I think we just sort of gave up to it. We were like, right, well, you know, come 7 o'clock latest. She's going to start and it's just going to be rubbish and we just need to get through it and try any, you know, it's just rocking and jumping around, not jumping around, you know anything to soothe her really, and you know tried winding her every which way. —Kate.

**Intro**  
That was Kate, first time mom to 10-week-old baby Isla, and this week we dive deep into the subject that comes up with almost every new parent and that's colic. Baby Isla is having bouts of evening crying and Kate asks me about colic, why it happens and what can be done to prevent it. I share with her my step by step approach to calmer fuss-free evenings. We also talk about how mums and dads typically respond to extended crying by over-stimulating the little one. I share my favorite way to soothe the crying baby by mimicking a womb state. We also discuss the benefits of stretching Isla’s day feeds and the positive impact that can have our night feeds. We touch on the difference in feeding schedules, depending on whether you breast or formula feeding. And we chat about some other ways to soothe our little ones when they're awake, that doesn't involve feeding, especially because Isla is reaching the 12-week mark soon. So tune to hear more about the dreaded colic and how small adjustments to your little one's routine can make all the difference to sleep and feeding in the early days.

Welcome to Sense by Meg Faure, the podcast that's brought to you by Parent Sense, the app that takes guesswork out of parenting. If you're a new parent, then you are a good company. Your host, Meg Faure is a well-known OT Infant specialist and the author of eight parenting books. Each week, we're going to spend time with new mums and dads, just like you to chat about the week's wins, the challenges and the questions of the moment. Subscribe to the podcast, download the Parent Sense App and catch Meg here every week to make the most of that first year of your little one's life. And now meet your host.   
  
 **Meg:** Hi moms and dads, it's always good to have you back with us, and it's always wonderful to be joined by new moms who are going through new parts of the journey along with you. I'm loving my weekly chats with real moms, exploring the week highs and lows of parenthood, and each week I'm joined by a parent, and I share my years of experiences in OT and an author of parenting books, applying the sense to what can be otherwise a tricky time in life. And this week we are joined by Kate and Kate is first time mom to little Isla, and Isla just 10 weeks old. And Kate is muddling through those early days, along with all of you trying to make sense of what's going on in Isla's world. So I'm really, really delighted that Kate's going to join us. And in actual fact, Islas has joined us too, so you will hear the little noises from Isla as we go along. Hopefully she's not going to be fussy, but she'll be joining us and just sharing what has been going through her life in the week of a 10 week old at the moment. So, very warm welcome to you, Kate, hi.   
  
 **Kate:** Hi, thanks for having us.   
  
 **Meg:** It's a real pleasure. We actually did have you once before on a joint group where you were joined by two of your other friends, and we kind of just brainstormed about what was going on. I think at the time Isla was about six weeks old, am I correct?   
  
 **Kate:** Yes. I think so, five or six. Yeah.   
  
 **Meg:** Yeah, so she was really little. And so how are the last few weeks been?   
  
 **Kate:** So much better? I think that's like the massive key thing that every week is slightly different. Isn't it so? Although there are definitely challenges, she's to **[inaudible** **03:41],** so try to get her off to sleep. Yeah, challenges, they do definitely get easier.   
  
 **Meg:** Yeah, it does get easier. And I think one of the things that I've spoken about before is that, you know, colic or early infant fussing doesn't have to be very prolonged periods of crying, but that classically works in a curve where it kind of kicks off at about two weeks after the honeymoon period, it peaks at about six weeks, and from six weeks to 12 weeks, things just get increasingly easier each week. Are you experiencing that?   
  
 **Kate:** Oh, hundred percent. I wouldn't say she's a difficult baby, but she's definitely quite sensitive. And I think she has had some colic, we’ve been using colic drops not necessarily the name, but like it's to help with her colic and I think it does help, but also I think her just maturing has really helped as well. So yeah.   
  
 **Meg:** It's quite interesting, you know, colic is a misnomer, so it's called colic actually means abdominal discomfort. And so a lot of the treatments and the remedies that are out there have to do with the digestive system. So we do often find that moms are putting their babies on things like Gaviscon or any myriad of colic remedies. What's quite interesting is that there's been a lot of research done on them and they've actually found that although most of them do no harm, because unless they've got alcohol in them, the old fashioned ones used to have alcohol, but most don't anymore. But without alcohol, they actually do no harm, but most of them are actually either placebo effects; so we kind of think that things are better just because we are giving our little ones something, or it's actually the sugar in it that is actually placating them. And so, you know, while I'm not averse to any remedies, because I think you can't take any tools out the toolbox when you've got a colicky baby, it's probably got more to do with the sugar or the placebo effect. So, I don't really think we've ever come across any remedy. And part of the reason for that is that, and you just said it, it's just a period of maturation that their brain are really over-stimulated taking in the whole world. And that's actually what's causing the fussing and colic. Most colic actually happens in the early part of the evening. So I don't know, was that what your experience was that the evenings were worse than the rest of the day?   
  
