Blod Tribe Department of Health

Starting Solid Solid Foods

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The Background

- Increase in babies coming in to clinic that were exceeding their growth trends at about 10-12 months
- Formula and purees were being continued up until on average age 2 but as late as 4 (bottles)
- Increase in picky eating referrals and low iron among pediatrics
- Opioid crisis
- Cost



The Big Goal



The main goal of starting solids is to move gradually away from milk feeds as the major source of nutrition and onto the same foods that the adults in the family eat

Age

No solids until 6 months-ish. Watch for readiness signs





Learn how to solids before milk feeds are gone. 6-12 months are more explorative than toddlers when it comes to food. Most babies explore the world with their mouth...toddlers are not.

4 months vs 6 months Solids should not be before 4 months and not delayed past 6 months.





4 months did not affect growth rate or iron stores in formula fed babies and did not impact iron stores in breastfed babies. Slightly affected growth rate. Since there is no benefit we focus on readiness signs

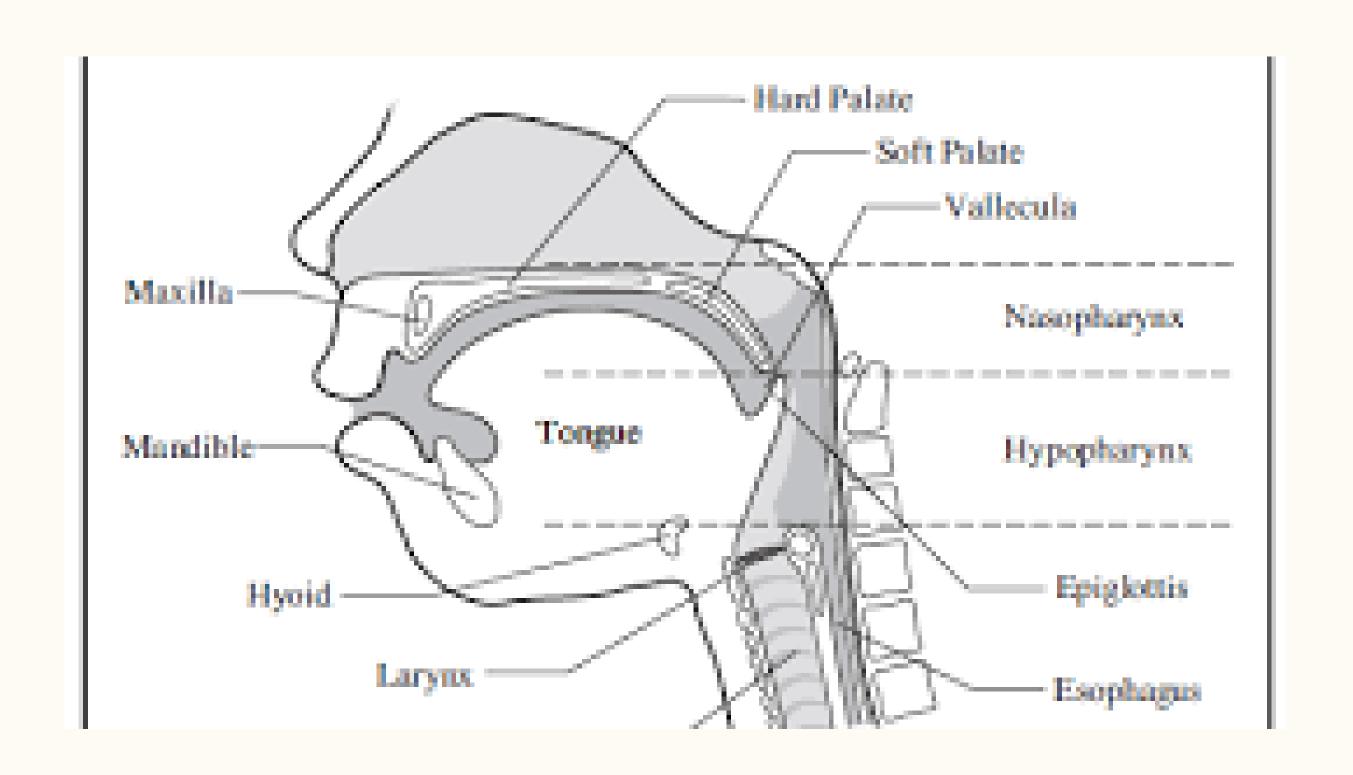
Readiness for Solids

The motor skills required for safe and efficient chewing and swallowing that happen in babies around 6 months of age.

