INFANT FEEDING DIAGNOSTIC TOOL

This tool is designed to aid you in the diagnosis of common feeding problems. To complete this tool, please tick all relevant symptoms reported by the parents in the white boxes on screen. Once all symptoms have been recorded, click submit and you will be redirected to a printable page of practical tips and hints to help manage the infant's condition, which also provides a section for you to add any specific guidance or advice for the parent which is not already captured.

Please note, if there are two or more persistent symptoms from two or more body systems (i.e. Respiratory and Gastrointestinal) you may wish to consider cow's milk protein allergy.

SYMPTOMS OF COMMON FEEDING PROBLEMS:	Colic	Constipation	Reflux	Lactose intolerance
BEHAVIOURAL SYMPTOMS				
Difficulty sleeping				
Poor appetite and lack of energy				
Drawing knees to chest				
Recurrent episodes of excessive and inconsolable crying				
Arching of the neck and back during or after feeding				
Refusing food				
GASTROINTESTINAL SYMPTOMS				
Gastrointestinal cramps				
Abnormally delayed or infrequent passage of stools				
Excessive flatulence				
Pain and/or strain when passing stools				
Vomiting/regurgitation				
Diarrhoea				
Abdominal pain				
Gastrointestinal bloating				
Foul-smelling wind and stools				
Frequent hiccups				
SKIN SYMPTOMS				
Flushed face				
SUBI	RESET THIS TOOL			

If you are considering a formula, click on the links below to find out information about a nutritional option that may be used for each of these common feeding problems:





IMPORTANT NOTICE: Breastfeeding is best. Infant milk is suitable from birth when babies are not breastfed. We advise that all formula milks be used on the advice of a doctor, dietitian, pharmacist or other professional responsible for maternal and child care. Foods for special medical purposes should only be used under medical supervision. May be suitable for use as the sole source of nutrition for infants from birth, and/or as part of a balanced diet from 6-12 months. Refer to label for details. TRANSFORMING NUTRITION HCP 20-195. Date of prep: January 2021. © Nutricia 2021.

MANAGING INFANT REFLUX OR REGURGITATION PRACTICAL HINTS AND TIPS

Seeing your baby bring up milk during or shortly after feeding can be upsetting when not expected. Reflux refers to the bringing up of stomach contents into the food pipe. Regurgitation is when the stomach contents are actually expelled from the mouth and is also known as 'spitting up' or 'posseting'.

The good news is that it is not usually a cause for serious concern, especially if your baby is putting on weight normally and seems otherwise well. It often passes by the time he or she is a year old.

HERE ARE SOME SUGGESTIONS FOR MANAGING THE CONDITION:

- > While feeding, try to position your baby in an upright position, and try not to lay them flat for 30 minutes afterwards
- > Try to feed him or her smaller quantities more frequently avoid overfeeding
- > Make sure your baby is winded before, during and after feeds
- > If bottle feeding, check the hole in the teat is not too large as this can cause babies to gulp their feed too quickly
- > Make sure your baby's clothing or nappy are not too tight around their tummy
- > If formula feeding, speak to your healthcare professional for more information about specialist milks for the dietary management of reflux and regurgitation

YOUR BABY'S REFLUX OR REGURGITATION: MANAGEMENT PLAN

Plan developed for: __

Age: _

Following your visit, it appears your baby may be experiencing discomfort due to reflux or regurgitation.

HEALTHCARE PROFESSIONAL ADVICE AND INFORMATION FOR YOU:

MONITOR YOUR BABY

Keep an eye on your baby's symptoms and contact your healthcare professional if these change or any new signs appear.

FURTHER INFORMATION IS AVAILABLE FROM:

NHS Helpline on 111

NHS Choices website

http://www.nhs.uk/Conditions/reflux-babies/Pages/Introduction.aspx

IMPORTANT NOTICE: Breastfeeding is best. Infant milk is suitable from birth when babies are not breastfed. We advise that all formula milks be used on the advice of a doctor, dietitian, pharmacist or other professional responsible for maternal and child care. Foods for special medical purposes should only be used under medical supervision. May be suitable for use as the sole source of nutrition for infants from birth, and/or as part of a balanced diet from 6-12 months. Refer to label for details.

HCP 20-195. Date of prep: January 2021. © Nutricia 2021.

MANAGING INFANT COLIC PRACTICAL HINTS AND TIPS

All babies cry – this is perfectly normal. But a baby with colic will cry inconsolably and for no apparent reason. These outbursts are not harmful and are not your fault but there are some actions you can try:

> Hold your baby throughout a crying episode

- > Take your baby for a walk in its pram or pushchair as movement may help
- >Sit or hold your baby upright during feeds to prevent them swallowing air
- >Wind your baby after feeds
- >Give your baby a warm bath
- >Some babies find 'white noise' such as the sound of a washing machine or vacuum cleaner soothing
- >Try to hold your baby in different positions, such as gently rocking your baby over your shoulder

>Avoid overstimulating your baby by continually picking them up and putting them down

IF YOU ARE BREASTFEEDING:

- > Make sure your baby latches on properly see your health visitor or breastfeeding counsellor if you are struggling
- > You could try making changes to your diet such as reducing your intake of caffeine and spicy foods, however there is little evidence to show this works

IF YOU ARE FORMULA-FEEDING:

- > Check the size of the teat, and consider a 'fast-flow' teat
- > Speak to your healthcare professional for more information if you are considering using a specialist milk for the dietary management of colic

YOUR BABY'S COLIC MANAGEMENT PLAN

Plan developed for:

Age: _

Following your visit, it appears your baby may be experiencing discomfort due to colic.

