Introducing Solids

Giving your baby his or her first taste of solid food is a major milestone. Here's what you need to know before your baby takes that first bite. Breast milk or formula is the only food your newborn needs. The American Academy of Pediatrics recommends exclusive breast-feeding for the first six months after birth.

But by <u>age 4 months to 6 months</u>, most babies are ready to begin eating solid foods as a complement to breast-feeding or formula-feeding.

Signs your baby is ready to start solids

- Can your baby hold his or her head in a steady, upright position?
- Can your baby sit with support?
- Is your baby mouthing his or her hands or toys?
- Is your baby showing a desire for food by leaning forward and opening his or her mouth?
- If you answer yes to these questions and your baby's health care provider agrees, you can begin supplementing your baby's liquid diet.

DO...

Start simple. Offer single-ingredient foods that contain no sugar or salt. After introducing single-ingredient foods, you can offer them in combination

Wait 1-3 days between each new food to see if your baby has a reaction, such as diarrhea, a rash or vomiting.

Provide important nutrients. Iron and zinc are important nutrients in the second half of your baby's first year. These nutrients are found in pureed meats and single-grain, iron-fortified cereal

Provide baby cereal. Mix 1 tablespoon of a single-grain, iron-fortified baby cereal with 4 tablespoons (2 oz) of breast milk or formula. Don't serve it from a bottle. Instead, help your baby sit upright and offer the cereal with a small spoon once or twice a day after a bottle- or breast-feeding. Start by serving one or two teaspoons. Once your baby gets the hang of swallowing runny cereal, mix it with less liquid and gradually increase the serving sizes. Offer a variety of single-grain cereals such as rice, oatmeal or barley. Avoid feeding your baby only rice cereal due to possible exposure to arsenic.

DO NOT...

Start solids under 4 months of age. Your baby might not be developmentally ready and a baby younger than age 4 months shouldn't be given home-prepared spinach, beets, carrots, green beans or squash. These foods might contain enough nitrates to cause the blood disorder methemoglobinemia.

Give juice to your baby until after age 1. Juice isn't a necessary part of a baby's diet, and it's not as valuable as whole fruit. Too much juice might contribute to weight problems and diarrhea. Sipping juice throughout the day can lead to tooth decay. If you offer juice to your baby after age 1, make sure it's 100% fruit juice and limit it to 4 ounces a day.

Offer cow's milk or honey before age 1. Cow's milk doesn't meet an infant's nutritional needs — it isn't a good source of iron — and can increase the risk of iron deficiency. Honey might contain spores that can cause a serious illness known as infant botulism.

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DO...

Add vegetables and fruits. Gradually introduce single-ingredient pureed vegetables and fruits that contain no sugar or salt.

Offer finely chopped finger foods. By ages 7 months to 10 months, most babies can handle small portions of finely chopped finger foods, such as soft fruits, vegetables, pasta, cheese, well-cooked meat, baby crackers and dry cereal.

Give your baby potentially allergenic foods

when you introduce other complementary foods. Potentially allergenic foods include: Peanuts/Tree Nuts, Egg, Cow's milk products, wheat, shellfish, fish, soy, sesame. Other foods are possible but rare. There is no evidence that delaying the introduction of these foods can help prevent food allergies. In fact, early introduction of foods containing peanuts might decrease the risk that your baby will develop a food allergy to peanuts. Still, especially if any close relatives have a food allergy, give your child his or her first taste of a highly allergenic food at home — rather than at a restaurant — with an oral antihistamine available. If there's no reaction, the food can be introduced in gradually increasing amounts.

DO NOT...

Offer foods that can cause your baby to choke.

Don't offer hot dogs, chunks of meat or cheese, grapes, raw vegetables, or fruit chunks, unless they're cut up into small pieces. Also, don't offer hard foods, such as seeds, nuts, popcorn and hard candy that can't be changed to make them safe options. Other high-risk foods include peanut butter and marshmallows. To introduce nuts and prevent choking, spread peanut butter in a thin layer or puree peanut butter or peanuts with fruits or vegetables that have already been introduced without complications.

Give up.

Babies often reject their first servings of pureed foods because the taste and texture are new. If your baby refuses the feeding, don't force it. Try again later. If the problem continues, talk to your baby's health care provider to make sure the resistance isn't a sign of a problem.

Make mealtime enjoyable:

Stay seated. As soon as your baby can sit easily without support, use a highchair with a broad, stable base. Buckle the safety straps.

Encourage exploration. Your baby is likely to play with his or her food. Make sure that finger foods are soft, easy to swallow and broken down into small pieces.

Introduce utensils. Offer your baby a spoon to hold while you feed him or her with another spoon. As your baby's dexterity improves, encourage your baby to use a spoon.

Offer a cup. Feeding your baby breast milk or formula from a cup at mealtimes can help pave the way for weaning from a bottle. Around age 9 months, your baby might be able to drink from a cup on his or her own.

Dish individual servings. If you feed your baby directly from a jar or container, saliva on the spoon can quickly spoil leftovers. Instead, place servings in a dish. Opened jars of baby food can be safely refrigerated for two to three days.

Avoid power struggles. If your baby turns away from a new food, don't push. Simply try again another time. Repeated exposure can create variety in your baby's diet.

Know when to call it quits. When your baby has had enough to eat, he or she might cry or turn away. Don't force extra bites. As long as your baby's growth is on target, he or she is likely getting enough to eat. Also, don't try to get your baby to eat as much as possible at bedtime to get him or her to sleep through the night. There's no evidence that this works.

Enjoy your baby's sloppy tray, gooey hands and sticky face. You're building the foundation for a lifetime of healthy eating.