

Underlying Causes of a Feeding Difficulty

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Getting food or liquid in the mouth is only the beginning of a complex process our bodies go through when we eat. The gastrointestinal (GI) system inside our bodies takes the food we eat and helps to break it down and process the nutrients.

The GI system also plays another major role in feeding: it provides sensory feedback to our brain about the experience we have while eating different foods. This means that for our children, the response their GI system has to foods can play a major role in their food acceptance, the quantity of food they will eat, and when they want to eat. The two most common problems with a child's GI system that lead to feeding difficulties are constipation and acid reflux.

Constipation

Constipation often goes unrecognized and can cause discomfort and pain for children. Constipation is when a person has infrequent bowel movements and hard to pass stools. The biggest factors that contribute to constipation are medications, food allergies, lack of physical activity, dehydration, and fiber intake.

When a child is dealing with constipation, eating gives him or her discomfort and a feeling of being full quickly. Children often associate eating with this pain and want to eat less and less. The good news is that once we identify the problem, we can target the underlying causes for constipation and offer relatively

quick relief. Often, the first steps are adjusting fluid and fiber intake, adding more movement, or using a stool softener.

Reflux

Another potential underlying cause of a feeding difficulty is acid reflux or GERD. Reflux is when the stomach acid or bile flows back up from the stomach and into the esophagus. This irritates the tissue lining and causes major discomfort when swallowing and during/after eating.

Many studies have found that reflux is the number one cause of food refusal in children. If this process starts as an infant, this food refusal can become a learned behavior and have effects long after the reflux has been treated. Noticing and treating reflux quickly is always the best option.

The following list includes many of the most common signs. If you are already experiencing feeding difficulties with your child, reflux could be part of the problem and should be considered. If you don't currently have feeding concerns but are noticing any of these symptoms, we encourage you to still consider reflux so that it does not cause a future feeding problem.



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Symptoms of acid reflux to look for:

- Frequent spit ups
- Ear infections
- Cough
- Arched back
- Hiccups
- Vomiting
- Sleep disturbances
- Changes in posture
- Food refusal
- Irritability
- Breathing changes
- Poor weight gain

Unfortunately, it is not always easy to diagnosis reflux because it can be silent, meaning your child may not be exhibiting any of these signs. Working with your medical provider and our feeding team will help you to know if it is something worth exploring further. Some of the first things we will do to treat acid reflux is to work with your pediatrician to find the right medication, help you to find the right formula or foods that will limit acid production, and position your child during and after meals.

Positioning is one of the quickest ways to help an infant's body handle the acid and ensure it stays in the stomach where it is necessary and productive. Ensuring that your child is upright with a straight trunk will help reduce pressures that often cause acids to expel. Additionally, studies have shown that placing infants with reflux on their left side after feeding will reduce the occurrence of acid escaping into the esophagus.

If you have questions about anything feeding related with your child, please reach out to your child's medical provider.

