

How to help the trained night feeder

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THE PROBLEM

Your child is over 4 months of age and awakes and cries to be fed one or more times during the night. This behavior usually occurs every night and has been present since birth. Such a child is called a “trained night feeder.” The child is usually bottle-fed or breast-fed at bedtime until he falls asleep. When he wakes in the night, he is not tired; you and your spouse are.

From birth to 2 months of age, most babies normally awaken twice each night for feedings. Between 2 and 3 months, most need one middle-of-the-night feeding. By 4 months, about 90% of infants sleep more than eight consecutive hours without feeding. Normal children at this age (and premature babies who have reached 11 pounds) do not need and calories during the night to remain healthy.

Several factors can cause a child to become a trained night feeder.

Nursing or bottle-feeding the baby to sleep. If your child’s last memory before falling asleep is sucking the breast or bottle, this becomes his security (Transitional) object. A transitional object is something--like a blanket or teddy bear--that helps a child cross over from wakefulness into sleep. A child who falls asleep while being fed does not learn to comfort himself and put himself to sleep. When he awakens during the night, as most children normally do following each sleep cycle, he cannot return to sleep without the breast or bottle.

Leaving a bottle in the crib. When the child awakens during the night, she sucks on the bottle until she falls back to sleep. When the bottle is empty, she awakens fully and cries for a refill. In addition to promoting sleep problems, leaving a bottle in the crib (unless it contains only water) can lead to a form of severe tooth decay known as “baby bottle caries.” It can also cause ear infections because milk can travel easily from the throat to the ear through the Eustachian tube when the baby drinks lying down.

Offering frequent daytime feedings. Some mothers misinterpret “feeding on demand” to mean “feed the baby every time he cries.” This can lead to feedings as often as every 30 to 60 minutes. The baby’s stomach gets conditioned to being fed small amounts frequently, instead of waiting at least two hours before feeding at birth and at least four hours by 4 months of age. As a result, the baby will have hunger pangs during the night and wake up several times to be fed. This habit is called “grazing.” It occurs more often in breast-fed babies whose mother is nursing as a pacifier. Excessive fluid from frequent night feeding also increase awakenings caused by soaked diapers.

If you follow the basic recommendations outlined below, your child’s sleep habits will usually start to improve within two weeks. The older the child, the harder it is to change her sleep habits. Infants over 1 years of age will vigorously protest any change and fight sleep through the night until they are 3 or 4 years of age, when busy daytime schedules finally exhaust them. By the time, of course, you’ll be exhausted too.

THE SOLUTION

Gradually lengthen the intervals between daytime feedings to four hours or more. Nighttime feeding intervals cannot be extended if the daytime intervals are short. Gradually postpone daytime feeding times until they are more normal for your child’s age. If you currently feed your baby every hour, go to 1 ½ hours. If he cries, provide cuddling and a pacifier. It is important to provide your baby with periods of holding and cuddling separate from feeding times.

For every time you feed your baby, there should be four or five times that you snuggle him without feeding. When you baby accepts a 1 ½-hour schedule, go to two hours. For formula-fed babies, the feeding goal is four meals each day by 4 months of age. Breast-fed babies often need five feedings each day until 6 months of age, when solid baby foods are introduced.

At naptime and bedtime, place your baby in the crib drowsy but awake. When your baby starts to act drowsy, place her in the crib. If she is very fussy, rock her until she settles down or is almost asleep, but stop before she’s fully asleep. If she falls asleep at the breast at bottle, it is best to awaken her. To help dissociate feeding from the bedtime ritual, consider feeding her one hour before bedtime or naptime. Her last waking

memory needs to be of the crib and mattress, not the breast or bottle. She needs to learn to put herself to sleep. She will need this self quieting skill to cope with normal awakenings at night.

