



DR HOWARD CHILTON

with his daughter, **GEORGINA DOWDEN** RN RM IBCLC

Understand your
baby's needs in the
first twelve months

BABY ON BOARD

EXPANDED EDITION

BABY ON BOARD



Dr Howard Chilton

with Georgina Dowden

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editions

Praise for this book

**Antonia Kidman, mother of four, TV presenter of
*From Here to Maternity***

Baby on Board is a wonderfully reassuring and informative book that covers every conceivable aspect of parenting a baby. An essential up-to-date guide for every new parent.

**Renee Kam, mother of two, Certified Lactation Consultant,
physiotherapist and author**

An evidence-based, easy to read, encouraging and practical book about caring for your baby in a gentle and instinctive way.

**Joy Heads OAM, IBCLC, Lactation Consultant, Royal Hospital for
Women, Randwick, NSW**

How to mother/parent is the biggest question, and challenge, for any new mother. *Baby on Board* encourages women to follow their instincts and respond to their baby's biological needs without feeling guilt, in a society dominated by rules, clocks and unrealistic expectations about how newborns 'should' behave.

Thank you Dr Chilton for your book - I LOVED it! — Sasha Harrison

I wish more mothers would read it. I felt anxious and unsure of so many things I was doing with my baby, but after reading your book I felt so much better about everything! I now trust my gut and when I'm unsure I refer to your book for confirmation & guidance :)

**Sheryl Sidery, Clinical Midwife Consultant, Facilitator of
'Mumsense' Postnatal Group, mother of four**

I have been a midwife and mother for 35 years and found *Baby on Board* to be inspirational reading. I have re-read *Baby on Board* many times and always find something new and fascinating inside its pages. I have recommended it to hundreds of parents. This book changed how I practise midwifery. The anthropological look at how we parent in the 21st century, and why babies are the way they are, enables parents to enjoy their newborn by letting go of the 'post Victorian' style of parenting. *Baby on Board* is an essential read for all parents — not just first timers. This book

has the potential to create a more securely emotionally attached next generation – which has far reaching consequences for the human race!

Rob Buist, Obstetrician, Prince of Wales Private Hospital

I give *Baby on Board* to all my pregnant patients as it is the perfect 'instruction manual' for new parents. Dr Chilton's approach is sensible and practical without being baffling or too technical.

**Thank you for your wonderful book *Baby on Board* –
Samantha Turrisi**

Literally, it has been a wonderful resource for me and my husband. After 10 years in a professional environment, with little to do with babies since my sister was one, and embarking on the life of a mother for the first time, your book gave me a great understanding of why human babies are the way they are and then confidence from having this knowledge. I didn't bother with any other book, any concern we had in the early days we could find addressed in your book. I have now gifted your book to lots of friends expecting!

Logical, science-based insights – S. Hoskin

A terrific book and well worth the read for a first-time mum-to-be such as myself. I particularly like Howard's information on 'colic' and how to settle a 'colicky' baby.

Best baby book – Gregor Salmon

We read a few different books – but *Baby on Board* was our favourite. The information we read here was not found in any other baby book. Dr Chilton is a wonderful compassionate and passionate paediatrician, which shines through in his book. If you are looking for easy-to-read, interesting science-based knowledge and you want to learn how to care for your baby in a gentle and instinctive manner, then this book is for you. I have already recommended it to my friends.

It should be the only book you buy! – Nic

The first thing I did once I read *Baby on Board* was order 5 more copies to share around. This book was the only thing that kept me sane during those first few months with a newborn. It's easy to read (even at 3am), and is full of practical advice based on medical facts not old wives' tales. It helped me

relax into motherhood and I know I wouldn't have enjoyed my new little boy anywhere near as much had I not read this book.

