

The Colic Report (2)

Health professionals' survey

*A report for Dr. Brown's Natural Flow in the interests of mothers concerned for their
colicky babies*

May 2010



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EXECUTIVE SUMMARY

Colic is a common ailment that splits the health professional world as general understanding, the causes and the cures differ vastly. With almost half of all babies in the UK developing colic at some point, it is a familiar complaint and causes parents enormous frustration and upset in the home, yet there is very little agreement amongst those who work with babies about what should be done to treat it. In this survey 253 health professionals who work closely with new babies and their mums were interviewed in depth and the results show that frequently health visitors, midwives, GPs and paediatricians cannot agree on how to treat colicky symptoms, sometimes offering new mums little effective guidance about what to do.

From their own personal view, health professionals felt that digestive and feeding problems were most often the cause of colic in young babies but a quarter also offered up their own take on the origins of colic. A recurring suggestion was immature bodies and gut immaturity, suggesting that colic is a natural occurrence and it just 'happens' in some babies. Other suggestions included over feeding, the type of bottle being used and also the inexperience of motherhood. All in all it seems that there is no one absolute agreed cause of colic in young babies, as one health visitor from Yorkshire summed it up perfectly when she exclaimed 'there is a question mark on it.'

Since almost 4 out of 5 health professionals agreed that feeding problems were most likely to be the cause of colic in young babies, it is surprising that more than a quarter felt that whether mums breast or bottle fed made no difference to the likelihood of colic developing. 83% of midwives felt that breast-fed babies were the least likely to develop colic, taking the view that the breast is better because it is part of the natural process. Health visitors remain the most impartial with two fifths admitting that they have found not one way or the other to be the cause of colic and proclaiming that some babies are just more prone to colic than others.

The debate about giving young babies medicine to ease their colicky symptoms continues amongst professionals as well as parents. With 46% of mums expressing concern over giving their young babies medicine to ease their colicky symptoms, it is no wonder that health professionals are seeking more natural suggestions. Most prefer to recommend a change in the teat first of all and then a bottle change before turning to medicine. In fact, 64% of health professionals said that they are concerned about giving young babies medicine for colic, making them more reserved than the mums. It is a common feeling among co-workers that mums are often too quick to turn to medicines like Infacol, Colief and gripe water, as a cure mainly because they hate to see their baby in such discomfort.

Many health visitors believe that it is not just a change in the teat or bottle that will alleviate colicky symptoms. Over a quarter of them could suggest alternative measures, varying from feeding the baby cooled boiled water, to massage, cranial techniques and boiled fennel seeds. There was also one health professional who was resolute that the proven cure was to carry the baby for two hours every morning to reduce colic in the evening!

Of those health professionals who suggested changing the bottle and knew which brand they would recommend, 70% could confidently say that they'd recommend Dr Brown's Natural Flow to their patients, agreeing that it really does work. Describing the bottle as 'impressive' 'makes a real difference', 'my first recommendation' and 'phenomenal' it is clear that Dr Browns Natural Flow is making a real impact on the health professional world, in particular the health visitors. The survey showed that they knew the most about Dr Brown's capabilities with a staggering 89% selecting it as their number one choice.

Melanie Stead
Report Author

KEY FINDINGS

Key facts are highlighted in the report which follows.

Page numbers where corresponding tables can be found are indicated in brackets after each fact.

78% of health professionals are agreed that the most common cause of colic in young babies is digestive or feeding problems, including swallowing air. A quarter (24%) felt that the mother's diet could be to blame. [p.6]

According to health professionals in the survey, bottle fed babies are the most likely to develop colic (68%) but a quarter (26%) of health professionals interviewed would argue that whether baby is bottle or breast fed, it has no effect on the likelihood of colic occurring. [p.7]

A whopping two fifths (40%) of health visitors in this survey believed that it made no difference whether baby was bottle or breast fed to their chances of developing colic. [p.7]

64% of health professionals feel concerned about giving medicines to young babies to ease their colic. [p.8]

Over half (53%) of health professionals feel concerned about giving medicines to young babies but would seek medicinal help as a last resort. 7% think that medicine should never be given as a cure to colicky symptoms in young babies. [p.8]