- the ability to maintain head and neck upright
- ability to sit with minimal support
- hand to mouth

tongue extrusion reflex

Anatomical Protective Mechanisms



Positioning



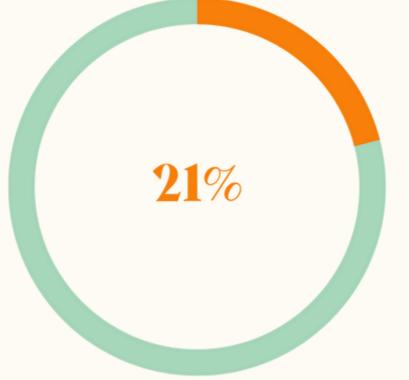






Choking and Safety

- Choking: enters or occludes the airway (silent)
- Coughing is not choking
- Gagging is not choking
- 56 infant deaths caused by choking 44 of them did not involve food



5 Factors that Increase the Risk of choking

1. Object or food characteristics

2.Physical Activity

3. Crying or being startled

4.Lack of supervision

5.Male Gender

Feeding environment is important!



High Choking Risk

Lack of supervision

Not great positioning

Inability to sit with minimal subports

Inability to hold their head up

Physical Activity while eating

Grying while eating

Methods of Starting Solids

- 1.Traditional Approach
 - High focus on purees, iron and zinc rich foods
- 2.Baby Led Weaning (Finger Foods First Approach)
 - Focused more on building skills

3.Combo





4 Parts of Starting Solids

- 1.Getting in new and varied nutrients to support growth and development
- 2. Building important oral motor skills (primarily chewing) to tolerate and manage a wide variety of textures
- 3. Building their taste buds and interest in eatng a wide variety of foods
- 4. Creating a set of feeding habits in the parent and the infant that will bring the baby into the family meal and carry them through toddlerhood and beyond aimed at preventing picky eating

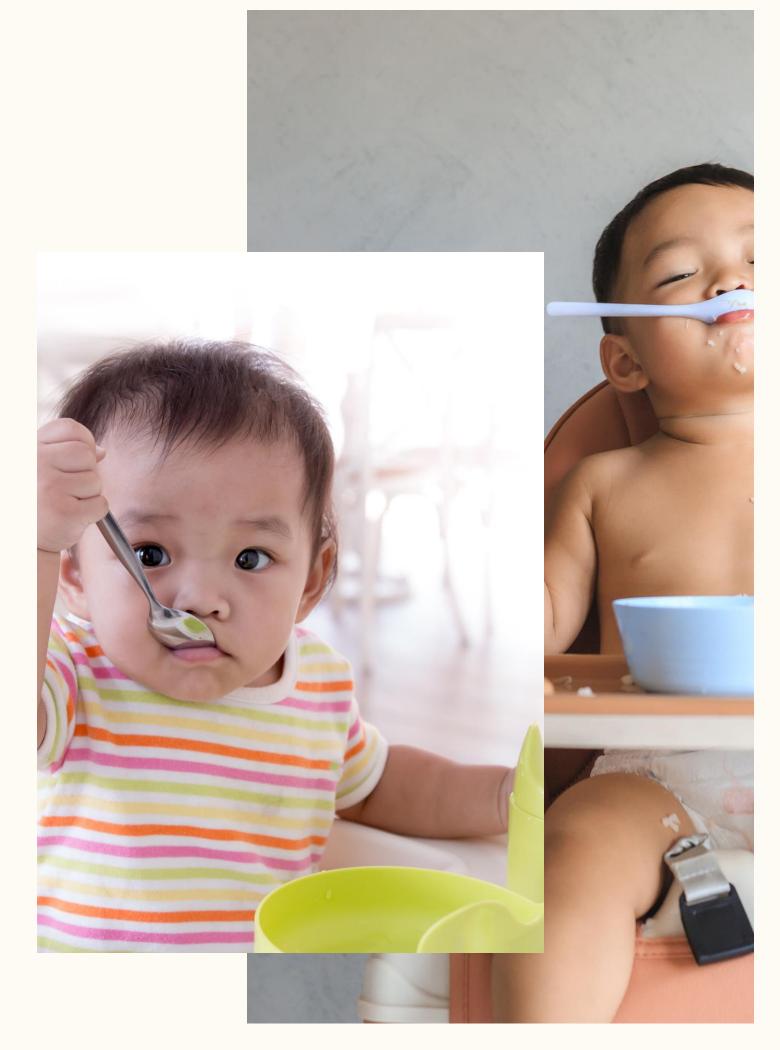


Method

Going straight to self feeding helps to

learn to choose and explore

- 6-7 months once a day for a few minutes-baby will eat very little in the beginning and interaction is a win.
- Cooking separately is a slippery slope
- Awake and alert-not sick or sleepy
- Don't stress about how much
- Watch for disengagement
- Placing food in mouth increases choking risk
- No pincer grasp until 9 months so go big
- Small pieces swallowed whole because tongue does not engage
- Big pieces cue brain
- Teeth doesn't matter

