

Probiotic may help treat colic in infants

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Probiotics—or "good bacteria"—have been used to treat infant colic with varying success. In a new trial published in the journal *Alimentary Pharmacology & Therapeutics*, investigators have shown that drops containing a particular probiotic strain (*Bifidobacterium animalis* subsp. lactis BB-12) reduced the duration of daily crying by more than 50% in



80% of the 40 infants who received the probiotic once daily for 28 days, with beneficial effects on sleep duration and on stool frequency and consistency. This compared with only 32.5% of the 40 infants who received placebo.

Infant colic is a very common gastrointestinal disorder affecting up to 25% of infants in the first 3 months of life, and although it is a benign condition, it is source of major distress for the infants and their families. It is associated with maternal postpartum depression, early breastfeeding cessation, parental guilt and frustration, shaken baby syndrome, multiple physician visits, drugs use, formula changing, and long-term adverse outcomes such as allergies and behavior and sleep problems.

The effect seen in the study was associated with a positive modulation of the gut microbiome, with increased bacterial production of butyrate, a short chain fatty acid that is able to positively regulate intestinal transit time, pain perception, the gut-brain axis, and inflammation.

"Our study provides evidence on the important role of gut microbiota as a target of intervention against <u>infant colic</u>," said senior author Roberto Berni Canani, MD, Ph.D. of the University of Naples "Federico II," in Italy. "It is relevant to underline that this trial studied a specific well-characterized probiotic strain, and that these findings cannot be extrapolated for other probiotic strains."

More information: Rita Nocerino et al, The therapeutic efficacy of Bifidobacterium animalis subsp. lactis BB-12® in infant colic: A randomised, double blind, placebo-controlled trial, *Alimentary Pharmacology & Therapeutics* (2019). DOI: 10.1111/apt.15561



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