 **Kate:** Yeah, we used call it, I think, you know, it's quite a common term sort of phrase, like the witching hour. Like six o'clock and everything started to sort of go downhill.   
  
 **Meg:** So tell me about your late afternoon; on afternoons when it was really bad, in the evening, were there things that you identified that made it worse?   
  
 **Kate:** No, I think we just sort of gave up to it. We were like, right, well, you know, come 7 o'clock latest. She's going to start and it's just going to be rubbish and we just need to get through it and try any, you know, it's just rocking and jumping around, not jumping around, you know anything to soothe her really, and you know tried winning her every which way.

**Meg:** Is she still fussy in the evening at the moment?   
  
 **Kate:** So we're just in a completely different place now. So she had a funny, terrible thing when she was born, it wasn't affected, but it was something, basically a part of her and umbilical cord was left on and we had to take her to the hospital and things like that. So we weren't able to do night time baths or do any of that sort nighttime routine too, and later on the fussiness will go, but as soon as we could, we started a routine with her which has been sort of game changer really. Because we sort of do the bath, bottle, bed and to begin with we were doing bath, bottle, and then bed in the same room as we were in, just turned down the lights and things and we found she went down relatively easily, but obviously we sort of up again a couple of hours later, but it was a long sort stretch for her time. But so she goes up into our bedroom and we have her own monitor and depends on the day she'll either go down and sleep really nicely, so until 10 or she'll be a bit fussy. And I couldn't tell you why, what the difference is, maybe her mood, but yeah, but she's about to outgrow her Moses basket, because she's quite chunky for her age. And so we're going to try putting her in her cot, in her room. So that's going to be a whole new thing, but yeah, I think it's sort of changed massively since she was six weeks. She's just, you know, a whole different vibe.   
  
 **Meg:** So I'm actually going to talk a little bit about that kind of early part of the evening and how to prevent it and then what to do if it actually does happen again.   
  
 **Kate:** Amazing.   
  
 **Meg:** So a couple of things around preventing colic in the evening; the first thing is to give regular sleeps during the day. So what we find is the babies who are over tired and not getting sufficient sleep in the day are more likely to be fussy in the evening. And in terms of how much sleep that she needs at this age, we're looking at about 16 to 18 hours in 24 hours, which is not terribly helpful because you now have to start adding up your hours. But the easier way to look at it is to just make sure that in the day she's not having any more than 80 minutes between sleep. So between 60 and 80 minutes, you should go back down for sleep. And if you're doing that fairly regularly through the day that that's one of the first things we know can help with colic. So that would be important.

Then the next thing is what happens in the early part of the evening. So I always say, try and make a line on the ground for what time you want her to be going down. So let's say it's half past six or seven o'clock and then work 90 minutes back. So that's 90 minutes before that is the last time she should be sleeping. So you wake her up and give her a good long stretch for that last stretch of the evening. So 80 minutes would be probably optimal, maybe 90 at the most.   
  
 **Kate:** Would you include bath and stuff in that?   
  
 **Meg:** Yes, exactly. So it's actually quite tight.   
  
**Interlude**  
This episode is brought to us by Parent Sense, the all-in one baby and parenting app help you make the most of your baby’s first year. Don't you wish someone would just tell you everything you need to know about caring for your baby, when to feed them how to wean them and why they won't sleep? Parent Sense App is like having a baby expert on your phone, guiding you to parent with confidence, get a flexible daily tips and advice personalized for you and your little one. Download Parent Sense App now from your app store and take the guesswork out of parenting.

**Meg:** So let's say she was going down at 6:30 as an example, then by 5 o'clock you would, or 10 past five, you'd want her awake from her last sleep of the day. And the, then what you're going to do is in that time, you're going to give her all of her kind of routine that leads up towards bedtime. So what you would normally do, what I'd like you to do is to do, are you breastfeeding or bottle feeding?   
  
Speaker 3: We a bottle now.   
  