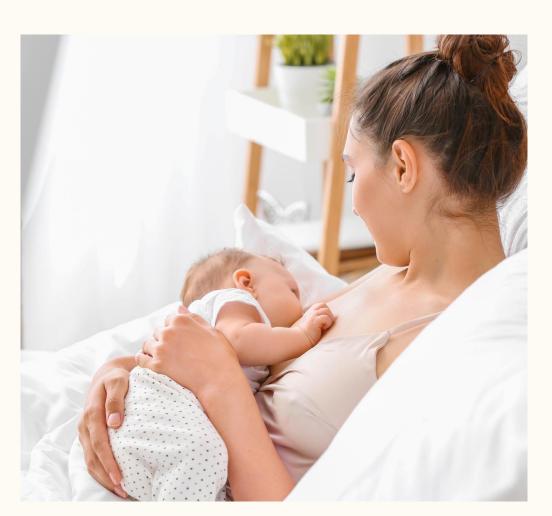


When does Baby-Led-Weaning not work?





- Baby with developmental delayresponsive spoon feeding
- Baby not gaining weight well on milk feeds-starting solids can get in the way of milk feeds. Milk feeds are complete nutrition.



Consumption

Parents often get hung up on consumption-is my baby eating enough, how many meals should babe be eating, what foods?

·How much a baby eats is dependent on interest and skill-level



Chewing

The switch to solid foods is all about learning to chew

- nutrient dense
- chewing is a new skill
- all foods break down differently in the mouth
- oral motor skills build over time
- practice moving constantly
- need to learn how to adapt and anticipate.
- use trial and error



Aim for Foods that Are:

Denselv Nutritious

Low in Heavy Metals

Easy for babies to self-feed

Provide opportunities to advance the flavours. texture tolerance. and oral motor skills. and low risk for choking and aspiration

Variety is key

What you eat

Avoid Foods That Are:

Food that carries a higherthan average risk of food poisoning

Foods that are highly processed or very high in salt and sugar

Foods that pose a high choking risk with little nutritional value

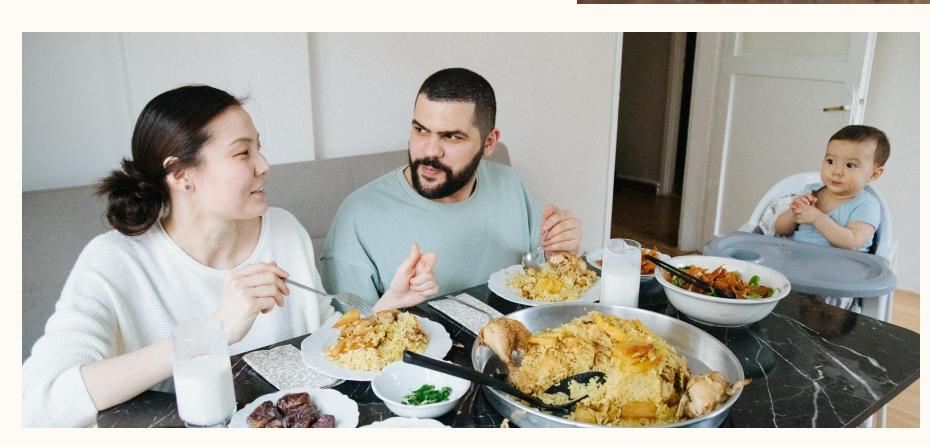
HONEY

Purees-make us slip past all those safety mechanisms and don't teach infants to chew.

