

Crying Baby, Sleepless Nights: Why Your Baby Is Crying And What You Can Do About It

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Few parents of babies have hours to spend reading any book from cover to cover, so I've designed this one for people who have only five minutes a day to concentrate on anything but their fussy babies.

One mother told me, "If my baby is going to suffer, I don't want him to suffer alone." Your baby shouldn't suffer alone, and you shouldn't, either. May this book provide the knowledge and solace you need so you can in turn help your baby to feel pain-free, comfortable, and well-loved.

Tips For Handling Your Newborn

If your baby is sucking his fingers or fist, he may simply be hungry. Try feeding him.

Move your baby slowly to allow him time to adjust to changes in position.

Talk to him in a gentle, slow voice, as though he understood exactly what you were saying. Tell him when you plan to pick him up, and ask him if it's all right before you do it.

Hold him so that his face is about 8 inches from yours when you want to talk with him. This is the distance at which his eyes focus best.

If your baby isn't hungry, but he's a little fussy, try putting him up to your shoulder. He may stop fussing to look around.

Be alert for your baby's cues that he has had enough socializing. He may hiccup, turn his head to the side, sneeze, or begin to grimace.

Most babies don't like to have their heads controlled, so don't try to force him onto your breast by pushing him on the back of his head, and be sure to stretch the neck of T-shirts before pulling them over his head.

To avoid exposing your baby to sudden temperature changes, unwrap him slowly. Keep a warm blanket over him when you change his clothes or diapers, especially if the room is drafty.

If your baby startles easily, wrap him firmly in a light blanket so that his arms and legs are restrained. It may help him to feel like he's back in the womb, which was home such a short while ago.

All Babies Cry Sometimes

Some babies cry a lot more than others, even though they may be perfectly healthy and their parents very experienced in handling infants. The amount of time your baby spends crying each day may be less than it seems. Though you may feel that your baby is crying twenty-four hours a day, if you carefully record his actual crying times you may discover that his crying isn't really nonstop.

Understandably, your feelings of frustration and helplessness may make it seem that your baby cries endlessly.

So how much crying is normal? Opinions vary. Many studies have found that crying episodes start in earnest around three weeks of age, peak at around six weeks, and decrease significantly between three and four months of age. Crying tends to be worst around mealtimes--7:00 A.M., 12:00 P.M., and between 5:00 and 6:00 P.M with the most crying around dinnertime. Some researchers say babies average an hour and a quarter of crying per day; others say two to four hours crying per day is normal.

What is normal to these researchers might be quite worrisome to you and might be considered a cause for alarm in a country where babies are generally given closer nurturing than they are in the United States. In India and Africa, babies are carried by their mothers or other family members all day long and kept beside them at night, but here many babies are expected to be content in nonhuman baby holders such as cribs, playpens, car seats, and strollers. And, this treatment usually leads to more crying.

Will you spoil your baby by carrying her too much, by answering her cries too quickly, or by getting into the habit of going to her when she wakes up over and over during the night? A lot of parents worry about this--especially when their babies are extra demanding. Fatigue can make you question whether you're falling into a trap of being manipulated by your baby. Doctors and relatives may try to convince you that you are.

"Maybe I'm being too soft on her. Maybe my baby needs to be shown who's boss," you say to yourself. So, you stop going to your baby when she cries, or you chide her for making demands. But, she only cries harder and longer.

Research has shown that parents who are the most afraid of spoiling their babies are the most likely to produce children who act spoiled. By taking longer to answer, these parents get accustomed to the crying and so distance themselves from their babies even more. The baby's trust in her caregivers begins to erode, which makes her quicker to cry and harder to soothe. Eventually, she grows into a clingy, overly demanding, and insecure toddler.

Parents' attitudes, even during pregnancy, can affect how they respond to their babies after birth. One study showed that expectant parents who said they were hesitant to pick up babies for fear of spoiling them were more liable to produce babies who cried long and frequently than were expectant parents who believed babies' cries should be answered right away.

Studies have also shown that the longer a parent takes to answer a baby's cries, the longer it takes to soothe the baby. The critical cutoff point for answering a baby's cries is a minute and a half. If a parent takes longer than a minute and a half to answer, the amount of time required to quiet the baby increases by three, four, or in some cases fifty times.

