

[IMAGE]

Antibiotics: Not for Baby

By Editorial Staff

Unless absolutely necessary; but far too often, antibiotics are the first treatment option for infants in their first year of life – even for conditions that aren't bacterial in nature (and thus can't be helped by antibiotics). The consequence: an increased risk of *permanent* allergies and asthma, suggests a powerful new study that add to the growing body of research on the connection.

Researchers found that early exposure to antibiotics not only led to subsequent allergen and airway responses; but also that the cause may be a disrupted microbiome. (Antibiotics "kill" bacteria indiscriminately: both the bad bacteria if a bacterial infection is present, as well as the billions of "good" bacteria that make up our gut microbiome.)

[baby - Copyright â Stock Photo / Register Mark](#) While this study involved infant mice as subjects, plenty of human research supports the same association: Early-life antibiotic use contributes to asthma and allergy risk. In fact, we've reported on some of this research in previous issues of *To Your Health*, along with research on why antibiotic use, particularly in children, should be a last resort, not the all-too-common first option:

- "Early Antibiotic Use Linked to Asthma" [Read Here](#)
- "Your Baby's Medication May Lead to Childhood Allergies" [Read Here](#)
- "Listen Up: Children Rarely Need Antibiotics for Earaches" [Read Here](#)
- "Infants and Antibiotics: Why It's a Bad Combination" [Read Here](#)
- "Antibiotics: Bad News for Baby" [Read Here](#)
- "Antibiotic Use and Childhood Obesity: A Clear Connection" [Read Here](#)

All the above should lead every parent to ask questions whenever they're prescribed an antibiotic, whether for themselves or their child. Is it the best option? Will it work? What are the potential risks? What nondrug options are available? It's well-worth the effort.

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