Wonderful parenting book! – Prue

This is a wonderful book! You won't need any other parenting book. It has all the information you need to raise happy babies. We used it with both our sons and have never looked back! When everyone was too keen to tell me what my babies 'should' be doing I was so grateful to have this book and all the wonderful science-based information it contains. If you want to relax and enjoy your baby this is the book you need. My husband found the book very useful too!

Fantastic book! – Kirsty

We got the hard copy of this before our son was born 2 years ago. Really easy to read (even with baby brain and actually got my husband to read it cover to cover). Our son has been a really calm little soul and we put it partly down to his personality, but also partly to do with the excellent advice from this book. It just made so much sense to us. This is the book we recommend to our pregnant friends. I'm pregnant again, so will definitely be re-reading it.

This is the only parenting book you will ever need! – Pruemac

It has all the information you could ever want on how to raise & care for your baby. It has continually given us the much-needed confidence & reassurance you often look for as exhausted parents. When all your family & friends tell you what your baby 'should' be doing ... this is what you want in your hand-bag or briefcase!

This is the best book for first time parents – Newbie Mummy

It covers all health aspects of a newborn which has given us great confidence and comfort knowing what to expect as normal for our bub. Dr Chilton is also our pediatrician whose valuable opinions and insights are covered in detail in the book. *Baby on Board* is written with logical medical explanations, putting old wives' tales to bed! There's an excellent chapter on colic which has been such a controversial discussion and often misunderstood. Most importantly, it is based on science and his writing style makes it an easy read. The comprehensive coverage of topics means this is the only book we need. A must read for all parents!

What a wonderful book – JT

There is so much in the way of old wives' tales out there, it's great to have a ready reference which is not only based in science, but also makes great common sense. It's been our little bible for babies, an invaluable reference for new parents or second time ones like me. I wish it was available first time round! I have gifted it to several friends and relatives - also a good book for grandmas to keep them on the right track, and off your back!!

Veronica Grigg, mother of one

As a late starter to the world of motherhood I found *Baby on Board* not only informative but humorous ... getting to know my new son I am able to make use of the practical tips and techniques. What I have enjoyed is the approach to issues – Dr Chilton provides both the 'what' (what to do), 'how' (how to handle it) and the 'why' (why it is happening) – something that I find helps me to cope and takes the mystique out of motherhood.

Judith, mother of three

If more parents read Dr Chilton's book before their babies were born, or soon after, there would be a lot more happy babies around.

Debbie Ginges, mother of one

Being unfamiliar with how to nurture a newborn, *Baby on Board* has been so reassuring, with concise information that's easy to read. It's been a super-helpful reference for our journey into parenthood ... What makes it different to other books? Explanations are supported by research rather than opinion. An evolutionary perspective is revealed, so the reasons all make sense! We now understand why, instead of just getting solutions to symptoms. We therefore trust the advice, which in turn gives us confidence as parents.

Anne Carter, NSW and National Midwife of the Year, 2007.

'I recommend this informative, easy to understand, extremely useful common sense book. It is a must have for all new parents'

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Introduction to the Special 4th Edition

In the first few weeks, new parents have two big problems: lack of sleep, and helpful advice.

The first one goes with the territory (though I hope the new ‘Sleep’ chapter in this book helps); it’s the second one that’s tough. Something about babies brings out the advisor in everyone.

In the past it was old wives tales, now it is the Internet and social media, which can send one down a rabbit hole into a wonderland of misinformation.

After more than 40 years of looking after babies and their parents, first as Director of Newborn Care, including the NICU, at a big maternity hospital in Sydney for over 20 of them, and since then as a neonatologist in consultancy practice, I’m pretty good at giving advice myself.

However it is clear that a better way is by giving parents an overview of how babies are designed by explaining the origins and basic biology of their babies. Having an understanding of the little newcomer’s functioning can help new parents work out for themselves the best way to manage their baby’s care.

So many parents have said, in book reviews and directly, how much they enjoyed and came to rely on this book. Apparently even fathers read it cover to cover, say their partners in surprise. They apparently enjoy the tone and humour and the way it explains in a jargon-free way the joy of parenting, based upon evidence-based facts and science.