Your Baby Doesn't Learn to Sleep

Your baby's sleeping patterns change naturally as his body's systems mature. Newborns aren't equipped with day-night body cycles; they alternate between sleeping and waking throughout the day

and night, regardless of what is happening around them. It's not until about the fourth month after birth that the typical baby spends most of the day awake and sleeps longer stretches during the night. By then, the baby's bodily cycles--of high and low temperature, heart rate, and urine excretion, for instance--have become more regulated. The start of sleeping through the night coincides with the appearance of day-night rhythms and the excretion in the baby's body of an important hormone, cortisol, that helps to regulate metabolism.

You can't teach your baby to sleep through the night; it isn't a skill that can be learned. But when the time is right, your baby's inborn master clock will set all of his internal operations in harmonious cycles, and his day and night rhythms will become more predictable.

Shared Sleep Is Good for Parents, Too

Ironically, the very thing that most parents do to get more sleep results in their getting less sleep. Typically, parents decide that they can sleep better if the baby is in another place, and so they put the baby in a crib in a separate room. The baby becomes frightened by the isolation and cries out to bring the parents close. A parent, aroused from sleep by the crying, gets up and feeds the baby, who goes to sleep in the parent's arms. The parent returns the baby to the crib and goes back to the other bedroom to sleep. The baby sleeps until hunger pangs and loneliness arouse him again. The baby cries, the parent is aroused, and so the night passes.

Instead of getting more sleep, the parent actually gets less sleep this way than if the baby were within arm's reach. A breastfeeding mother can nurse her baby without getting up or even waking fully. She need not sit up waiting for the baby to finally fall back into a deep sleep. And, many parents have found that sleeping with their babies decreases the frequency of night wakings, so the parents themselves get more rest.

You can test this idea yourself by taking your baby into bed with you for a few nights to see if his night waking and crying are reduced. You may want to make some notes on his behavior first, so you can accurately compare his sleep patterns in isolation and in your bed.

By giving in to your baby's inborn need for closeness, you may find that you not only help him conserve his energies for emotional and physical growth, but you conserve your own energies as well.

Check List For Evaluating A Baby Doctor

You should feel confident that your baby's physician has up-to-date knowledge and plenty of experience concerning the many causes of infant pain.

He or she should refrain from giving you pat answers that don't help or prescribing drugs that simply mask your baby's discomfort.

The doctor should listen well. He or she should treat your baby's crying as important and your perceptions and opinions about your baby as valuable in uncovering solutions.

You shouldn't feel rushed with your appointment or have to wait long to see the doctor.

Your physician should be readily available to talk by telephone.

Your doctor should welcome your seeking a second opinion, especially if he or she has recommended extensive tests.

You should feel that no stone has been left unturned to discover what is causing your baby's pain.

Your Crying Older Baby

Once feeding problems have been resolved and colic has peaked, your baby may cry for new reasons. He may catch his first cold, and, if you and he are unlucky, the cold may lead to his first ear infection. With the ear infection could come the most acute pain he will have yet experienced. Your baby will probably also get his first vaccination, and he may have a reaction to it. When he starts to eat solid foods, he is likely to have some bouts with diaper rash. And, about the same time he starts on solids, your baby will, more or less painfully, cut his first tooth. Soon thereafter, he will probably begin to cry from a fear of being separated from you, and he just won't be himself as long as you are away.

The inner logic goes something like this: "He's crying because he's uncomfortable." "He's sleeping because he needs rest." "He's asking me to carry him because it makes him feel better." "He wants to sleep next to me because he feels safer that way."

Notes To Dad

Try to get home on time. Things can crumble in those last few minutes that your partner is waiting.

Take the baby away from the house for an hour or two so Mom can nap or take a leisurely bath.

Talk to the baby and say nice things about her. Mom wants to know there is something lovable about her.

Lend a listening ear to your partner. Maybe you can't cure colic, but there is much relief in feeling understood.

Offer to take Mom on an outing. She might say she is too tired, but she needs adult companionship almost as much as sleep.

