attitude of a lot of lactation consultants. A lot of pediatricians are like, "Oh, tongue tie's no big deal. It's overdiagnosed." Blah, blah, Anyway, that's a tangent.

The baby has reflux, let's put them on Zantac. That was the answer in the olden days of the late 90s and early 2000s. They're not really doing that anymore. So, the pediatrician might put your baby on a medication or they might just tell you to hold them upright after feeds. And that's okay. They will outgrow it. It tends to peak around four months and then get better from there on its own. But if it's really bad and your baby is crying a lot and they seem to be in a lot of pain, and you ask the pediatrician about reflux, they might suggest some different options for you, including medication, including possibly seeing a gastrointestinal, GI specialist.

So there's a lot of different things you can do. So, obviously, your first line of defense is to talk to your pediatrician about what they think. They could tell you it's just mild, developmental reflux. It doesn't need to be medicated. We're just going to hold the baby upright after feedings, etc.

But none of this means that you can't sleep train or do anything to improve your baby's sleep. In fact, what I usually tell people when they ask me, "My baby has reflux, so can I sleep train?" Or they tell me, "My baby has reflux so I can't sleep

train," what I usually say is that you can actually improve the reflux with sleep training. Devon, how is this possible? This sounds crazy. I know, right?

Because here's the thing: when do they get reflux? When they eat. When they are digesting and their belly has food in it and that food starts repeating - and by food, I mean milk or formula - and that food starts repeating, coming back up the esophagus, that's what causes the discomfort. And then, how do they soothe the discomfort? More eating. Right? And then it becomes this vicious cycle where they're having this reflux pain throughout the night.

If we can reduce those night feedings, if we can get them eating less overnight, they're digesting less. Digesting less means less food is coming up that esophagus and causing them discomfort and pain. So, by getting them going longer stretches without a feed overnight, they're actually a lot more comfortable and sleeping a lot more peacefully than they were before we did anything to improve their sleep or night wean.

Now, does that mean that we're going to take a baby who just ate a huge feed and is experiencing reflux pain and throw them down in the crib and let them cry until they fall asleep? No, of course not. We're going to work on maybe splitting that feed up over a longer period of time. Start earlier, feed them half their feed before you do the bath and everything. Then feed them the second half, so that they're not getting so much all at once. There's a lot of different things you can do.

One caveat that I will say is I say you can always do something. If you just started reflux medicine yesterday, don't start trying to change your baby's sleep. Focus on one thing at a time. And the thing that we're doing right now is getting them used to the medication and seeing what the results are, so that we're able to decide what the next step is in terms of sleep training. So, give it a week, two weeks to take effect, to work, to see how your baby's feeling about it before you decide to make any major changes to their sleep.

But what I would do with a reflux baby is just spend longer doing that last feed before bed, and then don't lay them down immediately. Now, put them up on

your shoulder, they're probably going to fall asleep. You don't have to put them up on your shoulder. Holding them upright just means having them be in a vertical position. So what I'll usually recommend, if your baby's teeny tiny, like 3 months, this might not be as effective, but if they're 4 months, 5 months, somewhere in there, older, holding them upright could mean sitting them on your lap and reading a book, facing out, keeping them awake, keeping them distracted, so that you're able to put them down when they're awake.

One of my number one cardinal rules for sleep training is keep them awake and put them down awake so that they are able to understand their environment, understand their surroundings, say, "Okay, I'm in my crib now and this is where I fall asleep." Instead of falling asleep in your arms or on your shoulder or on the bottle or on the boob, and then being put in the crib asleep where they either get woken up immediately or wake up after one sleep cycle and say, "Where the hell am I? Why am I not in my parents' arms anymore?"

So by falling asleep in the crib from wide awake, that's how they're going to learn to fall asleep on their own. There have been a few babies in my career that just would not stay awake during that bedtime feed or just would not stay awake during that holding upright, no matter how early we started. We had all the lights on, we're practically dangling them by an ankle, feeding them so that they're not too cozy. All of these things, just no way to keep them awake. And in that situation, you know what? It's totally fine. Let them have a little snooze, little doze. "Okay, you fell asleep, that's fine. We're still going to do the feed a lot earlier. It's not quite bedtime yet. But if you're dozing off during the feed, great, fine. We'll let you sleep for a few minutes while you finish the feed."

And then I'm going to gently wake you up, maybe put you on the changing table, change your diaper, read a book, maybe even play a little bit, sing a song, not getting them super riled up, but getting them awake enough. Does waking, getting your baby woken up mean, "Oh, their eyes flutter open as I'm putting them in the crib and then immediately close again"? No. I want five plus minutes of very wide awake, obvious awake baby before I'm putting them down in the crib because I want them to be aware of their surroundings.

And then we want to reduce their night feeds. I have a whole episode about night weaning, so I'm not going to go into a ton of detail about how to do that, but the purpose of this episode is just to reassure you that feeding them less overnight is actually going to help their reflux. It's going to help their comfort rather than make it worse. Because again, when they're eating less, there's less in their stomach for longer periods overnight. They're digesting less and it's not bothering them.

So we have sleep trained many a reflux baby who has done super, super well and we've actually seen a pretty significant reduction in reflux symptoms. Another theory that I have generally about babies, which you may or may not be ready to hear, so brace yourself, is that I think a lot of fussiness, crying, crankiness, not sleeping, struggling with sleep, mostly fussiness and crying is exacerbated by overtiredness.

So, yes, your baby may be absolutely miserable with reflux, or they might be kind of uncomfortable with reflux, but because they're not getting enough sleep and they're so tired, they are going to be miserable. They're going to be unhappy. They're going to be cranky. Reflux is sort of one of the sub reasons, the lesser reasons that people blame their babies crying and fussiness and discomfort, not as much as gas or teething, which I also think get far too much credit, but I do think in a lot of situations that reflux gets far too much credit for babies being miserable, and that by getting more sleep, getting better quality sleep, they're just going to be happier generally.

So, that's really where I would say I think that it is the better choice to sleep train or to have your baby getting better sleep when they have reflux rather than saying, "Oh no, they have reflux. There's nothing that can be done." So, that's it. Your baby with reflux can sleep better. Good luck and let me know if you have any questions. I'm always here.

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can find us on Instagram @happyfamilyafter or at our website HappyFamilyAfter.com. On our website you can also leave us a voicemail with any questions or thoughts you might have, and you can roast your baby. Talk to you soon.

Thanks for listening to this week's episode of *Parenthood Prep*. If you want to learn more about the services Devon offers, as well as access her free monthly newborn care webinars, head on over to www.HappyFamilyAfter.com.