

Infantile Colic - Why Choose Natural Chiropractic Care?

Long-Term Effects of Infant Colic: A Survey Comparison of Chiropractic Treatment and Nontreatment Groups

J Manipulative Physiol Ther 2009 (Oct); 32 (8): 635–638

Toddlers who were treated with chiropractic care for colic were twice as likely to not experience long-term sequelae of infant colic, such as temper tantrums (relative risk, 2.0; 95% confidence interval, 1.3-3.0) and frequent nocturnal waking (relative risk, 2.0; 95% confidence interval, 1.5-2.8) than those who were not treated with chiropractic care as colicky infants.

Sixteen Infants with Acid Reflux or Colic Undergoing Upper Cervical Chiropractic Care to Correct Vertebral Subluxation: A Retrospective Analysis of Outcome

J Pediatric, Maternal & Family Health - Chiropractic May 2009: 1–7

The objective of this article is to explore the diagnosis and treatment of trauma-induced injury to the upper cervical spine through the use of protocol developed by the International Upper Cervical Chiropractic Association (IUCCA) and to investigate the potential for improving and eliminating colic and acid reflux through the correction of upper cervical injury. Two diagnostic tests, paraspinal digital infrared imaging and laser-aligned cervical radiography, were performed according to IUCCA protocol. These tests objectively identify trauma-induced upper cervical subluxations (misalignments of the upper cervical spine from the neural canal) and resulting neuropathophysiology. Upper cervical subluxations were found in all 16 infants and all 16 cases were resolved with IUCCA upper cervical care.

Comparison of the Short-term Effects of Chiropractic Spinal Manipulation and Occipito-sacral Decompression in the Treatment of Infant Colic: A Single-blinded, Randomised, Comparison Trial

Clinical Chiropractic 2008 (Sep); 11 (3): 122–129

Both treatments appear to offer significant benefits to infants with colic. Infants treated by SMT or OSD cried less and slept more after 2 weeks of treatment. There were no differences in outcomes between the two treatment approaches. Although the participants completed the trial of therapy prior to the usual age of remission for infant colic, the natural course cannot be ruled out.

Chiropractic Management of Infantile Colic

Clinical Chiropractic 2004 (Dec); 7 (4): 180–186

These cases suggest a possible association between birth trauma; the development of cranial and spinal segmental dysfunction and consequential manifestation of symptoms

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of infantile colic. Secondly, they demonstrate chiropractic treatment successfully restoring correct spinal and cranial motion, with an associated resolution of symptoms.

Vertebral Subluxation Correlated with Somatic, Visceral and Immune Complaints: An Analysis of 650 Children Under Chiropractic Care

Journal of Vertebral Subluxation Research 2004 (Oct 18): 1–23

The process of neurological learning or programming of the central nervous system with respect to locomotion, posture, proprioception, and body kinetics begins within a few short months after birth. Our study revealed a pattern of pelvic dysfunction correlated with numerous somatic, visceral and immune complaints. These dysfunctions should be discovered as early as possible in a child's development to effect a correction and the relationship between these dysfunctions and ill health should be further studied.

Differential Compliance Instrument in the Treatment of Infantile Colic:

A Report of Two Cases

J Manipulative Physiol Ther 2002; 25 (1) Jan: 58–62

A PulStar Function Recording and Analysis System (PulStar FRAS, Sense Technology, Inc, Pittsburgh, Penn) device was used to administer light impulses (approximately 1.7 joules, which produced a 3 to 4 lb force) at each segmental level throughout the dorsal spine, with probe tips spaced 2 cm apart straddling the spinous processes. Crying was reduced by 50% after a single session of instrumental adjusting in a 6-week old girl and after 4 sessions in a 9-week old boy, according to colic diaries kept by the mothers. Average hours of uninterrupted daily sleep increased from 3.5 to 6.5 hours after a single session.

Chiropractic Management of an Infant Experiencing Breastfeeding Difficulties and Colic: A Case Study

J Clinical Chiropractic Pediatrics 2000; 4 (1): 245-247

Immediate improvement of infant's symptoms following the first adjustment with complete resolution within five days. A recurrence, with exacerbated presentation, (as reported by the mother) was noted within three hours of the infant receiving his second Hepatitis B vaccine. Immediate remission was not observed nor was the infant able to remain subluxation free during the stress-reaction phase described by Scheibner. However, complete remission of symptoms and the ability of the infant to remain subluxation free occurred once the infant was past that acute reaction phase.

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The Short-term Effect of Spinal Manipulation in the Treatment of Infantile Colic: A Randomized Controlled Clinical Trial with a Blinded Observer

J Manipulative Physiol Ther 1999; 22 (8) Oct: 517–522

By trial days 4 to 7, hours of crying were reduced by 1 hour in the dimethicone group compared with 2.4 hours in the manipulation group ($P = .04$). On days 8 through 11, crying was reduced by 1 hour for the dimethicone group, whereas crying in the manipulation group was reduced by 2.7 hours ($P = .004$). From trial day 5 onward the manipulation group did significantly better than the dimethicone group. The authors then conclude: Spinal manipulation is effective in relieving infantile colic. **You may also enjoy [FCER's review of this article](#).**

Chiropractic Care of Infantile Colic: A Case Study

J Clinical Chiropractic Pediatrics 1999; 3 (1): 203-206

This study outlines the chiropractic care of an eleven-month-old male with severe, complicated, late onset infantile colic. The infant had been unable to consume solid foods for a period of four months, and suffered from severe constipation. In addition, this subject demonstrated extreme muscular weakness and lack of coordination. The baby was unable to crawl, stand, or walk, and was greatly unresponsive to his surroundings.

Infantile Colic Treated by Chiropractors: A Prospective Study of 316 Cases

J Manipulative Physiol Ther 1989; 12 (4) Aug: 281–288

A prospective, uncontrolled study of 316 infants suffering from infantile colic and selected according to well-defined criteria shows a satisfactory result of spinal manipulative therapy in 94% of the cases.

Study Finds Benefits for Colic with Chiropractic Spinal Manipulation

The first controlled randomized clinical trial involving the chiropractic management of infantile colic has just been published by a research group in Denmark at Odense University and in private practice. Although previous studies dating back over the last 10 years have been encouraging, this is the first demonstration of the clear clinical advantage conferred upon infants by spinal manipulation as compared to a control group given dimethicone, commonly used in medical treatment of colic.

Infantile Colic ~ Kids Need Chiropractic Too!

The following day Sally took her baby to the chiropractor to have his spine evaluated. The doctor evaluated Brendan's spine and found two areas which needed to be

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corrected. A couple of light, finger-tip adjustments and the job was done. "How could my baby have spinal problems at his young age," Sally asked. "Well," said the chiropractor, "it can often be the trauma from a difficult birth, a long labor or perhaps even the way we burp the baby or pick the baby up from the crib, that produces spinal problems at such a young age." The next day, Brendan was somewhat better. Sally took him to the chiropractor again for a further adjustment, similar to the ones performed the previous day. Three days after Brendan's first spinal adjustment, Sally just couldn't believe how much her son had improved. He now slept like a baby, only cried when he was hungry or wet, and was once again the perfect baby that Sally knew he was. And Bob slept happily ever after.