When your baby cries at naptime or bedtime, make brief contact every five to 15 minutes. Visit your baby before he becomes very upset and difficult to console. Younger or more sensitive infants may need to be checked on every five minutes. Gradually stretch out the interval between visits. Make these visits supportive, but brief and boring. Don't stay in the room longer than one minute. Don't turn on the lights. Act sleepy. Whisper, "Shhh, everyone's sleeping." Do not remove your child from the crib. Do not feed him, rock him, play with him, or bring him to your bed. This brief contact will not reward your baby sufficiently to encourage him to repeat the behavior.

When your baby cries in the middle of the night, rock her to sleep temporarily. Until your child learns how to put herself to sleep at naps and bedtime, make middle-of-the-night awakenings as easy as possible for everyone. If she doesn't fuss for more than five or ten minutes, respond as at bedtime. If she cries longer, take her out of the crib and rock her to sleep. Don't turn on the lights or take her out of the room, however. Try not to talk much to her.

Feed your baby only once during the night. After the last feeding of the day-usually between 8 and 10 p.m, depending on your baby's age- feed him only once during the night and only after four or more hours have passed since the last feeding. Make this nighttime feeding brief and boring. If it takes more than 20 minutes, you are handling or burping the baby too much.

Eventually, phase out the last nighttime feeding. Do this only after the intervals between daytime feedings are longer than three hours AND your child can put herself to sleep without feeding or rocking. Gradually reduce the amount you feed your baby at night. For bottle-fed babies, decrease the amount of formula you give by one ounce every two to three nights. For breast fed babies, nurse on just one side and for two minutes less every two to three nights. After one or two weeks, your infant will no longer crave food at night. You can also expect your child to return to sleep without holding or rocking after nighttime awakenings.

Do not put a bottle in your baby's crib. You can avoid this problem by feeding the baby an hour before this problem by feeding the baby an hour before naptime or bedtime, as mentioned earlier. If you feed him at bedtime, don't let him hold the bottle. If he needs to suck on something to help him go to sleep, offer a pacifier or help him find his thumb. Thumb sucking is a natural, soothing drive at this age. Also, don't feed him in the bedroom. Try to separate mealtime from naptime or bedtime.

Help your child attach to a security object. A security object, such as a cuddly stuffed animal, soft toy, doll, or blanket, can provide a source of reassurance and help your child separate from you. Sometimes covering a stuffed animal with one of the mother's T-shirts helps the child accept it. Include the security object whenever you cuddle or rock your child during the day. Also include it in the bedtime ritual by weaving it into your storytelling and tucking it into the crib next to your child. Eventually, she will hold and stroke the security object at bedtime in place of you.

Do not keep the crib in your bedroom, if possible. If the crib is in your bedroom, move it to a separate room. If this is impossible, cover one of the side rails with a blanket so your baby can't see you when he awakens.

Eliminate long daytime naps. After your baby has napped for two hours during the day, awaken her. If she is in the habit of taking three naps during the day, try to change her habit to two naps a day by delaying the first nap.

Don't change wet diapers during the night. Change the diaper only if it is soiled or you are treating a bad diaper rash. If you must change your child, use as little light as possible (a flashlight, for example), do it quietly, and don't provide any entertainment.

If your child won't lie down in the crib, leave he in the standing position. Try to get her to settle down and lie down. If she refuses or pulls herself back up, leave her that way. She can lie down without your help. Encouraging her to lie down soon becomes a game.

Keep a sleep diary. Record the time your child awakens in the morning, when and how long he naps during the day, and what you did to put him to sleep. At bedtime, record the time he went to sleep, how long it took, and what you did. For each time your child awakens at night, record the time, how long he was awake, and what you did. Bring the diary to the next visit.

CALL OUR OFFICE DURING REGULAR HOURS IF:

1. You're concerned that your child is not gaining adequate weight.
2. Your child acts sick
3. You think the crying has a physical cause.
4. Your child acts fearful.
5. Someone in your family cannot tolerate the crying.
6. The steps outlined here do not improve your child's sleeping habits within two weeks.
7. You have other questions or concerns.