HEALTHCARE PROFESSIONAL ADVICE AND INFORMATION FOR YOU:

MONITOR YOUR BABY

Keep an eye on your baby's symptoms and contact your healthcare professional if these change or any new signs appear.

Further information is available from:

NHS Choices website (www.nhs.uk/Conditions/Colic)

NHS Helpline on 111

IMPORTANT NOTICE: Breastfeeding is best. Infant milk is suitable from birth when babies are not breastfed. We advise that all formula milks be used on the advice of a doctor, dietitian, pharmacist or other professional responsible for maternal and child care. Foods for special medical purposes should only be used under medical supervision. May be suitable for use as the sole source of nutrition for infants from birth, and/or as part of a balanced diet from 6-12 months. Refer to label for details.

MANAGING FUNCTIONAL CONSTIPATION IN INFANTS PRACTICAL HINTS AND TIPS

Constipation is quite a common problem, affecting approximately 15% of infants in their first year of life. In many cases it can also occur in combination with other feeding issues such as regurgitation or colic. Constipation is seen more frequently in formula-fed infants. If a baby doesn't poo at least three times a week, has painful or hard bowel movements, poor appetite and foul-smelling wind or stools then they may be suffering from functional constipation. If this occurs, here are some things you can try:

- > Lie your baby down on their back and move their legs in a cycling motion
- > Give your baby a gentle tummy massage

IF YOU ARE BREAST-FEEDING:

- Constipation is rare in babies that are breast-fed, consider talking to a healthcare professional to explore other potential causes
- > Exclusively breastfed babies don't need additional water until they've started consuming solid foods

IF YOU ARE FORMULA-FEEDING:

- > Try giving additional cooled, boiled water between normal feeds
- > Make sure feeds are made up according to the manufacturer's instructions
- > Speak to your healthcare professional for more information if you are considering using a specialist milk for the dietary management of constipation

IF YOUR BABY IS WEANED:

- > Ensure your baby is drinking enough fluids with their food and between meals
- > For older babies who have moved onto solid foods, ensure they are getting enough fluids in between feeds and ensure their diet contains enough fibre. Apples, pears and prunes are particularly high in fibre
- > Don't force them to eat if they don't want to

YOUR BABY'S CONSTIPATION MANAGEMENT PLAN

Plan developed for:

Age:

Following your visit, it appears your baby may be experiencing discomfort due to constipation.

HEALTHCARE PROFESSIONAL ADVICE AND INFORMATION FOR YOU:

MONITOR YOUR BABY

Keep an eye on your baby's symptoms and contact your healthcare professional if these change or any new signs appear.

FURTHER INFORMATION IS AVAILABLE FROM:

NHS Choices website: www.nhs.uk/Conditions/pregnancy-and-baby/pages/constipation-and-soiling.aspx) Start4Life website: www.nhs.uk/start4life/baby/breastfeeding/breastfeeding-challenges/constipation/ NHS Helpline on 111

IMPORTANT NOTICE: Breastfeeding is best. Infant milk is suitable from birth when babies are not breastfed. We advise that all formula milks be used on the advice of a doctor, dietitian, pharmacist or other professional responsible for maternal and child care. Foods for special medical purposes should only be used under medical supervision. May be suitable for use as the sole source of nutrition for infants from birth, and/or as part of a balanced diet from 6-12 months. Refer to label for details.

MANAGING LACTOSE INTOLERANCE IN INFANTS PRACTICAL HINTS AND TIPS

Lactose is a type of sugar naturally found in milk. The body digests lactose using an enzyme called lactase, which breaks down lactose so that it's more easily digested. If the body does not produce enough lactase, then a lactose intolerance can develop.

It is very rare for an infant to be born with a lactose intolerance. Some infants may temporarily develop a lactose intolerance as a result of damage to the gut wall, for example, after a bout of gastroenteritis.

Here are some suggestions for managing lactose intolerance in infants:

IF YOU ARE BREAST-FEEDING:

- > Lactose intolerance in exclusively breast fed infants is rare
- > It is advised that mothers continue to breastfeed
- Restricting lactose in the mother's diet will not lead to reduced lactose in breastmilk and therefore is not recommended

IF YOU ARE FORMULA-FEEDING:

> You may be advised by your healthcare professional to eliminate lactose from your baby's diet

IF YOUR BABY IS WEANED:

A restricted lactose diet is often recommended

- > Always check food labels for the presence of dairy products. It is not always obvious when a food item contains lactose so watch out for ingredients such as milk powder, whey or curd
- It is a good idea to keep a food diary so that you can refer back to what your baby may have eaten to cause the symptom
- > Lactose intolerance is often temporary, regularly check with your healthcare professional to see if it is suitable to reintroduce lactose again

YOUR BABY'S LACTOSE INTOLERANCE MANAGEMENT PLAN

Plan developed for: _____

Age: _

Following your visit, it appears your baby may be experiencing discomfort due to lactose intolerance.

HEALTHCARE PROFESSIONAL ADVICE AND INFORMATION FOR YOU:

MONITOR YOUR BABY

Keep an eye on your baby's symptoms and contact your healthcare professional if these change or any new signs appear.

FURTHER INFORMATION IS AVAILABLE FROM:

NHS Choices website (https://www.nhs.uk/conditions/lactose-intolerance/) NHS Helpline on 111