Section 5:

Overflowing and Backed-Up

Mature Adult Poop Conversation: Haven't gone in days

It's amazing how obsessed we, as adult parents, can get over something as natural as bowel movements. Maybe it's the emphasis doctors put on this activity once your baby is born. Every aspect of your baby's wellbeing revolves around poop. How many, how big, what color (first black taffy, then seedy-mustard, finally applesauce and now a pickle on the side!) But how much "on the side" is appropriate? The definition of constipation is different in infants than it is in adults. In infants, it is not how often a baby poops that matters, but what it looks like and how he is acting while he's having a bowel movement. Infants around the age of 2-4 weeks, almost all of a sudden, start to not have as many bowel movements. They may go once a day, every other day, or even every 5-7 days! They are just trying to figure it out! There is no need to be hosing them up with enemas, sticking things up their behinds or pouring in the prune juice. Give it time. If your child is having hard, pebble or clay-like stools or is having pain then these may be appropriate. By age 2 months you can add 2-3oz of plum prune, apple or pear juice mixed with or without a little bit of water each day to their diet. If this doesn't help, ask your pediatrician for different ideas.

If baby is a newborn, then make sure he is getting enough to eat. If the intestines don't see enough milk, they won't make poop. Also, make sure that you are mixing the formula correctly based on the instructions on the container.

The Rainbow Runs: Green, Brown, Yellow Poop

For reasons unknown, many babies will add color to their bowel movements around 1-2 months of age. This may happen even if the milk has not been changed. Most likely it has something to do with their intestines growing and being colonized with gas and enzyme-producing

bacteria in the gut. No need to worry. This is likely not permanent. Keep feeding what you're feeding. If the number of bowel movements increases, your infant becomes irritable, is vomiting, or if the bowel movements also have blood or mucus in them, call your pediatrician.

What's the "Mattered" Shut? Eye drainage

There is a connection, or duct, that acts as a drain between your baby's eye and nose. Tears are made from a gland on the sides of the eyes and funnel through a duct along the sides of our nose. If the drain is clogged or opens and collapses intermittently, then the sink will back up, and the tears will turn thicker as they sit in the eye. This happens especially if the eyes are closed for a long period of time, as with sleep.

In babies, this duct is still trying to grow bigger and expand, so it is common to see crusty, draining eyes or "constant tearing". This can last up to 6-9 months. If there is no improvement by then, it is appropriate to see an ophthalmologist with your pediatrician's referral. Antibiotic drops are indicated only if there are signs of infection in addition to the drainage. These include red or pink within the whites of the eyes, swollen or painful eyelids.

You can use a moist washcloth to clean the goop away. It is frustrating, but does usually go away on it's own on average by 2-3 months of age.

Drooling Fool: Are they teething?

Most babies do not get their first tooth until 6-9 months of age. Around age 4 months, though, get out the buckets! Baby has sprung a continuous leak! The salivary glands are growing. This means that they are making more saliva in the process in order to prepare for tooth growth and solid food. This does not mean that you will see those pearly whites tomorrow or even next month. The teething process is such. It may mean that your baby will feel twinges of pain here and there for days or a week at a time, and then little discomfort at all. One morning you may wake up to a new silly grin looking at you.

The best teething tip is to find a toy that your child enjoys gnawing on. My kids love those blankets that have silky ends but plush polyester they can run across their mouths. They also like those foamy bath toys that stick onto tile when wet. Those make great chew toys, as well as the ribbed ball-end of the nasal aspirator. Teething biscuits and cool pieces of fruit (age-appropriate) may also be of help.

If your child is having pain from teething and is over 3 months old, you may give them an appropriate dose of Tylenol (see the Fever section for dosing) at the same time that you apply a bit of teething gel to his gums. This way, when the teething gel runs out, the Tylenol has kicked in. Watch your child's symptoms and give accordingly. Do not give it continuously. Dose only when she is irritable during the day, or to prevent pain before sleep during times of inflammation.

Babies can also begin to tug on their ears when they are teething. Ear tugging does not always mean ear infection. At around 4 months of age, babies are beginning to discover many parts of their bodies and may also tug on their ears. Most of the time, if the ear tugging is not accompanied by any cold symptoms, fever, or irritability it is not an ear infection. The best way to tell is by having the doctor examine your child. Little Johnnie can be managed with some acetaminophen or ibuprofen (see Fever section) until he can be seen in the office.