History and Picky Eating

Milk feeds provide entirety of baby's nutrition





- -Intuitive Eating
- -Low growth and low intake with BLW is not a cause for concern
- -We want to encourage cultural foods (cooking without added salt and sugar for baby)
- -Babies gravitate towards familiar foods later in life -Children like what they're exposed to
- -Give them full flavours
- -Faces are not an indicator

Iron Stores

- Iron deficiency is the most common nutrient deficiency in the world
- RDA for Iron 0-6 months is 0.27
- 7-12 months is 11 mg/day
- 1-3 year olds is 7 mg/day
- High intake Vitamin D supplement for mom will supplement milk
- 6-12 months is about skill building







Biting and Gagging

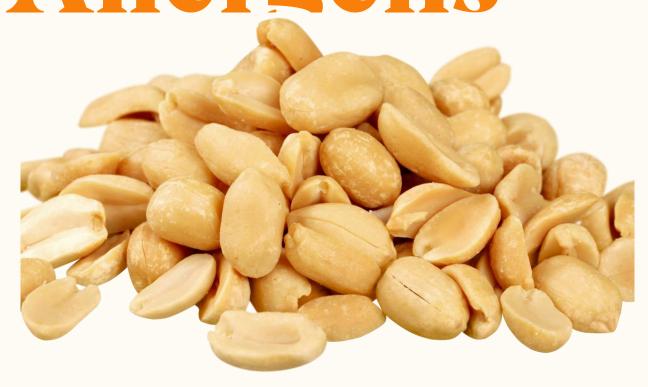
Parents use fear to motivate eating for baby





- Baby gets so much sensory input from "biting" off a piece of food.
- Side, gagged, spit or swallowed
- Gag Reflex is a lot more uncomfortable as child gets older.

Allergens



- You can introduce multiple new foods simultaneously as long as they're not a high risk allergen food
- Can increase risk food allergy in future as 37-61 days
- Eczema is highest risk factor
- Proactive allergen introduction LEAP



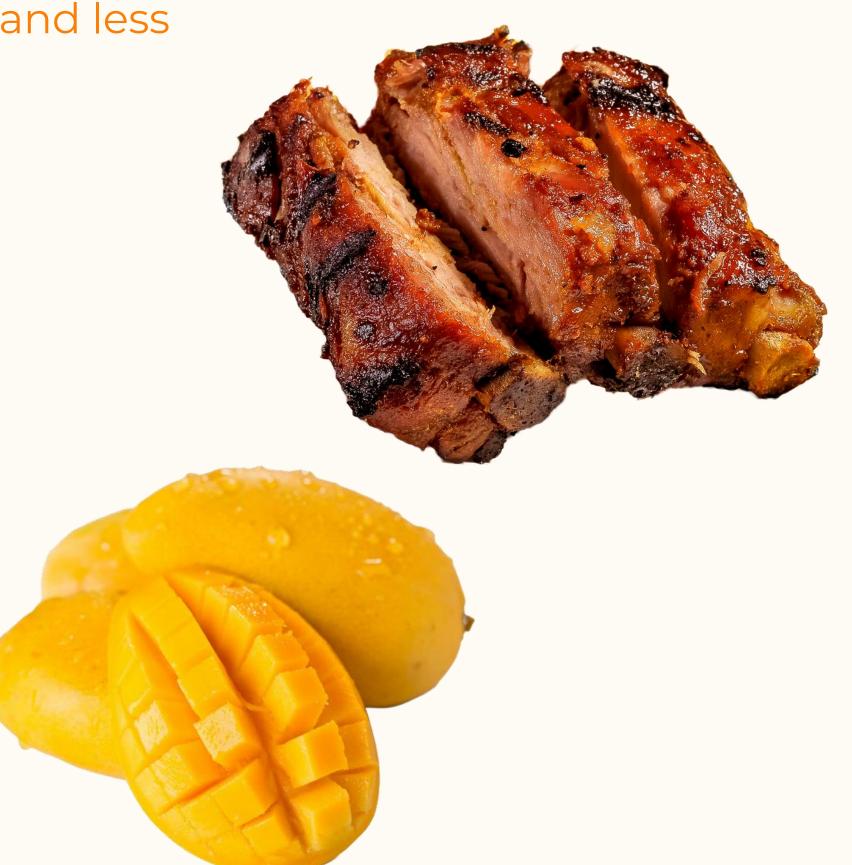
Gows Milk Finned Fish Shellfish Sov Tree Nuts Sesame Wheat Eggs

Resisitive Teethers

Foods that will allow better mouth mapping and less

about intake.





What does it look like?