The first edition of *Baby on Board* was published in 2003. Since then, two more editions and tens of thousands of copies have been sold.

Over the years my knowledge and beliefs have evolved greatly in the light of new published information and clinical experiences. It has been honed by my daily contact with many parents and babies who have



enhanced my understanding, and their joy has lifted my heart on so many occasions.

This edition of *Baby on Board* is special for a few reasons.

Delightfully, my daughter Georgina Dowden joins me. She is qualified in nursing, midwifery, sexual health, and is an International Board Certified Lactation Consultant. She has a busy practice and writes a popular parenting blog, which touches hearts and minds equally (and which gets way more attention than mine ever did!). She is deeply empathic to parents' needs and personally exhibits all of the attributes required by a sensitive and responsive parent. I am proud and honoured to work and interact with her on a daily basis.

In addition to revamping and rewriting the breastfeeding chapter into 21st-century practice distilled through her experience both professional and personal, she has also removed what she calls my 'old white guy stuff'. For instance, I now understand that babies are 'birthed' (not 'delivered' like pizzas). She has also added many illuminating remarks throughout the text.

I have updated and edited most chapters, and have also added new chapters on skincare, solids and spoon foods, sleep, and the pleasure of playing with your baby.

I am grateful to Francois McHardy of Booktopia Publishing for offering to present this expanded and rewritten edition to the world. The staff at Booktopia has completely redesigned the whole book, the presentation, and layout.

My baby is reborn for the 2020's.

Howard Chilton

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What do I do when my baby cries?

How to settle the baby

As with most other important baby management issues, the amount of conflicting, useless advice out there is in direct proportion to the importance of the problem. So this issue has more books and opinion pieces written about it than all the rest put together.

For most baby problems the best approach is to use parenting's two most useful tools:

1. common sense, and
2. trial and error.

However this is a special case: you need a bit of basic knowledge to deal with it sensibly. It's hard to think clearly with a crying baby around, because that cry is specifically programmed into your brain to wake you up and make you run around and fix the noise. It is very easy to fall into an emotional heap and get into a vicious cycle that makes the problem worse, instead of better.



First, don't respond immediately to every grunt, whinge or yelp from your baby. When babies sleep, the depth of their sleep rises and falls regularly. Most babies will drift up into a very light level about every hour. At that time they might thrash about or whinge to themselves before drifting down into a deeper sleep again. They might even wake briefly and scan the room before dropping off. When this happens, don't interfere. If you respond to every whimper and movement they make, you might over-arouse and fully waken them. The *distressed* baby is different. She is definitely unhappy and you can hear and feel the difference. This baby needs your help.

The basics of baby design

There's a lot more on this in the 'Evolution' chapter, but a quick summary here is very relevant.

When humans take their baby home they actually don't take a full-term newborn. In comparison with most other mammals, human babies are all premature, with brains that are only 25 per cent formed.

Other mammals, such as horses, deliver their young truly at full term. These newborns have over 80 per cent of their brains formed when they are born. That's why they can gallop around the paddock at the end of their first day.

Human babies have to wait about a year before they gallop around their paddock because of this immaturity. Why are we so different? It's because of these two characteristics:

1. We walk upright on two legs. This means the whole weight of our body falls on our hip joints. These joints are strengthened by bony buttresses on the pelvic bone and those buttresses narrow our birth canal. Our pelvis is also rotated and the outlet is distorted because of changes that help us walk smoothly – we glide, not waddle. And to make matters worse ...
2. Humans have big brains. Great for designing computers but difficult for their big-headed babies to fit through this narrow athletic pelvis.

The solution to this evolutionary dilemma was to have our babies earlier in pregnancy, while they were still small enough to be birthed safely.