Student and trainee midwives and nurses are the least concerned (48%) of all health professions about giving medicine to young babies to ease their colicky symptoms, adopting an 'if it helps, then it's worth it' attitude. [p.8]

Midwives are the most concerned when it comes to giving small babies medicine with 11%, compared to the national average of 7%, claiming that small babies should never be given any medicine for colic. [p.8]

The most common suggestion from health professionals to mums whose babies still have colic after checking the feeding technique, is to change the teat on the bottle (69%). This is followed by changing the type of bottle (56%). [p.9]

Health visitors are the most likely of all the health professions to suggest changing the type of bottle (67%), whilst midwives would prefer to change the teat (83%). A staggering three quarters (73%) of GPs would turn straight to a medicinal solution after ensuring that the feeding technique is correct. [p.10]

Of those health professionals who would suggest changing to a specific brand of bottle, 7 out of 10 would suggest Dr Brown's Natural Flow to their suffering mums and babies. [p.10]

An astounding 9 out of 10 (89%) health visitors who would suggest changing to a specific brand of bottle would have no reservation in recommending Dr Brown's to mums whose babies still have colicky symptoms. [p.11]

Dr Brown's Natural Flow is also the midwives' favourite with over three quarters (76%) suggesting that mums try changing to this bottle. [p.11]

THE INTERVIEWEES

There were 253 health professionals who have contact with new mothers, involved in our survey. These included GPs, paediatricians, health visitors and midwives from England, Scotland, Wales and Northern Ireland.

In lengthy telephone and face to face interviews they were asked what they knew about the cause of colic in babies, whether they felt concerned about giving young babies medicine for colic and what they would suggest to ease colicky symptoms.

The fieldwork was carried out during April and May 2010. Figures may not add up to 100 due to rounding up.

Gender

Male	6	2%
Female	247	98%
Total	253	100%

Occupation

Health Visitor/ Nursery Nurse (i.e. health visitor support)	81	32%
Midwife	87	35%
GP	12	5%
Paediatricians and Paediatric nurses	20	8%
Trainees and Students	23	9%
Other	29	12%
Total	252*	101%

*One interviewee wished to keep their occupation private

Other occupations
Pharmacist
Maternity Care assistant
Maternity support
Care assistant
Nursery Manager
Support recovery worker
Family support worker
Community Health Child worker
Breast feeding support officer
Responses in bold were given by more than one interviewee

After three months all questionnaires are destroyed to protect the privacy of the interviewees

THE FINDINGS

What do you feel is most often the cause of colic in young babies? We would like your personal view, based on your own experience, and not necessarily any official view

Respondents could choose multiple answers

Digestive /feeding problems – swallowing air	78%
Lactose intolerance	22%
Mother's diet	24%
Mother's smoking	14%
Stress/noise in the household	21%
Other	26%

Other

It's unknown

Over feeding

Immature bodies

Gut immaturity

Positioning of the bottle

Type of bottle

No evidence to support any of the above

Bottle feeding

Formula milk

Not winding property

Trapped wind

Latching on incorrectly

Reflux

Birth trauma

Muscle tensions and spasms

Depends on the individual child

Feeding technique

Multi factors

Natural causes

Inexperience of motherhood

Baby drinking too quickly

Responses in bold were given by more than one interviewee

What do you feel is **most often** the cause of colic in young babies? We would like your personal view, based on your own experience, and not necessarily any official view

By occupation

Respondents could choose multiple answers

	Health Visitor	Midwife	GP	Paediatrician	Students	Other
Digestive /feeding problems	72%	83%	82%	70%	91%	72%
Lactose intolerance	32%	17%	36%	5%	32%	10%
Mother's diet	23%	17%	36%	30%	50%	21%
Mother's smoking	17%	9%	9%	10%	27%	14%
Stress//noise in the household	27%	9%	27%	40%	27%	17%
Other	35%	24%	9%	25%	18%	21%

Does the difference between breast-feeding or bottle-feeding have any effect on the chance of a baby developing colic?

