

Baby Whisperer

Infant & Child Sleep Consultant



Sleep guide & facts for baby's

Birth to twelve months

Sleep promotes sleep, therefore children who sleep well go off to sleep easily, tired children are difficult to get to sleep and overtired children are very difficult to get to sleep!

What is sleep for:

Good quality sleep is essential for growth and development. Sleep is essential for brain function and in the newborn child the brain is undergoing rapid development in brain size and function. The immature, growing brain has a greater requirement for sleep than the mature brain; in addition to this the newborn brain has little reserve to process the massive amounts of information and stimulation it is now submitted too.

Sleep:

Sleep is a complex process. A sleep cycle lasts for approximately 45 mins in babies. Each sleep cycle is divided into REM sleep (Rapid Eye Movement, or dreaming state) and Non-REM (quiet sleep).

Non REM is further subdivided into four categories:

- A. Drowsiness
- B. Light sleep
- C. Transition (between light and deep sleep)
- D. Deep sleep

Then REM sleep

Sleep develops in the later stage of pregnancy. The unborn child commences REM sleep at approximately six to seven months of gestation and Non-REM sleep at seven to eight months of gestation. Non REM sleep is not properly developed in the new born baby until one to three months of life.

In babies, night sleep differs from day sleep in that babies sleep in a deep sleep for the majority of the night. They cycle between light and REM sleep frequently with partial waking after each REM period. This explains why they wake frequently overnight if the baby has not learned to self settle. Partial waking becomes more frequent towards the early hours of the morning.

The hormone cortisol plays an important part in sleep. It falls when we start to fall as sleep and conversely rises in the morning, and then we wake. Over-tiredness causes stress in the newborn baby, and cortisol levels are high in stressed individuals.



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The overtired baby

An overtired baby behaves very differently to a tired adult. As an adult the more tired we become the more desperate we are for sleep. If we were to sit or lay horizontal we would fall asleep, however babies can't and won't go to sleep if they are overtired. This is a very common cause of sleep problems within the first twelve weeks of life. Overtired babies also tend not to feed well.

Establishing a routine

There are many philosophies regarding parenting and how and when babies/children should sleep. One extreme is all for co habitation, demand feeding and allowing the baby/child to determine its own routine, and the other extreme is feeding/sleeping by the clock irrespective of the child's/family's needs and demands.

From my experience and as a mother of three, there has to be a happy balance between. Routines need to be flexible to fit in with the constraints of modern family life. Sometimes things won't go according to plan. The important goal is to have a happy, healthy baby who is gaining weight and sleeping well between feeds and a family that is well adjusted and rested!



Sleeping props

Some sleeping props are useful for a younger baby to assist with bonding and attachment. However persistent use of props can result in the baby becoming reliant on them to establish sleep and resettle. When trying to establish a routine it is important to assess which props are helpful and which are not.

Helpful props:

- Thumb sucking.
- Special blanket.
- Particular bedding or clothing.
- One soft, small flat, noiseless toy.

Unhelpful props:

- Feeding baby to sleep. (breast or bottle)
- Rocking, walking, driving baby to sleep.
- Co sleeping with baby to sleep.
- Dummy (although is helpful in babies under six months of age with an increased need to suck, and in babies with mild to moderate reflux). In these cases use after a period of attempted resettling rather than a first resort.
- Music.
- Needing to be wrapped or swaddled. (NB: once baby starts to roll or over 6 months of age should not be wrapped)

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What to aim for

Birth

Feeding every 3 to 4 hours in a 24 hour period. Averaging six feeds per day.

A total awake time of 1 hour between feeds during daylight hours.

Four to six weeks

Feeding every 3 to 4 hours and managing a single sleep lasting 5 to 6 hours overnight.

A total awake time of 1 hour between feeds during daylight hours (looking for tired signs).

Six weeks

Feeding every 3 to 4 hours throughout the day. Averaging approx. 6 feeds per day, with a single sleep of 6 to 8 hours overnight.

A total awake time of 1 to 1.5 hours between feeds during daylight hours.

Twelve weeks

Feeding every 4 hours during the day and working towards a single sleep of 8 hours at night. Some babies may require a roll-over feed at the parent's bedtime.

A total awake time of up to 1.5 hours between feeds during daylight hours.

Four Months

Feeding every 4 hours during the day and working towards a single sleep of 10 hours at night. Some babies may require a roll-over feed at the parent's bedtime.

A total awake time of up to 2 hours between feeds during daylight hours.

Six Months

Feeding every 4 hours during the day and working towards a single sleep of 12 hours at night. Some babies may require a roll over feed at the parent's bedtime.

Two day sleeps of 1.5 to 2.0 hours and total awake time of up to 2.5 hours between feeds during daylight hours.

(Refer to age specific routines for further detail).

> This is intended as a guide only. No two babies are the same. Times may vary; some babies may feed more frequently at times of growth spurts, when milk supply is low, in warmer weather and after a longer stint overnight.



Breast feeding mothers

Milk production works on a supply demand theory. If the baby demands it, your body will endeavour to supply it. But in saying that, milk supply is also conversely related to the quantity of water you consume.

If you don't keep yourself well hydrated your body will not be able to produce enough and this - along with other factors - can be a common cause of low milk supply.

Herbal remedies to assist in boosting milk supply:

- Blessed milk thistle
- Fenugreek
- Roasted fennel with a little olive oil and squeezed fresh lemon (actually very tasty, especially when roasted with potatoes).

For those of us who suffer a chronic low milk supply – despite all attempts from lactation consultations, good hydration and herbs etc – may try a medicine Domperidone, which has been reported as having effective results. You will need to speak with your GP regarding this.