 **Meg:** Okay. So you'd give her a little bit of a bottle feed before baths, so just a small amount just to make sure that she's really comfortable and happy for baths. So that would normally be, you know, kind of 30 mls. And then what you do is you go and bath her and then take her into her own room, and I like the fact happening with her moving into her own room at this age, no problem, take her into her own room, but don't leave the room at that point. And then you can experiment between giving a massage and not giving a massage. So with some babies, if they're sensitive, the massage can make them more irritable, but with other babies that makes them quite calm. And so after bath, after you've taken her to own room, you're going to oil her down with some type of aqueous cream or natural oil, and really pull out all of her little limbs, giving her lots of traction and proprioception, which is a calming neurotransmitter, which is great, or it works on the neurotransmitters and then you're going to pace her, swaddle her, and then you're going to give her the rest of her feed.   
  
And then with regards to the winding, don't wind her for longer than five minutes. And I think often we start to think, oh, we've got to get this wind up otherwise they're going to get fussy. And so by doing that, we actually start to chase this wind, and before we know it, it's kind of 15, 20 minutes and we've been messing with our babies and that actually is more stimulation that's going into their neurological system. So the goal here is to have less stimulation going into the brain and the stimulation that does go in needs to be calming. So that's why it's a warm bath, dark room, deep swaddle, massage, all of those are calming sensory soothers. And then what you're going to do is you're going to as soon as she's finished having all of that done, you're actually going to put her down and leave your hands on her. And really almost like as if you were holding her, but you're going to have her down and you're going to kind of pat and shoo her and see if she'll fall asleep. Now, the reason for that is that even from this age, we start to aim for them going down like that. Now some nights she'll surprise you she'll suck her dummy, if she takes one and she'll kind of start to settle down to sleep lying down, other nights, she'll protest and she'll be fussing. And then you can pick her up again. So, first line of defense is she goes down, you pat her, and she falls off to sleep.

**Kate:** Okay.

**Meg:** On a night where she's not doing that, pick her up and then give her a little bit of a cluster feed there. And this is where this cluster feeding comes in, that gets them stretching nicely through the night. So have a little spare bottle on the side, ready to go, where you'll be able to give her maybe another extra 40 ml, just a small amount, just to see if she'll take it and then go through the same thing again. So swaddle, feed, down, pat, see if she'll fall asleep. So this is the way that we kind of aiming high, not burping for too long, giving less stimulation and seeing if she'll go down.   
  
 **Kate:** That’s literally fascinating. I had, we have definitely not been and I can't think of way around it. She's definitely hungry going into her bath and we're like, okay, when the bath is over the memory is out, she's furious because so, she loves the bath and then she comes out, she remember she's really hungry. So that's game changer.   
  
 **Meg:** Yeah. So what you end up having then is between kind of six o'clock and seven, oh sorry, five o'clock and seven o'clock you've literally had kind of three opportunities for a feed, a tiny little bit before bath, a full feed after bath and then a cluster feed. And so you're getting a nice amount in so that she's got a nice full tummy and I don't recommend more cluster feeding than that because over feeding can also make them irritable. But this just covers the bases and she's had enough, and hopefully this will actually push her through all the way until midnight. So you'll get a really nice long stretch because she's getting a little bit of extra mls in there.

**Kate:** Yeah.

**Meg:** Then up until that point, that's like we are going for gold standard there. And if everything works up until that point, then we know we've ticked a box and it's absolutely awesome. But of course we are going to have those nights and it does happen. And particularly for moms who listening, who've got babies younger than six weeks who are still quite irritable and colicky; they might end up then fussing and crying. And then the next thing and your response to the crying is then what's very important. And you described absolutely perfectly what happens to most moms. And that is that their babies start to cry, they get a little bit anxious, because they think sharks, this is going to be another three hour stretch, what am I going to do? So then they think, okay, well let's burp her, let's check her nappy, let's pass her to dad. I'll walk her down the passage, I'll burp her again. I'll give her another feed, I'll re-swaddle, her, I'll burp her again, I'll feed her again, and so we get into the cycle where we doing a lot. And so each of these interventions are sensory interventions as well as everything else. And so we start to get into this over stimulation cycle.

And so what I recommend is that if you have not succeeded in what I've described up until now, and they start to fuss, instead of doing all of those changes, those rapid changes that will over-stimulate her and result in further crying, you actually put her into a carrier, and I particularly like the wrap style carriers, there's actually one on Amazon called SnuggleRoo, which I particularly like, it's a, it's a soft carrier, but it's not a big rap carrier, but actually at the end of the day any carrier and put her in there and walk pace the passage, walk up and down until she falls asleep.   
  
