



Sequelae of infant colic: evidence of transient infant distress and absence of lasting effects on maternal mental health.

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Abstract:

Colic is widely believed to remit by 3 months of age, with little lasting effect on the infant or the family.

To determine the prevalence of colic at 3 months and the proportion of cases of colic (identified at 6 weeks) that remitted by 3 months; to identify the factors predictive of colic's remission; and to explore the potential lasting effects of colic on maternal mental health.

Prospective cohort study of 856 mother-infant dyads. Self-administered questionnaires were mailed to mothers at 1 and 6 weeks and 3 and 6 months post partum. Standardized instruments were incorporated into the first and last questionnaires to assess maternal anxiety, postnatal depression, and social support. At 6 weeks and at 3 months, mothers completed the Barr diary and/or the Ames Cry Score.

Data from 547 dyads were available for analysis. The prevalence of colic at 3 months was 6.4%. More than 85% of cases of colic had remitted by 3 months of age. These infants were more likely to be female, whereas the mothers of these infants were more likely to have received pain relief during labor/delivery and to have been employed during pregnancy. Reductions in scores for trait anxiety and postnatal depression, although smaller for mothers whose infants were colicky at 6 weeks of age, were not significantly different from those of mothers whose infants were never colicky.

This study provides support for the belief that, in most cases, colic is self-limiting and does not result in lasting effects to maternal mental health.

Notes:

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