Breast-fed babies more likely to develop colic	2%
Bottle-fed babies more likely to develop colic	68%
Whether baby is breast or bottle fed has no effect on the likelihood of colic	26%
Don't know	4%

Does the difference between breast-feeding or bottle-feeding have any effect on the chance of a baby developing colic? By occupation

	Health Visitor	Midwife	GP	Paediatrician	Students	Other
Breast-fed babies more likely	2%	1%	0%	5%	0%	7%
Bottle-fed babies more likely	53%	83%	67%	70%	78%	55%
Whether breast or bottle fed has no effect	40%	16%	25%	15%	13%	31%
Don't know	5%	0%	8%	10%	9%	7%

Do you feel concerned about giving medicines to small babies to try to ease colic?

Feel concerned and don't think small babies should be given any medicine for colic	7%
Feel concerned and think other methods should be tried before resorting to medicine	53%
Feel concerned but think medicine is the right treatment as soon as the baby develops colic	4%
Am not concerned about giving medicine to small babies	34%
Don't know	3%

Do you feel concerned about giving medicines to small babies to try to ease colic? *By occupation*

	Health Visitor	Midwife	GP	Paediatrician	Students	Other
Don't think babies should be given any medicine	5%	11%	8%	5%	0%	7%
Think other methods should be tried first	48%	57%	50%	60%	48%	55%
Feel concerned but think medicine is right	5%	2%	8%	10%	0%	0%
Am not concerned about giving medicine to babies	40%	28%	25%	20%	48%	34%
Don't know	2%	1%	8%	5%	4%	3%

Comments

"Mums are really quick to assume that their baby's discomfort is colic so they want to turn to medicine to solve it," Mrs F, midwife

"If the condition is too severe then some relief should be given," Heather, nursery nurse from Colyton

"I am concerned at how often the mums administer the medicine," Agnes, pharmacist from Glasgow

"Mums are always too quick to assume that it's colic. They don't try other things first," Anon, midwife

"I used Infacol for my own baby and would recommend it," Joanne, midwife from Devon

"None of the medicines work well in my opinion" Anon, paediatrician

"I'd first suggest waiting ten days before jumping on the medicine bandwagon," midwife from East Anglia

"I'd suggest something to help baby to release wind e.g. Infacol or I might try hydrolysed milk. I wouldn't suggest anything stronger," Heather, neonatologist from Dumfries

"Mum is generally the reason for the medicine to be given, as she does not like to see the baby in distress," Sara, community nursery nurse from Tring

"I am concerned because I think it's worrying that mums can buy stuff over the counter so easily," Anon, community nurse from the West Midlands

If baby is being bottle-fed...and presuming mum has the right technique in holding the bottle, keeping the baby fairly upright, winding regularly etc...What would normally be your main suggestions to a mother whose baby is still suffering from colic?

Respondents could choose multiple answers

Give baby a medicine for colic	36%
Change the teat on the bottle	69%
Change the type of bottle	56%
Change the milk formula	25%
Other	27%

Other

Cooled boiled water

Boiled fennel seeds

Massage

Address winding technique

Go to the GP

See an osteopath

Talk to a health visitor

Use a cranial technique/ massage

Warm bath

Ensure they had enough or not too much food

Gripe water

All of the above

Alternative therapy

Look at how baby sleeps

Have head and spine checked for damage

Change to a goat's milk formula

Herbal teas

Start/ stop feeding

Carry baby in the early part of the day for 2 hours to reduce colic at night

Responses in bold were given by more than one interviewee

If baby is being bottle-fed...and presuming mum has the right technique in holding the bottle, keeping the baby fairly upright, winding regularly etc...What would normally be your main suggestions to a mother whose baby is still suffering from colic? *By occupation*

Respondents could choose multiple answers

	Health Visitor	Midwife	GP	Paediatrician	Students	Other
Give baby a medicine for colic	38%	32%	73%	20%	48%	31%
Change the teat on the bottle	63%	83%	45%	45%	87%	62%
Change the type of bottle	67%	60%	27%	40%	65%	34%
Change the milk formula	23%	17%	45%	40%	22%	34%
Other	37%	22%	27%	20%	17%	31%

