Happy Healthy Babies Part II: Infrequent Elimination

I LOVE working with babies! I so appreciate the opportunity to share with parents the benefits of natural remedies for the simple ailments of infancy such as constipation, acid reflux, colic, and croup. Gemmotherapy can provide exactly the support these young developing bodies need for their digestive system because of its unique ability to clean and fortify organ tissue. Unfortunately, when seeking help, most parents are given advice to either wait it out until their baby's discomfort passes or they are handed a prescription to suppress the symptom. I'd like to say neither is acceptable or helpful to baby or parents.

The early development of the digestive system is critical in the building of a healthy immune system. Science is making more gains on this by the day as we learn that the chronic dis-eases of our generation stem from disturbances in this highly sensitive system. So it IS critical we pay attention to these early symptoms and set healthy patterns at the beginning of life. If you'd like to read more about this topic, I recommend this in-depth article by my colleague Dr. Ron Whitmont, a MD Homeopath, who discusses the body's microbiome and chronic disease.

I introduced this series last week, sharing the impact over time of poor elimination. One version of poor elimination is infrequent stools. Let's take a look at how simply a case of infrequent stools from my practice was solved with Gemmotherapy.

Ella's Story

Ella was a 6 week old, c-section delivered, breastfed infant. I met with Ella and her parents when they came in for help with what they perceived as her inability to settle. They described her pattern of falling asleep (day or night) and waking shortly afterwards in distress and her inability to settle back into sleep after a night feeding, searching for comfort. She could not easily bring up a burp and would wail in discomfort. New at the game of parenting, they weren't sure if this was normal or not.

I questioned Ella's parents about her bowel elimination. Was she passing stools easily after each breastfeeding or at least several each day? I was not surprised to hear that Ella sometimes skipped a day of bowel movements, and mostly had only one. While their pediatrician had shown no concern, I knew from my own clinical experience that when the bowels do not empty completely, sleep is disturbed among a host of other things. So how does a parent know if their baby is eliminating enough? Breastfed babies should have 3-4 bowel eliminations, spread out in the day. These stools should never produce any discomfort in passing or be explosive, blowing out the top of the diaper. Formula fed babies should have 2-3 stools daily that are never pellet like, produce any discomfort in passing or are explosive, blowing out the top of the diaper.

Extracts to Consider

If your baby has any secondary symptoms such as sleep disturbances, acid reflux, colic, skin conditions, or sinus congestion you can be sure the bowel elimination is not optimal as these are all a result of the body using alternative pathways to compensate.

There are two Gemmotherapy extracts I use in my practice for digestive disturbances in babies and over the next blog posts you will see how I employ them separately or together in babies depending on the circumstance. These two extracts are Fig and Walnut. Fig is known to support digestion from the mouth to the stomach. Walnut supports the large intestine creating a terrain that supports the development of healthy strains of bacteria.

Ella, being a c-section baby, had missed a healthy dose of good bacteria from her mother that babies gain in vaginal deliveries. Now that research has exploded on the microbiome of the body we know this is significant. Today I suggest the use of Walnut Gemmotherapy extract for all c-section babies to help build naturally what has been missed.

In Ella's case specifically I decided to use a combination of the two extracts due to her difficulty burping or releasing gas after feeding along with her infrequent elimination. I made a combination bottle of the two Gemmotherapy extracts for easy handling and instructed Ella's parents to give her four drops directly in her mouth right before nursing, 4x daily. Typically Gemmotherapy extracts are dosed in water but this can be complex for a young infant. In these cases, I generally advise the drops be given right on the tongue at the start of a feeding so they are washed from the mouth with breast milk.

Within one week, Ella was passing 2-3 stools a day and settling well into sleep. I suggested to her parents that after another week they taper the drops back to twice daily. If there is no return of symptoms, then this would continue along for her first months of life supporting Ella's maturing digestive system with the benefits of Gemmotherapy.

Will Ella have a problem again? It might flare at another developmental stage. However, now her parents know what to look out for and have a safe and effective tool to use should future distress occur.

We're just getting started in this series and there is a lot more to discuss so be sure to check back next week to learn a protocol for acid reflux in infants. Has this has sparked your interest in Gemmotherapy? You can learn more about this topic in my latest book Building Immunity in Babies and Children. Looking for a deeper dive into the uses of Gemmotherapy? Consider joining my upcoming Foundation of Gemmotherapy Series.