However, that's just the first point. It is hardly logical to treat such an immature baby as if he's an independent person and, for instance, insist that he stays in a cot in his own room. Neither is it logical to feed him to an imposed schedule and let him go hungry until the clock says it's time. Nor is it appropriate to 'control cry' him – that is, walk away when he's distressed in the hope that he will 'learn' that crying doesn't work. No loving parent, using their instincts, would do those things anyway ... except when an outside 'expert' tells them that it is the correct thing to do.

First: feed the baby

We, like other primate apes, are a 'continuous contact' species. We are not a 'nesting' species of animal who can feed their young between long periods of absence. The quality and components of our milk say this same thing. High-protein milks are fed with long intervals between feeds.

Human milk, like that of other apes, is very low in protein, and hence looks like 'continuous feeding' milk.

Now I hasten to add, I'm not recommending continuous feeding. I am merely saying that you need to ask the *baby* about the feed interval, not the clock. Remember also that ultrasound studies show that when a baby's stomach is full of breast milk, it empties in about 35 minutes, and the breast fills up in about the same period of time.

Hence 'overfeeding' is a bit of a myth. If your baby is unsettled, try feeding him. If he's not hungry, he might not feed, or might feed then puke, but he won't come to any harm. You just don't know until you try.

And if someone suggests that you shouldn't let your baby just 'suck for comfort' ignore that advice. That's what breasts are for. They are there to give your baby comfort, connection, security, and love, and also supply food.

If you have enormous reservoirs of milk and your baby is unsettled and feeds a lot, it really doesn't matter! So you end up with a fat, roly-poly baby by 4 months. Don't worry! By the time they're 6 months you'll

... 'overfeeding' is a bit of a myth. If your baby is unsettled, try feeding him.



find it hard keeping them *on* the breast. At this age babies become so busy looking around at the world that they find it hard to keep their mind on the job at hand. Their weight will gradually come back to a more appropriate level – by 8 months they will be trim and terrific.

In fact, the longer a baby breastfeeds, the lower the incidence of childhood obesity. One of the possible causes of this phenomenon has been discovered recently. A hormone called adiponectin has been found in high concentrations in breast milk: it inhibits the tendency towards the formation of excess fat stores as you get older.

So babies don't just want to feed when they're hungry. The act of sucking itself is deeply comforting to a baby; it's been called a 'stress regulator'. It releases calming hormones into their circulation, bathing their brain with opiates. So if they're upset put them on the breast and allow them to feed to sleep.

Second: check the other things

Make sure your baby isn't uncomfortable in their environment.

- Check the nappy and change it, if it is wet or dirty. Having said that, babies are usually happy to lie around in a wet nappy as long as it is warm, so no need to wake a baby to change them. Poos, especially breastfeeding ones, are usually quite liquid and acidic in nature (lactic acid from the lactose sugar in the milk) and can burn a bottom if left in contact for too long. It depends on your baby's skin whether it can cope. If not, use a thick barrier cream to protect the skin.
- Make sure the baby's not over-wrapped and hot. When in doubt, babies should be under-wrapped rather than over-wrapped. A room temperature of about 20°C is about right for a baby.
- The idea that babies can be 'bored' is manifestly not true. In comparison to the womb, life got seriously more interesting at birth. If you think it's happening, check the 'calm the baby' section next!

Now we can cut to the chase. The single biggest worry for new parents is how to reliably and calmly settle the upset baby. You now have all the clues.

But a couple of important points first:

- All babies cry. That's how they communicate. It's designed to arouse you and make you rush around and fix things. How much crying you can stand can depend as much on your self-confidence as how long and loud the noise is. Have realistic expectations about your baby. There are not that many quiet babies around.
- Right here and now, we have to refute a common and powerfully held belief. That is if you do things wrong here, you will 'spoil' your baby and 'start bad habits'.

'Spoiling' babies

You will hear things like:

- If you don't teach them to settle themselves now, you'll never be able to put them down.
- Babies have to learn to sleep by themselves, or you'll never get them out of your bed.
- The baby has to learn who the boss is.

