Keeping Baby Healthy:

Is this crying okay, or is it colic?

What to Know:

- Crying is normal and will usually stop quickly.
- Crying is a way a baby signals hunger, thirst, or the need to be talked to or held.
- A baby might cry because she has swallowed lots of air, is sick, is tired or is in pain.
- Symptoms of colic begin in the first three weeks and are most common in the first three to four months.
- Crying from colic usually happens most often in the evening between 6 p.m. and midnight.
- Crying from colic can cause parents to feel frustrated and anxious if they feel guilty about being unable to comfort the baby.
- No one knows the cause or the cure for colic. A colicky baby does not mean the parents or the baby are bad.
- Colic is not related to a baby’s sex, the type of birth, or whether the baby is breast or bottle fed.
- There are no long-term negative physical effects of colic on the baby.
- Your baby’s health care provider will check your baby for physical causes of extended crying.
- Your baby’s health care provider might weigh and measure your baby and ask you about your baby’s feeding history.

Symptoms of Colic:

- Severe crying that can last for three hours and occurs at the same time each day (usually in the evening)
- Baby’s stomach might be swollen and legs drawn up to his tummy.
- Baby might have gas, move arms and legs around, arch back, clench fists and struggle when held.
- Baby might be irritable and fussy.

What to Do:

- Respond quickly to the crying baby. This might result in less crying.
- Provide a calm time for feedings.
- If you are breastfeeding, ask your baby’s health care provider if something you have eaten or any medicines you have taken can cause the baby to have lots of gas or be fussy.
- Burp baby before feeding if she has been crying, after nursing at each breast, or after each ounce of formula if bottle feeding.
- If you bottle feed, please review formula preparation. Ask your baby’s health care provider if you have questions about how to prepare formula.
- Swaddle, carry, cuddle or rock your baby.
- Play soothing music.
- Change the baby’s position. For example, walk while using the football hold. Carry your baby face down with your arm and hand supporting baby’s body and head. You can also try placing your baby across your lap on his tummy and rubbing his back.
- Place baby in a wind-up swing.
- Offer a pacifier for added sucking.
- Do not allow anyone to smoke near your baby.
- Arrange for a friend or relative to stay with your baby so you can get away for a while each day.
- Take baby for a ride in the car, using an appropriate car seat, to quiet her.
- Set baby in a car seat on the clothes dryer while it is running and you are watching closely, or turn on the vacuum cleaner to help quiet baby.

Call Your Baby’s Health Care Provider or Clinic If:

- Baby will not take a bottle or the breast.
- Baby has a fever, diarrhea, vomiting, or other signs of illness.
- Baby acts differently than usual.