Now, the reason that this is different from everything else that you would've been doing is that when your baby is in, or when Islas in a carrier, there's nothing going on for her. You can't fuss with a baby in a carrier. You can't change her position. You can't burp her. You can't feed her. You can't change her nappy. She's in a static, almost like a womb space, and that womb space together with the movement will probably put her off to sleep and limit the amount of crying. So instead of crying for 40 minutes, two hours, or whatever it was, it'll be kind of 10 minutes and then she'll actually drop off. And that's the way to short circuit to make sure that you don't end up with these very long patches.   
  
 **Kate:** Nice. So Isla was doing that, but she's much better now. And what we find is, so, and I wonder if this will change, now that she goes into her own room. She won't cry like that, and more for sort of like a two, three hour period, you know, she'll wake up, she's hungry, we'll feed her, we'll put her back down and then what will happen is she’ll go back to sleep. And then maybe a couple hours later she'll sort of start staring. And at which point she's, so we use a dummy, she would have spat the dummy out and she's, you know, sort of staring, a bit awake, maybe a bithungry, at which point I will lean over and put her dummy back in her mouth.   
  
 **Meg:** So what time is this? Just give me time indications. What time would she have fallen asleep?   
  
 **Kate:** So at the moment routine is looking like, so we put her down at seven and fingers crossed, goes through until 10 and then she may wait sort of 10, 10:30, 11, she gets another bottle and then she'll go back down. And then at around one, two, she'll start starring, and I might be able to stretch her until three and then I'll give a change her and give her a bottle. She's very finicky about like having wet nappy. I think different children are different, but she does not enjoy it. And then probably give her a bottle. So then she's back down about 3:30, 4 depending then up again at like seven at the moment.   
  
 **Meg:** All right. So that's perfect. So a couple of things around that, first of all, you're not doing a dream feed at 10, obviously.   
  
 **Kate:** No, no, no. She's awake. She wakes up for it.   
  
 **Meg:** She wakes up. Excellent, okay. So I don't like dream feeds because I think it disrupts their natural sleep cycles. So what I suggest is at 10 weeks old, we could expect to feed around between 11 and one, that that would be, you know, kind of what you could expect. Some moms are getting better stretchers than that, but we can certainly be expecting that. If our last feed finishes at seven and even later, if you've done the cluster feed, then I would say 10 is a little early. So my suggestion is for that very, as long as she's gaining weight nicely, which I know the she is, I would suggest that for that very first feed, I would actually give her a little bit of water, cold boiled water, which is absolutely fine as long as she's gaining weight nicely. And see if you switch her through till 11 or 12 and just see if we can start to move a little bit more towards midnight. And then at point you give her the feed when she wakes. So, if she wakes close between 11 and 1, you're going to give her the feed and then you're going to feed her when she wakes the next time. So you're not going to try and fob off with a dummy. And the reason is that what most babies are doing at this age is they have one long stretch and then they go back to three early thereafter, three or four early thereafter. So what probably will end up is that you'll have 11 or 12 and then you'll have two, three or four o'clock. So you will have actually two night feeds and then your next one will be six o'clock in the morning. And that would actually be quite typical for a 10 week old baby.   
  
 **Kate:** Okay.   
  
 **Meg:** So not fobbing off that second one to try and stretch her to four hours. I don't think that's necessary just because it's quite typical that they do one long stretch and then go back to shorter stretches thereafter.   
  
 **Kate:** Okay, perfect.   
  
 **Meg:** Good. Okay, well let's hope that that helps. And then before we head off, what, were there any other questions and challenges of the week that you can think of?   
  
 **Kate:** I think probably this week has been, so I think like a lot of people this time of year, my husband's gone back to work and so I'm flying solo for the first time. And she also pioneer I think is having a growth spurt. So she's eating a lot and I think that's definitely disrupting her sleep cycle. So I don’t know, in the day as well. So is there anything you can do about that or do you just follow their lead?   
  
 **Meg:** Yeah. So that's a great question. So a couple of things, first of all, my suggestion is to, because she's on formula and she's 10 weeks old and she's gaining weight beautifully, it's to stretch her feeds to four hourly in the day.

**Kate:** Really?

**Meg:** Yeah and there's quite good reason for that. So we find babies who stretch nicely in the day tend to stretch better at night as well, they seems to have a knock on effect. They drink better, they're taking more, and then, they stretch at night as well. So particularly, obviously babies that are gaining weight nicely, which we know she is. So my suggestion is that you can actually start to get her, you know, to go towards a four hourly routine for feeds. If obviously she wakes at three and a half hours and you can see she's hungry, then obviously you're going to you can feed her at that point. But not sooner than three and a half hours because she is gaining weight nicely and formula is different to breast milk. This would be different advice for mom who listening, for breastfeeding, it would be different advice for you.   
  