These remarks bear no relationship to what we know about how babies function. Now we know more about their biology, we can at last make sensible suggestions to parents based on the science, not the myth. Fun- nily enough, most parents instinctively accept and agree with these newer views, because they feel right.

For a start, we know that you can't actually 'spoil' babies, that is, get them to learn bad habits, for least 6 months. They just don't have the brain linkages to learn such behaviour. It is not until the second half of their first year that a baby can say, "If I cry now, I reckon my mother will come in. Let's have some fun and see how long she takes!"

So, up to that age (and beyond), going to distressed babies, picking them up, cuddling and calming them, is normal and appropriate. You can't overdo it.

So how did the 'spoiling' belief arise? Most of us have heard people talk, or have personal experience, of babies who have been picked up so much that they can't be put down at all, and the parents end up toting



them around day and night. These babies are not unusual, but read on, and I will tell you the reason, and why the situation is so misunderstood.

GEORGY'S WISDOM

"You should take my advice on this!"

Women instinctively know how to mother their babies. They want to respond to their cries. They want to hold, cuddle and soothe them.

When they force their babies into fixed routines that disrupt the mother-infant bond and go against what their gut is telling them, they often do it because 'so-and-so' told them to and warned them of the dire consequences if they didn't follow through.

This is crazy.

What our society should want is for new mothers to enjoy their babies and become confident in their ability to parent them.

We don't achieve this by belittling women, or by giving them advice and information that goes against their intuition.

Third: calm the baby so that they will settle

I mentioned earlier that the human baby is born 'prematurely'. They know this and most are not at all happy about being born so soon! The fact is that, depending on their temperament, most babies prefer the quiet and blissful life within the womb and find the transition to life outside something of a challenge.

So when they are upset, if they are not hungry (and always try to feed them), you can assume that they are missing the womb.

If we can place them back into a womb-like environment, they will tend to settle. Most parents find this out anyway, usually within 24 hours of the baby's birth. 'He falls asleep on my chest, but screams when I put him in the cot'. He clearly prefers the feel of mother's skin and the sound of her heartbeat to the silent, alien feel of a plastic cot.

The womb-like environment

So what's it like in the womb? Let's see what they're missing so much, so we can replicate it and settle them down.

Not much room

It's small and snug within the womb. The baby is folded up and securely contained within the enveloping warmth. That is why 'swaddling band' has been used for thousands of years to calm babies down and help them to sleep. Think of the old-fashioned nursery behind glass, all the babies little tight bundles, looking at the ceiling, so quiet not *entirely* sure they've been born.

So wrap them snug in a warm blanket, with their back rounded and limbs contained. Make them feel secure again.

Slings and pouches are very womb-like.

The rocking movement of your walking also is reminiscent. Parents who try slings swear by them, but be careful of your back as they get bigger!

Warm baths are, of course, the archetypal womb-like environment. Make the bath deep so the baby's feet and hands don't touch the sides or base. Putting babies prone with their chin nestling in your hand, holding their head out of the water, gives them a wonderful feeling of floating which can soothe them. A gentle back massage with (polyunsaturated) oil is also a good way to bliss out your unsettled baby.

'But my baby prefers her arms out'

Many parents will say that when they wrap their baby, she 'prefers to get her arms out', but, in general, this is not a good idea.

Up to the age of 3 months babies have a vigorous reflex called the 'startle' or Moro reflex. When they move their head backwards they instinctively feel they are falling and will fling their arms out to try and grasp your furry coat before they fall out of the tree (this is, after all, a so called 'primitive' reflex!). The feeling of falling is very upsetting for babies and often the flinging movement of the arms moves their head again, which creates another reflex, and a vicious cycle may start with the baby getting more and more upset. Whether they like it or not, contain



their limbs. Do, however, allow the thumb or finger-suckers among them to get at their hands, by swaddling the elbows only. And while we're on the subject, once breastfeeding is established, if a baby needs a dummy (pacifier) to calm them, give them one. In short, anything for a quiet life.