Solid Starts App

Instagram: Solid Starts, Babies Feeding Babies, Feeding Littles

Dependent on Age



@solidstarts

(bite-sized)

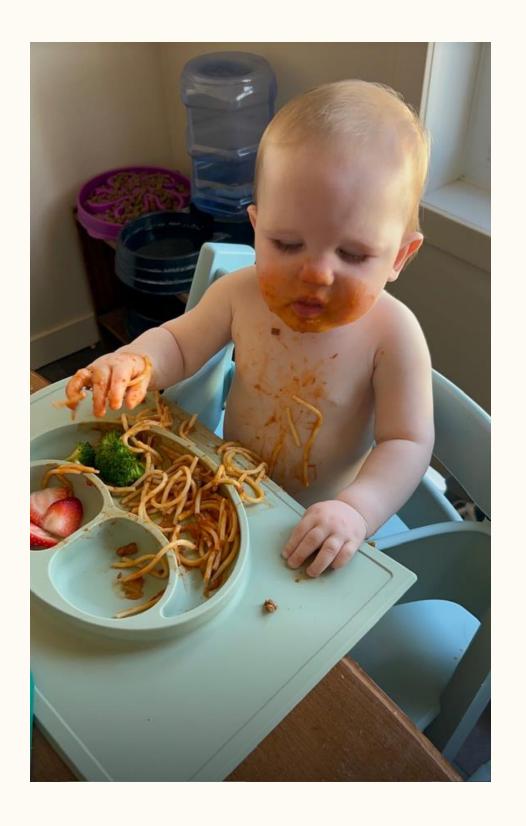
9 - 11 months +

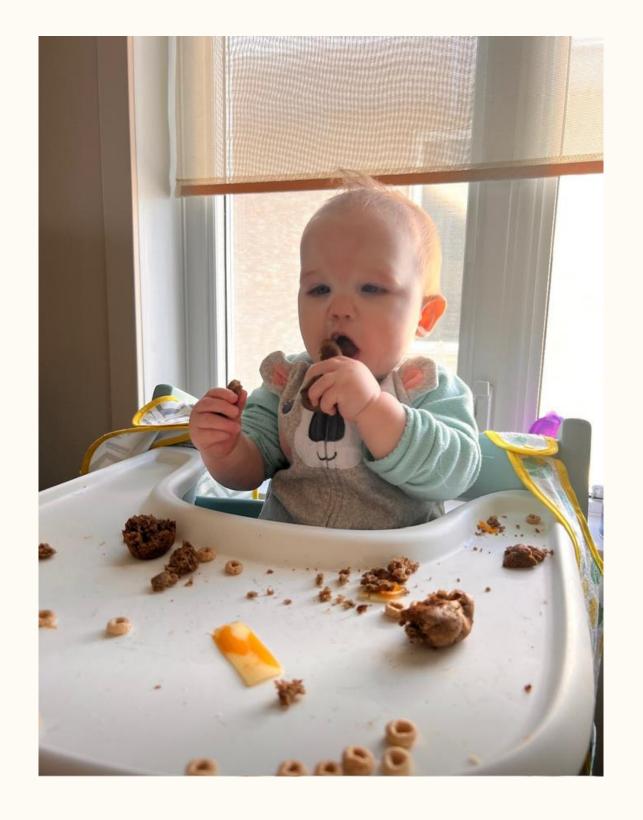
(large bite-sized)