 **Kate:** And is this when she's not going through growth spurts, at most she's just demanding or literally even now stretched four hours.   
  
 **Meg:** So now on growth spurs, we do move back to three hours for formula feed babies. But I think it's also important to realize, and this is one of the things that, you know, we battle with, particularly this age is that babies, when they're crying, it's not all about food. So I think sometimes we just end up the minute they make a squawk or, and particularly as first time moms. And I remember this very well, you kind of think, oh, she must be hungry again. It's been two and a half hours. She must be hungry. And so you get into the cycle of very regular feeds, which can actually make them a little bit more fussy. They often don't necessarily take in all the feed as well as they would've. And they don't, the tummy doesn't get a chance to empty either. And so I do recommend stretching her towards four hour, you know, three and a half at the absolute max. And you might find that she actually settles in generally like more.

Now, one of the things that happens at about this edge, especially now you are flying solo, and so you you've now got an awake baby, who's a little bit grizzly and it's two and a half hours and you actually just don’t know what to do with her, because she's just woken up and you know, so she's having these awake times that are much longer. And so it's finding other things to do when she's awake, that don't involve necessarily nutrition. So for instance, taking for her for a walk, facing outwards in a pouch is a really nice idea or in a carrier so she can see the world. You know, just getting out of the house, and I know that it’s cold at the moment in winter, but you know, getting out of the house, popping her in a pram, laying her under a mobile, just trying to find other ways of soothing her other than just automatically thinking that it's feeds.

And I think it's a very common thing, particularly at this age, because a lot of what we've been doing until like six or eight weeks has just been feed, sleep, feed, sleep, feed, sleep. But suddenly, they reach this age where actually there are these wakeful times and they may be a little bit grizzly in them and we are not sure actually what to do with them. And as soon as she moves past the 12 week period, she'll be happier in those wake times. And so you won't be confused, but for now it feels like right, she's awake, she's fussing it, but therefore she must be hungry. But in actual fact she's really not, and she just needs a little bit of something else. So it is finding other strategies to do with her. It doesn't always have to involve visuals, so sometimes too much under the mobile will make her irritable. But one of the things is just actually laying her staring at this ceiling with music on, in the background. And you might find that that's a nice activity to do. So you could make a little list of activities to do in the day. So a list of 10 things take a walk in the pouch, take a walk in the pram, put her under mobile, put her with nothing to look at just music to listen, to put her in my arms and listen to music with her. So you can have this little list and you can actually just move your way through those through the day in those patches where you need to stretch her from two and a half hours to three and a half hours, you know, for the next feed. And sometimes what also happens, Kate, which people don't anticipate is that she might end up having two sleeps in between a feed, which is really confusing because then we're thinking, surely she's got to feed again before she sleeps. But in actual fact, if she's having 45 minutes sleeps, she could have a feed, 45-minute sleep and wake up then an hour of awake time, then another 45 minutes of sleep, and then she goes and has her next feed. So the routine doesn't necessarily mean that she only gets one for feed in between each of the sleeps.   
  
 **Kate:** Okay. Yeah. I think that's, it's definitely been like a new experience because she is, you know, when she's awake, she's awake and it's like, what do we do?

**Meg:** Exactly. Play that.   
  
 **Kate:** Play, what else?

**Meg:** Exactly.   
  
 **Kate:** Those are really good ideas. So I'll give those a go.   
  
 **Meg:** Yeah, do that. You'll find these all on the app as well if you are using it. And we know, I think what you need to do and the principles are on the app, but if you want to just write them down, just write down that you're going to do three and a half to four hour day feeds. You're going to watch those awake times from 60 to 80 minutes and get her back down. And then you're going to have this list of little play activities that you can schedule on and kind of pop in during the day and then see if that helps.   
  
 **Kate:** Thank you. I think that's brilliant. Thank you so much for the advice.   
  
 **Meg:** That's pleasure, Kate. I hope that we'll chat again in another four weeks when she's a little bit older, I'm loving, catching up with you and finding how Isla is doing, so it was lovely to chat again.   
  
 **Kate:** Thank you, it was really good speak.   
  
 **Meg:** Thank you. Take care.   
  
 **Kate:** Bye.

**Outro**  
Thanks to everyone who joined us. We will see you the same time next week until then download Parent Sense App and take the guesswork out of parenting.