## **Elliot Hospital: Ask the Pediatric Surgeon**

Dr. Soukup, My 5 week old son spits up a lot and it is becoming more forceful when eating. He seems hungry. Should I be worried? Rachel



## Dear Rachel,

Many babies spit up during or between feeds. This is very common and we refer to it as reflux. As long as a baby is eating well and growing, then pediatricians usually provide reassurance and most babies will outgrow this within the first year. We start to worry about reflux when babies are not growing the way that they should. Pediatricians will sometimes recommend formula changes or dietary changes for nursing moms or sometimes prescribe medications for reflux. If, however, "spit-ups" are progressing to more forceful or large amounts of vomiting, then further tests are warranted. It is very important to make sure that the color of the vomit is not green. This can suggest a much more serious cause for feeding problems and should be evaluated immediately in a pediatric emergency department.

One of the more common causes of projectile vomiting in babies is a condition called pyloric stenosis. The pylorus is a circular muscle that must relax in order to let the stomach empty, and this muscle can sometimes get enlarged causing a blockage. This condition occurs in 1 in 300 births and we don't exactly know

why it happens, although genetics likely plays a role. Pyloric stenosis can easily be diagnosed with a simple ultrasound. Often these babies have lost weight due to the vomiting, and show signs of dehydration with fewer wet diapers, but continue to act hungry even after vomiting. Once a baby is diagnosed with pyloric stenosis, they need to be admitted to the hospital for IV fluids and to correct electrolytes. Ultimately, pyloric stenosis does need to be repaired with surgery, but this can be done using a tiny camera in the baby's belly (laparoscopy) and usually takes about 20-30 minutes. Parents are understandably terrified for their new baby to have to be put to sleep during surgery. To avoid this, our pediatric anesthesiologists can provide a spinal anesthesia, which allows them to be awake, happily sucking on a pacifier during their procedure! Babies can start to eat right away and are usually home within the first 24 hours from surgery. A dose or two of Tylenol is all that is needed afterwards. I take care of a lot of babies with this problem, and families are amazed at how quickly this can be fixed. Thanks for your question!

-Dr. Soukup



## Elizabeth S. Soukup, M.D., M.M.Sc. Pediatric Surgeon

Dr. Soukup is a Pediatric Surgeon at the Elliot Hospital and has an interest in educating families about pediatric health and wellness. Her mission is to provide expert specialty care for children of all ages in New Hampshire - newborns through teenagers - striving to keep them close to their families and communities. If you would like more information, call 603-663-8393 for an appointment, or visit our website at http://elliothospital.org/website/pediatric-surgery.php

Dr. Soukup earned her Bachelor of Science from the Massachusetts Institute of Technology and her Doctor of Medicine from the University of Chicago Pritzker School of Medicine, where she received the Outstanding Achievement Award in Medicine, graduating first in her class. She completed her General Surgery training at the Massachusetts General Hospital and her fellowship in Pediatric Surgery at Children's Hospital Boston. During her time in Boston, she also completed a Masters of Medical Sciences degree in clinical investigation from Harvard Medical School. She is board-certified in both Pediatric Surgery and General Surgery.

She has specialized training and experience in minimally invasive surgical treatment for babies, children and teenagers. Her practice includes all areas of general pediatric surgery, including common pediatric surgical problems as well as neonatal surgery, congenital anomalies, minimally invasive surgery, and complex thoracic surgical problems.

## Elliot Health System