

Colic in babies

Colic is the name for excessive and frequent crying in a baby who appears to be otherwise healthy. It affects up to 1 in 5 babies.

Colic usually starts when a baby is 2 weeks old. It usually ends by 4 months of age. Sometimes it lasts until the baby is 6 months old.

It is not known why babies get colic.

Colic can be upsetting for parents. It's hard to see your baby crying so intensely, and it can seem like your baby is in pain.

Signs and symptoms of colic

A baby has colic if they cry:

- for more than 3 hours a day
- for more than 3 days a week
- for more than 3 weeks

Crying is more common in the evening time. Sometimes a baby with colic can cry for many hours during the day or night.

Other signs and symptoms include:

- restlessness
- drawing their legs up, arching their back or clenching their fists
- going red in the face
- seeming to settle and then having another spell of crying
- the crying may sound loud and intense
- it can be very hard to soothe them

If your baby has colic, they may appear to be in distress. But babies with colic are fine between periods of crying. Your baby should be feeding well and gaining weight even if they have colic.

Causes of colic

We don't know what causes colic. Colic is more common in premature babies.

It can be more common if the baby is in a home where somebody smokes.

[Advice on quitting smoking](#)

Don't forget, not all crying is due to colic.

[Why babies cry](#)

How to help a baby with colic

There is no treatment for colic. Different things will help different babies. As you get to know your baby, you will learn what works for your family.

Things that might help include:

- Hold your baby close during a crying episode. You are not 'spoiling' your baby by responding to their needs in this way.
- Sit your baby upright during feeds.
- Wind or burp your baby after feeds.
- Gently rock your baby.
- [A warm bath can help some babies with colic.](#)
- Avoid over-stimulating your baby with loud noise, bright lights or a crowded room.
- Gently massaging your baby's tummy before they are likely to cry may help. Do this in a circular motion. Do not massage after a feed.

There are some other things you may like to try. There is no scientific research to support their use, but some parents find them helpful.

These include:

- movement and motion, for example a walk in the buggy or pram, or a car journey
- music
- 'white noise' like the low frequency noise of a vacuum cleaner, a radio not tuned in properly or 'white noise' music or apps

⚠ Do not put a tube into your baby's bottom

Some products claim to help colic by placing a tube in your baby's bottom to release gas. There is no evidence that this can help.

Do not put a tube in your baby's bottom. It is likely to be uncomfortable for them and could cause serious damage to their body, even if it's not obvious at the time.

Some parents use gripe water or simeticone drops. But there is no evidence to show that they work. Always talk to your pharmacist before giving these to your baby.

Colic and breastfeeding

Breastfeeding your baby can help them to relax and relieve pain.

Try emptying your milk in one breast during a feed before changing breasts. You create two types of milk when breastfeeding and the second half of your milk has more fat in it.

Fat slows down digestion and helps to release food slowly, helping with digestion.

If breastfeeding, avoid drinking tea, coffee and other drinks that contain caffeine.

[Breastfeeding](#)

Colic and bottle feeding

If you are bottle feeding, minimise the amount of air in the bottle when you feed. Feed your baby in the correct position.

Avoid changing the type of formula your baby is using. Always talk to your public health nurse (PHN) before changing your baby's formula milk.

You might notice that some teats and bottles are labelled as being especially good for colic. There is no evidence for this. Sometimes these products can be expensive and hard to clean.

More tips on [bottle feeding](#)

Complementary therapies

Be careful about using complementary therapies like herbal remedies. These have not been proven to work and some have been shown to cause serious side effects.

There is very little evidence that cranial osteopathy or spinal manipulation help with colic. Always speak to your PHN or GP before bringing your baby for these treatments.

When you should see your GP

You know better than anyone else what your baby is usually like. Trust your instincts.

If you think something is seriously wrong, get urgent help. Particularly if they have other worrying symptoms.

Bring your baby to the GP if:

- you are not sure if your baby has colic or why they are crying
- they are vomiting green stuff (bile)

- vomit is shooting out in a forceful way (projectile vomiting)
- they have bloody poo
- they are not feeding well
- their symptoms started after you introduced formula
- they are losing weight or not gaining weight
- you are concerned
- you are finding it hard to cope

Bring your baby to the emergency department if they:

- have a fever over 38 degrees Celsius
- are crying inconsolably
- have a weak or high-pitched cry

 [Find your nearest Emergency Department](#)

Looking after yourself

Many babies get colic. This is not your fault. You are not spoiling your baby and your baby is not rejecting you.

It can be upsetting when your baby is difficult to comfort. It can also be upsetting when someone else manages to soothe a baby that has been crying with you for hours.

Try and remember:

- this will stop eventually. All babies with colic have improved by 4 to 6 months
- you need to get rest and look after your own wellbeing. If possible, ask family and friends for support
- it can help to meet other parents experiencing colic - for example, through mother and baby groups

[Winding your baby](#)

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