Rhythmic noise

Some studies have shown that the noise level within the womb is equivalent to an underground train entering a station, at about 85 dB! That's noisy, and the predominant sound is the heartbeat. This comes from the heart beating just above the baby's bottom, and the aorta, the main artery of the body, beating by their ear. Then there is also the sound of the bowel and the bladder filling and emptying, and the 'whooshing' rhythm of the blood flow within the vessels of the uterus.

When we hold a baby we instinctively hold them on our left side over our heart, because they settle better that side. Most of the artworks of mother and baby show the baby on the left. The woman modelling for the artist knew that she could sit for an hour or so with her sleeping baby over her heartbeat.

I recently saw a mother in a lift with a crying baby in a pram. She was moving the pram back and forth and making the sound 'shush – shush'. This is the exact same sound as the blood flow through the uterine bed. Perhaps that is where the word comes from?

Your voice is a very familiar sound right from the start. So talking and singing to your baby is very comforting for them. Your singing doesn't have to be good, just you!

Tasty, and smelling of you

The foetus spends most of his time in the womb drinking and swallowing. They're gulping the amniotic fluid that surrounds them and this fluid tastes and smells of your diet (and foetal urine!).

Because of this, by the time they are born they are completely familiar with your smell and your dietary choices. They have learned to enjoy the food that you enjoy. When you put them on the breast, your milk will also taste of your diet and remind them of the bliss of the womb. So enjoy all the foods you had when you were pregnant. The act of sucking itself also releases comforting, calming hormones into their circulation. Some

babies suck so much in the womb that they can be born with sucking blisters on their hands. So sucking and drinking reminds them of life in the womb and they find it calming and satisfying.

So if they're upset, even if you are not sure that they are hungry, let them suck and feed. Breasts are best but fingers, thumbs or dummies will do.

And lastly ... life in the womb is really boring

This is one aspect of life in the womb that is not so obvious. It is because of this that the belief started that babies can get 'spoiled' and if you handle them too much they will 'get used to it'.

In the womb it's really visually monotonous. On a particularly interesting day, they will see the umbilical cord float into view ... then float out again. And it's back to the boring view of the inside wall of the uterus.

I heard of one child who thought his little brother must have had a great time in the womb as he heard his mother say that he had a Playcenter in there! But he misheard. There's really nothing much to see.

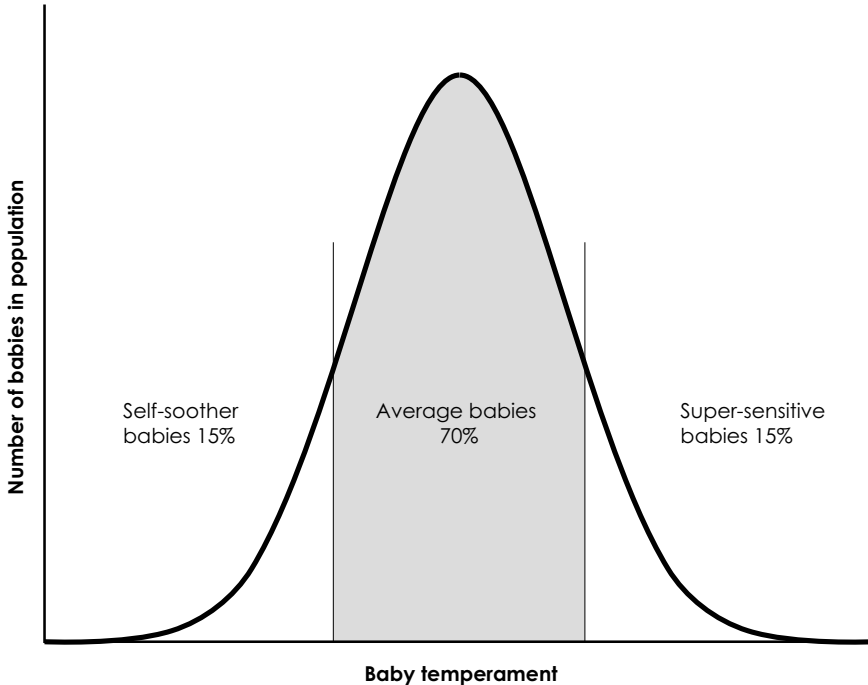
So imagine the difference to a baby after he's born. From monotonous meditative state, suddenly there's lights, magic, movement, not to mention sisters, cousins, aunts and grandparents in his face, staring at him and calling loudly, 'He's just like his father!'