Comment

"I wouldn't suggest medicine, but often mums know that that is what they want to try straight away," Ms M, midwife

"Our doctors won't prescribe any medicines for colic, so if mums want those they are forced to pay privately. To protect them from that huge cost we try to suggest other things such as changing the bottle," Anon, nursery nurse

"It depends on the age of the baby," Anon, midwife

"Change the teat. A lot of manufacturers put a very small hole in the bottle so the baby has to suck too hard," midwife from the East of England

"I would not suggest changing the bottle as that's far too expensive. I'd recommend using an anti colic teat instead," Caroline, health visitor from Poole

"I don't think that it's the bottle, I just think it's how the baby feeds," Sheila, staff nurse from Dyfed

"It is the size of the teat that is important, especially if they are tiny babies," Jillian, maternity care assistant from Cardiff

"The bottle is just a container and doesn't make a difference, but the teat is important," Karen, health visitor from Penzance

"I don't think the anti colic bottles work and I think that natural ways are better and safer for baby," Teresa, health visitor from Potters Bar

If a baby had colic and you suggested changing to a different type of bottle, which would you suggest mum tries...and why?

Base: health professionals who suggested changing to a specific brand of bottle to ease colic

Respondents could choose multiple answers

Philips Avent	13%
Tommee Tippee	13%
Dr Brown's Natural Flow	70%
MAM	6%
Mothercare own brand	3%
Boots own brand	6%

If a baby had colic and you suggested changing to a different type of bottle, which would you suggest mum tries...and why? *By occupation*

Base: health professionals who suggested changing to a specific brand of bottle to ease colic

Respondents could choose multiple answers

	Health Visitor	Midwife	GP*	Paediatrician	Students	Other
Philips Avent	6%	12%	0%	33%	9%	27%
Tommee Tippee	6%	9%	0%	33%	18%	18%
Dr Brown's Natural Flow	89%	76%	100%	27%	82%	18%
MAM	2%	12%	0%	7%	9%	0%
Mothercare own brand	0%	3%	100%	7%	0%	9%
Boots own brand	0%	3%	100%	13%	0%	27%

*Based on just 1 respondent

Comments

"I found out about Dr Brown's a few years ago and they really seem to work," Anita, midwife

"Quite a few of the mums on my ward have used Dr Brown's and have been very pleased with the results. They have been impressed with the natural flow which they say works very well," Karen, 28, paediatric staff nurse

"Dr Browns are the only brand that I know that seem to make a real difference," Miss B, midwife

"Dr Brown's bottles have a special technique that seems to work very well. I'm not exactly sure what that technique is but I know that it works!" Mrs C, midwife

"I have heard loads of good things about Dr Brown's from other midwives too," Mrs A, midwife

"You know within one day if Dr Brown's is going to work, and it usually does," Anon, nursery nurse

"I would definitely recommend Dr Brown's because I know that it works - both from my work experience and personal experience," Justine, nursery nurse from the West Midlands

"I came across Dr Brown's last year and now it would be my first recommendation as I've seen how well it works," Anon, midwife from Kettering

"When Dr. Brown's first came out, I went to a presentation about it. I then tried it on my newborn baby, who never developed any colic. So now it's only one I would recommend," Sherryann, midwife from London

"Dr Browns. It really does work. It's phenomenal," Anon, staff nurse

"I'm not actually allowed to recommend any brands. I would refer mum to a health visitor as they are the best people to recommend types of bottles," Amanda, student midwife

"I know that Boots sell lots of different types and have gathered a lot of expertise over the years," Jean, clinic nurse from Bradford

"I would never recommend a particular brand. I would advise the mum about what is available and then leave it up to her," Angela, health visitor from Kings Lynn

Comments

"I would suggest for them to try a different bottle but I'm not sure what I'd recommend," Mrs D, midwife

"I would assess the mother first of all - her ability and the cost of changing. As there are no guarantees that it will make a difference I am loathe to suggest a change of bottle because of the cost," Helen, team leader health visitor from Norwich

