

Question About Your New Baby?

We at Coastal Pediatrics would like to extend you warm congratulations on your new son or daughter. With a new baby come great excitement, new emotions, and many questions. One of our Pediatricians will see your baby in the hospital and be able to discuss baby care with you, and answer your questions. More questions will emerge, however, after you and your baby go home. Here are some of the ones we get most frequently.

Breathing Patterns

Babies have a few patterns of breathing that are normal, yet, sometimes concern parents. A healthy newborn will often alternate between periods of shallow, rapid breathing and deep, slow breathing sometimes with a brief pause. This is especially noticed when they are awake. If your little one is eating well, sleeping well and seems content, then be assured all is fine. Healthy babies also frequently have “stuffy noses”. This is merely due to small nasal passages and usually causes no problems. The small rubber suction bulb given to you at the hospital should be used if the stuffiness seems to cause trouble with sleep or feeding.

Colic

It is common for babies to have fussy periods beginning at about two weeks of age and occurring in the evening from about 6:00 p.m. to midnight. This can be a tiring part of the day for all involved and patience is required. This fussy pattern typically peaks at about six weeks of age and gradually gets better from there. Babies that have **colic** (about one in five) will have more intense crying, which also lasts throughout the day and night. They cry inconsolably, pulling up their legs and passing gas. We don't know why some babies have colic. It seems that some infants are unusually sensitive to stimulation. Fortunately, these symptoms improve over time and are generally gone by three months of age. In the mean time, while you may just have to wait it out, here are some things to try. If you're nursing, eliminate milk products, caffeine, foods such as cabbage, broccoli, onions and garlic. Walking, rocking, swaddling may give some relief. Try laying her tummy-down on your knees and gently rub her back. If feeling really desperate, get someone to watch your baby while you get out of the house for an hour or two.

Umbilical Cord Care

Recent studies show that using rubbing alcohol on umbilical cords does not reduce infections of the cord compared with simply leaving it alone. We generally recommend keeping the cord dry until it falls off, which occurs at about two weeks of age. Use rubbing alcohol on a cotton ball when there is wet sticky material collecting at the base of the stump. It is normal to see a few drops of blood on the diaper around the time the cord

falls off. Rarely the cord can become infected. Call your pediatrician if you see redness or pus around the base of the cord.

Jaundice

It is common for normal newborn babies to develop a yellow color to their skin in the first few days of life. This is due to a substance called bilirubin that comes from the breakdown of old red blood cells. Babies have an excess of red blood cells and the resulting bilirubin sometimes can overwhelm the newborn's liver in removing it. Usually, the yellow color begins on the face, and then moves to the chest, belly and finally the legs. Most jaundice resolves on its own as the liver catches up. Your doctor may order a blood test to see if the level is concerning (extremely high level can damage a baby's nervous system). If bilirubin level is high, your doctor may order phototherapy.

Newborn Bowel Movements

Breastfed babies have bowel movements that are characterized by being loose, yellow with small seed-like material, and occur often (usually after each feeding). As breast-fed infants get older, their stool often slows down in frequency and the infant may skip several days. It is very normal for them to push and grunt. Formula-fed babies usually have slightly firmer stools, which may vary in color. It is not normal for babies to have hard pebbly stools (i.e. constipation).

Breastfeeding and Medications

Most medicines are transferred in breast milk in small amounts only, but some drugs can adversely affect milk supply or cause side effects with the infant. Tylenol is safe for pain or fever. For colds, the decongestant Sudafed is the only medication we recommend. Antihistamines and combination cold medicines should be avoided. If you are on a prescription medication or are taking over-the-counter medicines, contact your obstetrician or pediatrician about the safety of these while nursing.

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