It's overwhelming for many new babies. However, some cope with it and some don't. Whether they do or not, depends on their temperament.



Your baby's temperament

Like everything else biological, the range of baby temperament can be fitted into the so-called bell-shaped or normal distribution curve.



That means that 15 per cent of babies at one end are calm and laid back. We call them 'self-soothers'. The parents brag about these babies. 'My baby slept through the night since we took him home. Doesn't yours?' (We'll talk about the brutal competitiveness of mother's groups later!)

At the other end is a difficult group of babies, also about 15 per cent, we call 'super-sensitive' babies. Their mood is very brittle and they are very sensitive to change in their surroundings. Their parents think they're 'easily bored' because they stare around them all the time and seem to need constant change to keep them occupied. If they meet one other person other than their parents, they scream the roof down. They also react badly to even minimal discomfort. If they are awake and perceive that mother isn't in their immediate vicinity they become unsettled.

They are hard work to look after, overload easily and need constant cuddling, calming and reassurance.

The middle 70 per cent are the rest of the population of babies: relatively easy to settle but can be overloaded by too much happening in their life. They feed and sleep and are only significantly unsettled 2 days out of 7.

How to settle all these babies? Well the self-soothers are easy. Feed them and they sleep, play with them too much and they ‘switch off’ from the play, then sleep. Nice if you have one.

The rest of the population, however, especially the sensitive ones, require more help. Returning them to the womb as described above, will calm them down.

How to return a baby to the womb

- Take your baby into a separate room that has a daybed.
- Dim the light in the room – no TV or other screens.
- Have quiet music, not silence – babies like background, family noise.
- Feed the baby if they’re hungry; if they’re not, try it anyway.
- If they’re very distressed, lie down with them on your chest.
- Hold them snug on your chest with their ear over your heartbeat.
- Don’t leave them to cry (unless you’re going crazy yourself, in which case, of course, get someone else to take over (if you can) and take a break.
- When they are settled, keep them on your chest.
- Relax and enjoy the rest.
- Alternatively keep them on you in a baby-carrier.
- If you need to put them in a cot, wrap them snug and tight in a blanket or wrap.
- Pat them on the bottom or back at 60–80 times a minute (maternal heart rate) ... and see if you can
- Bore them to sleep.
- If they continue to cry (as many will), park them back on your chest. For a really unsettled baby this process may take hours.



Build on your successes. Remember that your baby finds your body the most reassuring place in the world; so lying on your chest will always be their major preference.

Once your little one is settled and the longer they sleep, the less opportunity there is for them to be over-aroused, and the less they are over-aroused, the more they will sleep, and so a good cycle starts.

Don't take the baby back into the living room until they are well settled. Then keep it low key. Also:

- Avoid long periods of *intense* eye contact during this process.
- If you return your baby to their busy life too soon, start again.
- If they get unsettled again, start again.
- Try to stay calm yourself and get someone to help you (grandmothers are great – and often grateful!).
- Keep the lights dim and the environment calm and boring.

The trick is to make the environment visually uninteresting and hence more womb-like.

