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Cry Babies

When infants sleep poorly, fatigued parents want answers.

Story by Dale Smith

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It's 3 a.m. and baby is unhappy. He has spit up most of the contents of his last feeding, and is now crying inconsolably. It's not the first time this has happened, nor do his exhausted parents imagine it will be the last.

Later, at the pediatrician's office, baby's stressed-out mom and dad express concern: What is going on? And, more to the point, what can we do to make feel baby feel better?

In recent years, according to findings by MU psychological sciences Professor Laura Scherer, doctors are more and more inclined to answer that



Photo courtesy of Laura Scherer.

gastroesophageal reflux — a condition commonly known as reflux disease — may be to blame. It's a diagnosis that typically results in a prescription for acid-reducing medications. From 1999–2004, in fact, the use of prescription medications to treat gastroesophageal reflux, or GERD, in infants increased 700 percent.

Unfortunately, according to Scherer, GERD is often not the problem. Not only does this make prescriptions to alleviate it superfluous, but her study found that using diagnostic labels like “GERD” may cause parents to believe drugs are needed to deal with these common, if harrowing, challenges of infant development.

“Labeling these symptoms as “GERD” can make a medical condition out of a normal behavior,” Scherer says. “When a set of behaviors is labeled a ‘disease,’ this can make parents think that medication is appropriate for their child, regardless of whether the drugs are effective or not.”

Scherer says the rise in GERD-related diagnoses and prescriptions is likely due, at least in part, to exasperated parents urging their doctors to act. It may be tough, she counsels, but parents must be prepared to trust what their pediatrician tells them — even when the message is that medications aren't needed.

“The over-use of medications can be a needless

expense,” Scherer says. “In addition, the long-term effects of these acid-reducing medications have not been well studied in infants, though the medication has been associated with slightly higher rates of pneumonia.”

The study was published in the April issue of *Pediatrics*, the journal of the American Academy of Pediatrics. Brian Zikmund-Fisher, Angela Fagerlin and Beth Tarini, each from the University of Michigan in Ann Arbor, were co-authors.

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