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## Helping Your Baby Sleep Through The Night

Approximately 10%-15% of children between 4 months and 24 months of age have problems sleeping at night. They wake up and cry one or more times during the night in order to be fed or to receive attention from their parents. These incidents usually occur every night. In most instances, the baby has had the behavior since birth. If your child fits this description, the information presented here will help you understand the problem and take steps to establish a normal nighttime sleeping pattern.

### What Causes Nighttime Awakening?

All children, especially during the first year of life, may awaken several times each night following dreams, but most can put themselves back to sleep. The ones who have not learned how to do this cry for a parent. If you provide too much attention (constant rocking, for example), the infant becomes dependent on you for returning to sleep.

If you play with your baby at these hours, he/she may want this kind of entertainment every night. These infants are known as trained night criers. The infants who demand to be fed as well as held are called trained night feeders. After 6 months of age, the normal separation fears of many infants are accentuated at bedtime and during the night. These children become fearful night criers.

Changing diapers during the night, allowing excessive daytime naps, and sleeping in the same room with the baby can contribute to all three types of sleep problems.

### Trained Night Feeders

If your baby is fed during the night, deal with this problem first. From birth to 2 months of age, babies may awaken twice a night for feedings. Between 2 and 3 months, some babies may need one middle-of-the-night feeding. By 4 months of age, about 90% of infants can sleep more than eight consecutive hours without feeding. The remainder can learn to sleep through the night if you take the following steps:

- Increase the daytime feeding intervals to four hours. Nighttime feeding intervals cannot be extended if the daytime intervals remain short. The baby's stomach is conditioned to expect frequent feedings and complains if feedings are delayed. Gradually postpone feeding times until they are more normal for the child's age. Your goal is four meals per day by 4 months of age and three meals per day by 6 months of age. During the day, the infant's demands for unnecessary feedings can be met with extra holding, attention, or a pacifier.
- Discontinue any bottle in bed immediately. Feed your child at bedtime, but do not let him/her hold or keep the bottle. If your child has increased sucking needs, offer a pacifier.

- Phase out night feedings. Keep in mind that normal babies over 4 months old (and premature babies who have reached 11 pounds) do not need any calories during the night for health reasons. Once the daytime intervals are normal, nighttime awakening will probably decrease or disappear spontaneously. In the meantime, when your baby awakens at night and appears hungry, limit the amount of milk offered, keeping your baby slightly hungry. For bottle-fed babies, the amount can be decreased by one ounce every few nights until your infant no longer has a craving for food at night. For breast-fed babies, nurse your infant on just one side.

With these measures, improvement should occur in about two weeks. It is important to start correcting the problem as early as possible. The older the child is, the longer it may take to break the habit.

## **Trained Night Criers**

If your baby does not awaken for food but still has nighttime crying, respond briefly or not at all. Crying is not harmful and infants cannot get over this problem without some crying. When your baby awakens and cries, wait at least five minutes before going into the room. Infants should be taught to use their own resources to get back to sleep.

If the crying continues, you can go in, but do not stay longer than one minute. Act sleepy, whisper "Shhh, be quiet, everyone's sleeping," add a few reassuring comments, and give some gentle pats. Do not turn on the lights or remove your baby from the crib. Absolutely avoid rocking or playing with your baby, bringing him/her to your bed, or staying in the room for more than one minute. Most young infants will cry for 30 to 60 minutes and then fall asleep. If the crying persists, you may recheck your baby every 15 to 20 minutes for one minute or less each visit.

## **Fearful Night Criers**

If your child sounds fearful, panics when you leave, cries until he/she vomits, or by past experience will cry nonstop for hours, go in immediately and reassure him/her. Stay as long as it takes to calm your baby, but do not lift him/her out of the crib. At the most, sit in a chair next to the crib with your hand on his/her body. Do not talk much, and leave the lights out. Leave for a few minutes every now and then to teach your child that separation is tolerable. Do the same thing at naptime and bedtime.

For separation fears, using a night-light (to offset fear of the dark) and leaving the bedroom door open (to offset fear of the parent being gone) may be helpful. During the day, respond to the child's fears with lots of hugs and comforting. Young babies may need more time being carried about in a front sling or backpack. Children of working mothers may need undivided time and cuddling in the evenings. Also, practice separation games like peekaboo, hide-and-seek, or chase me.

## **Steps To Take For All Types Of Sleep Problems**

Whether your baby's problem is trained night feeding, trained night crying, or fearful night crying, the following measures should be helpful:

- Put your baby to bed on his/her back or side still awake. Many trained night feeders and criers are rarely if ever placed in their cribs awake. If your baby goes to sleep in your arms occasionally, that is fine. But try to place your baby in the crib awake for bedtime and all naps. His/her last memory should be of the crib, not of you or the bottle.
- Move the crib to another room. If the crib is in your bedroom, move it to a separate room so you are not awakened by your baby's normal tossing and turning. If this is impossible, cover one of

the side rails with a blanket so your baby can not see you when he/she awakens. Be sure the cover is anchored safely from the outside of the crib.

- Eliminate long daytime naps. Try to limit your baby's naps during the day to 3 hours. If your baby is in the habit of taking three naps per day, try to change this to two naps.
- Do not change diapers during the night. Babies can survive until morning with a wet diaper. The diaper can be changed if it is soiled, although this is uncommon. It also may be changed if you are treating a bad diaper rash. If you must change your child, use a flashlight, do it quietly and do not provide any entertainment.

**Call our office during regular office hours if:**

- You feel the crying has a physical cause
- If your child is acting sick
- If someone in your family cannot tolerate the crying
- If the steps outlined here do not produce improvement in sleep habits within two weeks
- Feel free to contact us if you need additional information on sleep problems.

This information should not be used as substitute for the medical care and advice of your child's physician. Health related topics found on the Andorra Pediatrics web site should not be used for diagnosing purposes or be substituted for medical advice. As with any new or ongoing treatment, always consult your professional healthcare provider before making any changes in treatment or beginning any new treatment. If you have any questions or concerns, please call our office.