

MIDNIGHT SNACKERS

FEEDING AND SLEEPING ASSOCIATIONS . . .

Your baby may have a strong sleep association with a bottle or breast feeding. You may be offering the breast or bottle many times a night to help your baby back into a sleep state following normal night wakings.

You are your child's expert. You and your child's pediatrician will decide if she needs night feedings for nutrition. **Most babies over the age of eight months do not need the extra feedings during the midnight hours.**

"LEARNED" FEEDINGS . . . If your child does not need these nighttime feedings for nutrition, his "internal clock" has learned this feeding schedule. He will hungrily suck, finish the feeding, and fall fast asleep. He has become accustomed to this nighttime eating pattern because the feedings continue to be offered. Eating at an abnormal time keeps his digestive system working when it should be resting for the night. This active digestive system will continue to awaken your baby in a seemingly hungry state. An abnormal sleeping-feeding cycle develops.

If this is your nighttime challenge with your baby, it will require two steps to change his sleeping pattern:

(1) eliminate nighttime feedings and (2) relearn a sleep pattern.

STEP ONE

ELIMINATE NIGHTTIME FEEDINGS

Some issues to look at before exploring this challenge:

Take a look at your child's daytime eating schedule. A daytime "snacker" (eating small amounts all day long) will probably continue this pattern into the nighttime hours.

Encourage your child to eat at appropriate time intervals. Discourage him from being a bottle- sipper all day long.

Check your before-bed feeding to be sure it is appropriate. Your baby's doctor can give you guidance with this issue.



Photo by Howard G. Buffett

Extra liquids during the night will make very wet diapers. This discomfort could add to the cause of night wakings.

A POSSIBLE SOLUTION . . . Give your baby less food, less often during the night. This is a gradual weaning process and will keep crying to a minimum.

Begin by putting one ounce less than your baby is used to in each bottle at naptime and nighttime feedings. If you are breast-feeding, shorten the nursing time by a few minutes.

Put your child into her bed when the feeding is complete. She may be relaxed and quiet but not yet asleep.

If she cries when the feeding is over, or wakes crying before 2 hours have passed since the last feeding, do not feed her again. Comfort her in another way—patting her bottom, offering a "lovey," rubbing her back, singing to her, etc. **CAUTION:** This comforting without a feeding may make her more upset. She may calm more quickly with you out of the room. The goal is to help her fall asleep without a feeding.

If the waiting period is over (two hours or more), you may offer another feeding.

Continue this gradual decrease in the amount in each bottle or time of breastfeeding while you also increase the amount of time between feedings. (See chart 1)

CHART 1

DAY	OUNCES IN EACH BOTTLE OR MINUTES FEEDING	MINIMUM HOURS BETWEEN FEEDINGS
1	7	2.0
2	6	2.5
3	5	3.0
4	4	3.5
5	3	4.0
6	2	4.5
7	1	5.0

Once your child is falling asleep without nursing or taking a bottle, you have eliminated the association of sleep and feeding. She may still need you to rub her back, pat her bottom or rock her in order to soothe her to sleep. You are now ready to help her learn a new sleep pattern-STEP TWO.

STEP TWO

LEARNING A NEW SLEEP PATTERN

The following suggestions for helping your baby sleep through the night are taken from Dr. Richard Ferber's book, *Solve Your Child's Sleep Problems*. It has been researched, tested and proven to be successful as one way to help a child relearn a sleep pattern when he has become dependent on a "crutch" at bedtime. Crutches may include rocking, patting, playing music, singing, etc.

Each night at bedtime and after nighttime wakings, begin to encourage your child to fall asleep alone, without you being in his room.

After a pleasant bedtime routine, put your child in his crib when he is quiet but not yet asleep.

Leave the room. No doubt, your baby will immediately begin to cry when you leave.

If after five minutes he is still vigorously crying, go back into his room. **DO NOT PICK YOUR CHILD UP.** Stay for about two to three minutes. Talk softly, pat him a few times and reassure him that you have not abandoned him.

Leave again even if his crying intensifies. This time wait ten minutes before returning to reassure him.

Repeat the same reassurance. You do not want your child to fall asleep when you are present. The goal is for him to find his own self-comforting pattern. You may want to encourage a "lovey" such as a blanket or stuffed toy.

Leave again and return after 15 minutes if crying persists. This is the maximum waiting time for the first night. Continue to wait 15 minutes before returning to offer reassurance in the same manner. As you feel more comfortable with these time limits you may increase them on future nights. (see chart 2)

If the crying stops or subsides to only whimpering, do not go back into your child's room.

Each time your child wakes up in the middle of the night begin the same process working up to the 15 minute wait. Continue this routine until his usual waking time.

Use this same routine for naptimes. If your child has not fallen asleep after one hour, end the naptime. Or if he is awake and crying after getting a small amount of sleep, end the naptime. If he falls asleep later on the floor or playing, that's okay. Continue to encourage him to sleep in his crib at naptime.

CHART 2

Number of minutes to wait before going to your child briefly.

DAY	AT FIRST WAIT	SECOND WAIT*	THIRD WAIT*	SUBSEQUENT WAITS*
1	5	10	15	15
2	10	15	20	20
3	15	20	25	25
4	20	25	30	30
5	25	30	35	35
6	30	35	40	40
7	35	40	45	45

*If your child is still crying.

This gradual approach will lessen the anxiety you feel about hearing your child cry. He will begin to learn some new rules; however, he won't understand them at first. You want him to know you are still there caring for him. He will quickly learn you are still there, but the reward of rocking, a bottle or holding will not come at this time.

POINTS TO REMEMBER

Make sure your baby's doctor has not recommended further nighttime feedings for your baby. Make sure your child is not crying because of an illness.

Make sure your child is not suffering from severe fears or anxieties. You will know a baby has separation anxiety if she can't stand to be apart from you during the day and cries out for you to come in--but not necessarily do anything at night.

Once you decide on a routine to help your baby sleep through the night, you will need to be consistent. You may feel very determined at 10:00p.m. and very tired at 2:00a.m.

When you have helped your baby finally sleep through the night, she may return to nighttime wakings for several reasons: sleeping in a strange environment, new developmental skills, illness, etc. After the passing of the temporary disruption, go back to the progressive waiting routine if your child continues to wake in the middle of the night.

What about the other members of the household or neighbors if you live in an apartment? Won't the crying keep them awake? You may want to explain to everyone, including neighbors, what you are going to do. Start the program at the most convenient time. A few nights of lost sleep will be worth the many nights of uninterrupted sleep to come.