If the baby remains unsettled despite being in this environment, first have patience, keep calm and stay with the program. Even if there is very little stimulation, it is likely that it's still too much. Eliminate playtime. Keep trying. It may take up to 4 days to calm a stressed-out baby, so hang in there. Remember, short-term loving, enfolding 'sensory minimisation' is womb-like and therefore does them good – it can do no harm.

Spoiling revisited

You can now see what the 'spoilt' babies are all about. They have not got themselves into 'bad habits' by constantly being picked up. They have not learned to manipulate their parents. They have been overstimulated and wound up by constant activity and can't settle themselves. They need quiet downtime with a calming pair of arms and a loving body to hold and reassure them. They need to induce brain opiate hormones so they can unwind and sleep, and (as the psychologists say) 'return to base'.

Sometimes people find that they can temporarily quieten their baby by activity, such as driving the baby around in the car, walking in the park or putting them in front of the TV. The problem with that is the

baby stays at a high level of arousal and this activity merely holds their attention temporarily. As soon as the car stops, they scream. These techniques only delay the need to calm the baby down.

Even with low-key input, some super-sensitive babies can be difficult to calm. They need to spend a lot of quiet time in a dimly lit room and will only settle after some hours. Sometimes these babies can hardly leave the quiet room or their mother's body without getting wound up. So let them stay in a low-stimulation environment for their first months, until they develop the ability to calm themselves.

Good news after 3 months

The good news is that most babies get there by 3 months. They do this by wiring up that part of their brain that teaches them to 'switch off', to disregard visual stimulation that is too intense, and so keep themselves calm. After that, they can better regulate the amount of stimulation they receive and take control. Lots of parents are stunned when suddenly, at about 3 months, their upset, brittle baby starts to be happier and to sleep.

For more on this, see chapter 13 'Colic and the unsettled baby'. This describes the similar situation that occurs in most babies at around 6 weeks. At that age, they develop the ability to take more notice of things around them, and to smile at people. As they start to take in their surroundings, and the people around them start staring and smiling back at them, their level of stimulation rises rapidly, to intolerable levels. They can then become upset and stressed. They become tense and draw up their knees and scream. Then they are accused of having tummy ache, wind or colic. Like the sensitive newborn baby, they too need calming down.

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For more information on Dr Howard Chilton visit www.babydoc.com.au

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It's the only book you'll need in your baby's first year. Packed with practical advice, *Baby on Board* is a must-read for all mums and dads.

Babies have basic biological needs, which parents must meet. *Baby on Board* outlines these needs clearly and explains the biological science underpinning them.

This wonderful book gives parents the confidence they need to derive for themselves how to parent their baby successfully. It helps them navigate the endless advice directed their way by well-meaning family, friends, and passers-by. One issue that causes parents the most anguish — how to settle their distressed and crying baby — is explored in detail.

Written in an accessible and frequently humorous way, Dr Chilton explains the fundamentals of parenting based on science and his forty years experience as a neonatologist. He also explores the fascinating subject of how babies evolved over the millennia, what they perceive and how they are programmed for survival.

This expanded edition has new chapters on the introduction of solids, how to play with your baby, and the essential drivers of baby sleep and how to enhance them. Many other chapters have been revised and updated.

Dr Chilton's daughter, Georgina Dowden, with whom he collaborates professionally, has extensively rewritten the breastfeeding chapter. She has also contributed many useful additions, with her influence evident throughout the book.

'I give this book to all my pregnant patients as it is the perfect "instruction manual" for new parents. Dr Chilton's approach is sensible and practical without being baffling or too technical.'

ROB BUIST, OBSTETRICIAN, PRINCE OF WALES PRIVATE HOSPITAL



Dr Howard Chilton is one of Australia's leading baby doctors, with over 40 years experience as a neonatologist. He was Director of Newborn Care at Sydney's Royal Hospital for Women for over 20 years, following training in Oxford, London and the USA.

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