



Aerophagia

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What is aerophagia?

Aerophagia means swallowing air. This is a normal process that happens to all of us, especially children. We swallow air when we eat, chew gum, drink carbonated beverages, or talk excessively while eating. The younger we are, the more we do it. Newborn babies swallow air when feeding, which is why it is important to burp them after eating.

Aerophagia is usually a benign (harmless) condition that most children outgrow without any treatment. It is not considered a medical problem unless it causes bothersome symptoms or affects a child's quality of life.

The majority of children with aerophagia are not bothered by it, but it can be a common concern for parents as they see their child's belly get bigger and bigger throughout the day.

Why does this happen?

Each time a child swallows air, gas gradually enters and builds up in the digestive tract. Air is made up of over 70% nitrogen. Nitrogen is a gas that is not easily absorbed by our intestinal wall. As a result, swallowed air finds a way to come back out of our body. This will happen in the form of either burping and/or flatulence (passing gas).

Classically, toddlers will wake up with a very flat or normal stomach, and it grows as the day goes by (as they swallow air), and is not associated with any

other symptoms. This is commonly referred to as the “baby belly” and typically goes away by age 4 or 5 with no intervention.

Some children can continue to swallow air beyond this age, which can be associated with anxiety, feeding difficulties, or neurodevelopmental delays. Aerophagia is not dangerous. Aside from abdominal distention, belching and flatulence, it rarely causes any other problems. Because aerophagia is usually harmless, it is important to avoid unnecessary testing. Additional evaluation is generally only needed if a child has any red flag or alarm symptoms or other findings that suggest another medical condition may be causing the symptoms.

“Alarm signs” or “Alarm Symptoms”

There is a collection of symptoms that healthcare providers use to make sure something else is not causing symptoms. They are often called “Alarm signs” or “Alarm Symptoms”. These features include:

- Unexplained weight loss
- Low blood counts (anemia) – This is determined by blood work or lab tests ordered by a healthcare provider.
- Poor growth
- Persistent vomiting
- A family history of upper gastrointestinal cancer

These alarm signs are usually not explained by aerophagia or gastroparesis and can represent other medical problems. When these signs or symptoms occur, they should be brought to the attention of a healthcare provider to perform additional tests.

How is aerophagia treated?

As mentioned earlier, most children with aerophagia are not bothered by symptoms and therefore do not typically need any medical intervention. Treatment in older children typically focuses on reducing air swallowing which can include speech therapy, cognitive behavioral therapy, and anxiety management.

Reassurance is often the most important treatment. Knowing that aerophagia is common, harmless, and usually improves with age can help reduce worry for both children and their families.

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