Make a run for take-out food or cook dinner yourself.

Take over the baby right after dinner or at some other definite time each evening for half an hour or more. (Gentle, quiet touching, talking, and humming work better before bedtime than vigorous play.)

Try letting your baby sleep on your bare chest.

When you can count on a few minutes' break from your baby, try progressively relaxing different parts of your body while concentrating on a single image in your mind. Follow these steps:

- Lie quietly on the floor, on the couch, or in bed, in whatever position is most comfortable for you.
- Close your eyes, and keep them closed.
- Slowly take three deep breaths. Inhale through your nose as deeply as you can, and then exhale through your mouth as slowly as you can.
- Breathe normally for about one minute as you picture a place of awesome beauty, such as mountains, a meadow, or a seashore.
- Take a deep breath, and clench your left hand as tightly as you can.
- Exhale slowly through your mouth as you hold your hand tightly closed.
- Slowly unclench the hand and concentrate on the relaxed feeling this gives you.
- Breathe normally, and concentrate on your beautiful vision for one minute.
- Take a deep breath, and tighten your right hand, repeating steps six through eight. Do the same with other parts of your body, such as your legs, your jaw, and your back.
- Lie still, breathing normally, for a couple of minutes before getting up.

After some practice in progressive relaxation, try staying calm in the face of stress--that is, in the face of your howling baby. As you go about trying to soothe him, imagine him as smiling and thriving, even though he may seem hopelessly far from that image right now. Picture yourself holding this peaceful baby as you walk through a beautiful meadow. Breathe deeply and relax your muscles as you have done while lying down.

If you suffer from chronic muscular stiffness and pain, you may need regular massages. Maybe your partner can provide them, when the baby goes to sleep, or perhaps you'll want to seek the help of a massage therapist or physical therapist. Loosening up those tight spots and keeping them loose can help you feel better about your body and your baby.

What Causes Colic?

Doctors and scientists have been trying to find the cause of colic for over half a century now. The reports from hundreds of studies of colicky babies are confusing and often contradictory. Some have claimed miracle cures that are hard to believe---babies suddenly got better when parents kept their booties on twenty-four hours a day, or fed them sugar water, or took eyelashes out of their eyes. Most of these studies involved only a few colicky babies and no controls, so we can't know whether the cure really worked or whether the babies got better because they outgrew the problem or their diet or environment changed. More often than not, the results of these studies could not be duplicated when the experiments were run again.

Perhaps the most valuable colic studies have focused on the baby's belly. Throughout history, people have believed that the constantly crying baby was experiencing some kind of abdominal pain; the word colic, in fact, comes from the Greek work kolikos, an adjective derived from kolon meaning the large intestine. We still don't know, however, whether belly pain is always or even usually the cause of crying in the many babies said to suffer from colic. Some parents assume their babies have bellyaches because they draw up their legs when they cry, but babies do this when they hurt in any part of the body. Besides, specialists believe babies can't localize pain--that is, no matter where the hurt originates, babies feel it in the abdominal region. Still, when you can hear your baby's belly gurgling, and when she doesn't calm down until you lay her on your arm and massage her abdomen, you know your baby's crying has to do with her digestion.

Preventing Food Allergies

If you have allergies, or if they run in your family or your spouse's, the best way to protect your baby is to feed him only breast milk for the first six months. You might also watch what you eat yourself.

During pregnancy and the first year after birth, you might completely avoid common allergens that are not essential to your diet, such as chocolate, and take only moderate amounts of others, such as citrus.

The key to a good breastfeeding diet--to any diet, perhaps--is moderation in everything. You might eat an orange for breakfast, for instance, instead of drinking a large glass of orange juice (which is equal to three or four oranges, but much lower in vitamins and fiber). You might have one chocolate instead of consuming the whole boxful, and eat only a small portion of beans, along with rice and meat, instead of a big bowlful of beans. You might change your protein sources frequently--rotating among meats, nuts, lentils, and cheeses, for example--since overeating one kind of food increases the chance of a reaction in your baby. Feed yourself as you will your growing child--on whole, minimally processed foods, in variety.