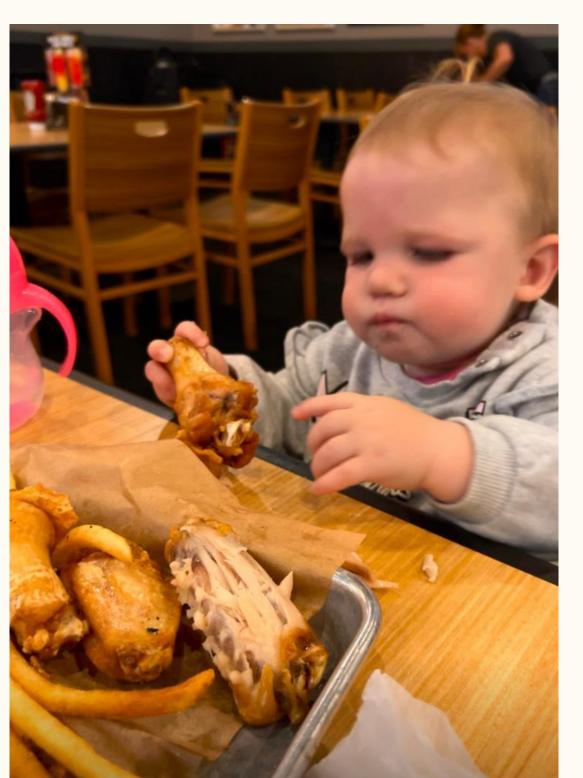


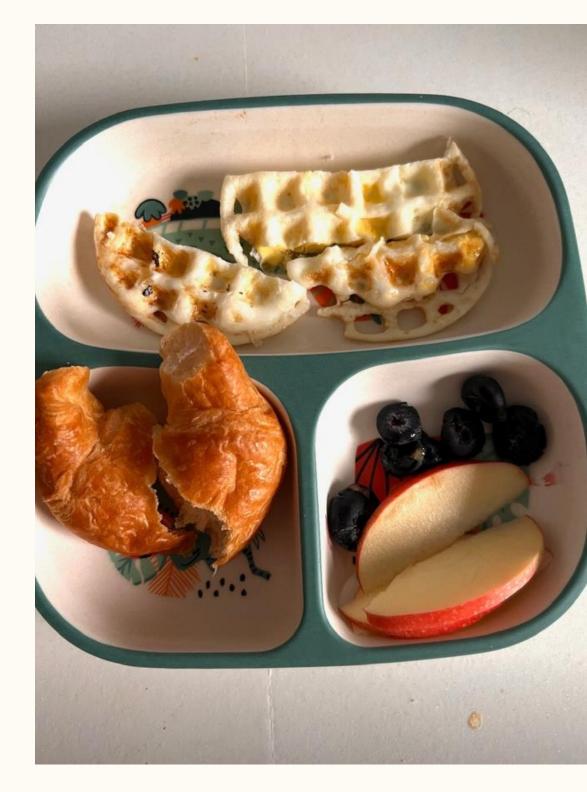
















Timing & Amount





sample feeding schedule (12-14 months)



7 AM -BREAKFAST



10 AM -MILK FEED



10:30 AM -NAP



12:30 PM -LUNCH



2:30 PM -SNACK



3:00 PM -NAP



5:30 PM -DINNER



7:15 PM -MILK FEED



7:30 PM -BEDTIME

babies feeding babies

Gubs. Sibby Gubs. Bottles

We want to be completely away from bottles by no later than 18 months

Open Cups, Straw Cups, 360 cups,

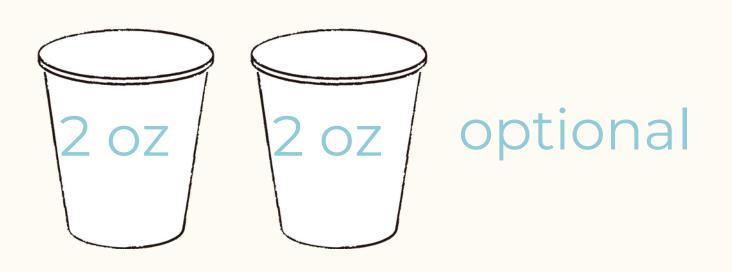
Avoid hard sippy cups





Water

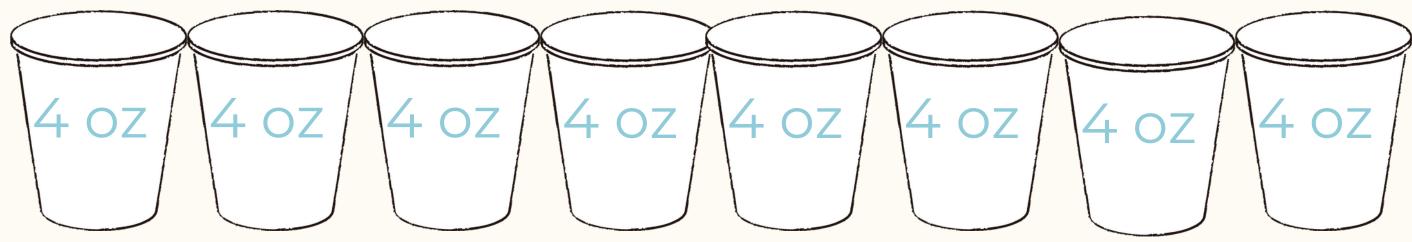
6-9 Months less than 118 mL (4 oz) a day





9-12 months less than 227 ml (8 oz) a day 2 oz 2 oz 2 oz optional

12-24 months 227-946 ml (8-32 oz) a day



minimum intake

Gow's Milk

6-9 Months not recommended

9-12 months 1/2 cup per day 4 OZ





12-24 months 500 ml per day









Boundaries

Be respectful State and repeat Find what you are comfortable with





Food before one is for lots and lots of fun

Ouestions

