

COMMON HEALTH ISSUES & PRECUTION

Why do babies cry?

Most parents nowadays expect babies to behave like adults from the time they are born! They think every cry has a medical reason, and most of them want a medicine to help the baby to stop crying!

Babies require timely attention and constant contact with their mothers. They try to convey their feelings through the only language they know. Crying is not always a call for food.

What can make a baby cry?

- When it is hungry
- If it is uncomfortable
- If it is feeling hot or cold
- If it is ill
- The baby may just want to go out, as it is bored with the same environment
- If the baby has colic – this problem is so exaggerated that most babies are on anti-colic medications nowadays
- Evening colic is very common between 6 pm and 11 pm

Your exclusively breastfed baby will not require medicine for the following during the neonatal period (first 6 months)

1. Breast engorgement in newborns – Don't squeeze it
2. Bleeding per vagina – It will stop in 4 days
3. Constipation – Common to pass stool even once in 3-5 days
4. Frequent passage of stools – Stool of babies who are breastfed are sticky golden yellow
5. Indigestion and vomiting – Requires only proper positioning and burping
6. Crying before and after passing urine and stool

Jaundice in Newborns

Jaundice in newborn babies is normal and often not very serious. Majority of babies can have Jaundice at birth. When your baby's skin turns yellow it's called Jaundice. The whites of your baby's eyes may also turn yellow. This is due to excess amount of a pigment called bilirubin. The bilirubin comes from the breakdown of old red blood cells.

This type of Jaundice starts when the baby is 2 to 3 days old. It goes away by the time your baby is 2 to 3 weeks old. Jaundice progresses from head to toes; and it regresses from below upwards. White part of eyes may remain yellow for a longer period of up to 2 to 3 weeks.

Rh or ABO problems

Jaundice can happen if the mother and baby have different blood group types. There are two different types of blood group incompatibility that can cause Jaundice. When the mother's blood group is O positive and the baby's group is A, B or AB positive; or when the mother's blood type is negative and the baby's blood type is positive. This type of Jaundice more often starts from the first day of the baby's life. Please ask your Pediatrician for further information. Your baby can also get Jaundice by being born too early, or from infection and diseases like neonatal hepatitis syndrome.

Breast Milk Jaundice (BMJ)

It is normal for breastfeeding babies to have Jaundice. It usually occurs at 10 to 21 days of age, and can last for 2 to 3 months. As long as the baby is gaining weight, passing lots of clear yellow urine and yellow or green stools, and having bowel movements, there is no need to be worried. It is not harmful, therefore do not stop breastfeeding.

Diarrhea

1. Thirst is the earliest indicator of dehydration. Look for it.
2. Sunken eyeballs and fontanelle indicate dehydration.
3. Replace the amount of water lost in diarrhoea.
4. Like flowers, children also droop without water.
5. A child suffering from diarrhoea loses lot of fluid from the body. Hence, it is important for the child to be hydrated enough at regular intervals to compensate the loss of fluid.
6. A child who dies from diarrhea, dies from dehydration.
7. Use salt sugar solution (SSS) to prevent dehydration. A glass of water mixed with a pinch of salt and a spoon of sugar in small quantity should be given to the baby suffering from diarrhoea.
8. A right way of administering salt, sugar solution is **5 teaspoon every 10 minutes**.
9. Too much salt and sugar in the rehydration fluid is dangerous.
10. Let the parents make oral rehydration solution (ORS) and feed the baby before they leave from home – 50 to 100cc/kg every 4 hours.
11. Use medicines for diarrhoea only on doctor's advice (Zinc is needed).
12. Other drugs for diarrhea may do more harm than good.
13. Continue breastfeeding during diarrhoea.
14. Diarrhoea is not worsened by giving food.
15. The worst treatment for diarrhoea is to stop food and fluids.
16. Give one extra feed for one week after diarrhoea.
17. Wet mopping of floor twice a day prevents diarrhoea.
18. Everything that goes in his mouth, must be clean.
19. Malnutrition can also be a cause for diarrhoea, so avoid malnutrition. Diarrhoea, in turn, leads to malnutrition.
20. To prevent diarrhoea: continue breastfeeds, give measles vaccine, use proper sanitation, keep food and water clean, wash hands before touching food, control houseflies, give vitamin A.

Common respiratory infections and wheezing

Coughing and wheezing are common symptoms of childhood illness. They do not usually mean your child has a serious condition, although they can sound awful and may be distressing for you and your baby. Coughing is a normal, healthy and important reflex that helps clear the airways in the throat and chest.

Smoking in the home or car increases the risk of respiratory problems in babies.

Causes of coughing and wheezing

There are different reasons why your child may cough or wheeze. Possible causes include:

- Colds or other viruses – this is a very common cause of coughing.
- Choking – the coughing is sudden and the child has not been unwell.
- Croup – this tends to cause a barking, hoarse cough.
- Bronchiolitis – this is a chest infection, which can cause coughing and wheezing.
- Smoke – smoking around babies can cause them to cough and should be avoided.
- Allergy – this can cause coughing after exposure to specific substances.
- Asthma – coughing tends to be worse at night or after exercise. The child may also wheeze.
- Whooping cough – a contagious infection, which can be prevented by immunization.
- Pneumonia – this causes a sudden onset of cough, high fever and fast breathing; it can be prevented by immunization.

When to seek immediate medical help

Children can stop breathing during a severe respiratory attack. If the coughing and wheezing don't settle, or if your baby becomes more distressed or unwell, take the baby to your doctor or children's hospital straight away.

Seek immediate medical help in these situations

- Breathing problems – if your child is having difficulty breathing or its breathing becomes rapid or irregular.
- Breathing is noisy – if your baby's breathing is noisy when they are not crying.
- Skin colour changes – if the skin turns blue or the baby becomes very pale.
- Tired – if baby seem unusually tired.
- Choking – if your baby suddenly starts to cough and has not been unwell, they may be choking. They may have breathed something into their airways. Choking requires immediate emergency treatment.
- Something stuck in the nose – a child with a one sided runny or blocked nose may have something stuck in their nose and should be seen by a doctor.
- Refuses food or drink — this should always be a cause for concern.
- Fever – if baby has a temperature over 37°C