Managing Gastro-Oesophageal Reflux (GOR) in Infants Pathway

Healthier Together

NHS

Infant presents with Gastro-Oesophageal Reflux

Are Red flag symptoms present?

NO → Is infant showing marked distress?

YES → **Investigate or refer to secondary care using clinical judgement**

Red Flags:
- Bile-stained vomit: Same day referral
- Frequent forceful (projectile) vomiting
- Blood in vomit or stool (red or brown)
- Faltering growth
- Abdominal distention / chronic diarrhoea
- Unwell child / fever / altered responsiveness
- Bulging fontanelle / rapidly increasing head circumference
- Late onset (after 6 months)

Is infant showing marked distress?

NO →

Reassure:
- GOR very common
- Usually begins before 8 weeks
- May be frequent
- Usually becomes less frequent with time
- Does not usually need further investigation or treatment

YES →

Breastfed

Breastfeeding assessment by trained professional

Formula fed

1. Review feeding history, making up of formula, positioning…
2. Reduce feed volumes if excessive for infant's weight (>150mls/kg/day)
3. Offer trial of smaller, more frequent feeds (6-7 feeds/24hrs is the norm)
4. Advise parent to purchase pre-thickened formula (need large hole/fast flow teat): Cow&Gate Anti-reflux®, HiPP Organic Anti-reflux, Aptamil Anti-reflux® (carob bean gum)
   Or thickening agent to add to usual formula: Instant Carobel®
   Or thickening formula (made up with cool water): SMA Pro Anti-reflux® (potato starch) Or Enfamil AR® (rice starch)

Then → Then → Then

If **not** successful after 2 weeks

➔ **If using, STOP pre-thickened / thickening formulae or thickener**

2 weeks trial of Infant Gaviscon®

Bottle fed: 1-2 doses* into 115mls (4oz) of feed

Breastfed: 1-2 doses* mixed up into a liquid (with cooled boiled water or expressed breastmilk) and given with a spoon

If successful after 2 weeks → Try stopping it at regular interval for recovery assessment as GOR usually resolves spontaneously

If **not** successful after 2 weeks → Consider CMPA and/or Refer to Paediatrician for further investigation if GORD or alternative diagnosis suspected

Infant Gaviscon®:
*1 dual sachet = 2 doses

If < 4.5kg, 1 dose
If > 4.5kg, 2 doses

- Prescribe with directions in terms of 'dose' to avoid errors
- Maximum 6 doses a day
- Omit if fever or diarrhoea

PPi /H_2RA can be initiated in primary care if alginate therapy is not working but it is best reserved if overt regurgitation **AND** Unexplained feeding difficulties **or** distressed behaviour **or** faltering growth