

Solid facts: the confusion around feeding babies

If you have felt lost in the depths of advice and recommendations regarding solids you are not alone, in fact launching into solids with a feeling of clarity and confidence is probably the exception rather than the norm. It's a shame, given how exciting the prospect is of nourishing your baby with lovingly prepared food, plus the enjoyment that other members of the family will get from this shared experience. But why is such a seemingly simple act so confusing? Early childhood nutritionist, mum and author of What Do I Feed My Baby?, Leanne Cooper, takes an insightful look at how we have come so far only to find we have lost our way with introducing solids.

You have had the 'solids' discussion at the child health centre and probably left with more questions than answers. You will have realised you're not alone once you sat down at the café that morning with the other parents. After Googling 'introducing solids' for some helpful hints later that day during baby's nap, you come away with a handful of printed sheets all saying something different and feeling robbed of several hours. What now, you ask.

Where does all of this confusion come from?

It would be easy to blame the many flyers produced by various agencies, but in fact they are sufficiently vague enough to allow for flexibility, which, believe it or not is a good thing (as we shall see). Perhaps that's the problem, so many things about parenting are prescriptive now, and as parents we are relying more heavily on the advice of others outside the family. Or maybe it's the plethora of 'experts' out there lavishing us with their personal take on the subject.

In essence there seem to be three factors that are the most likely contenders for the confusion:

1. Delays in the filtering down of new knowledge to those on the front line
2. Well-meaning 'experts' with 'advice' that may not reflect current beliefs and science
3. Lack of access to logical feeding facts, leading to a lowered self-belief in our parenting skills

Of course, there are likely to be other social and contextual factors such as culture, family beliefs, finances and so on that will impact, but these are my top three.

Science changes faster than public information

Our dietary guidelines and policy, based on the latest findings at the time, are created only every few years. It takes time for decision-makers to put everything into place that will form the basis of consistent advice.

These guidelines and policies are the basis of many healthcare professionals' recommendations, as well as the myriad of booklets, pamphlets and posters (including non-government ones). Creating strong, consistent, well-researched guidelines that will stand the test of at least a few years is important. However, with these guidelines implemented only every few years, healthcare professionals can find themselves stuck in the middle of impending change, or worse be uninformed of the change in the wind.

Let's take the example of the confusion around when the 'right' time to start is. Some recommendations say 'about six months', others are now suggesting any time between four and six months. Not that either of these help you to identify when the right time is for your baby, but we will get to that.

Recent research in the area of allergy prevention and immunity points to recommendations moving back to the commencement of solids between four and six months, in line with baby's developmental stage of readiness. The current thinking is that delaying solids as we have done in the West may be implicated, at least in part, with the increase in allergies. It seems developing countries haven't had the same issues with allergy rates. Here in Australia, and in many other countries, some leading organisations, such as the Australian Society of Clinical Immunology and Allergy (ASCIA) have released recommendations based on these findings and other supporting evidence.

You may find some healthcare professionals are onto the changes, and will advise you of what recommendations were and where they are heading so you can make your own decision; though others prefer to work strictly within the existing government recommendations until changes are officially released. The real message from this is that finally we are seeing the emergence of a trend toward baby as your best guide.

Sifting out 'advice' from expert comment

One of the pitfalls that 'experts' can fall into is that they make a comment based on the groundswell of the time, or based on partial information. Let's have a look at two examples from a recent article I read by a 'nutrition expert', or rather a cook (albeit an excellent one), about solids.

Firstly, the article suggested that 'many' babies are fine to start solids from 17 weeks. I don't know exactly what is meant by 'many', and maybe it was an issue of grammar, but in fact only a few would be ready at four months. Instead some babies **might** start around this time, for example some paediatricians may recommend solids earlier than usual for babies with reflux, and yes a few babies may in fact be very ready. Somewhere between four and six months most babies will make a start. And while it is ideal to have baby 'chowing down' on good food before they head much past six months, some simply will refuse the mushy goo, preferring to start in their own good time while others will actually go straight to self-feeding (and honestly who can blame them).

Starting ahead of time can be disappointing and confusing for parents and impact on baby's acceptance of solids when he or she is ready. Gagging or vomiting on solids that baby does not have the skills to cope with, in short, can be a recipe for disaster.

The article went on to suggest that a common sign of readiness is that 'baby appears hungrier than usual', that baby seems 'unsatisfied with their current feeds', and wakes at night. In fact this is old doctrine and is quite unreliable and can be a signal of a great many other things. Not only do babies experience growth spurts around this time, but some bubs are experiencing teething and we also know there are certain weeks in the first six months when babies go through fussy stages (called Wonder Weeks). All of these will affect what babies do – eat and sleep. It's not rocket science when you see it written like that, but after a week of upset routines, sleepless nights and no tools left in your 'fix it box' you can see where confusion mounts. "Maybe my baby is hungry..." More than likely, this is not the reality.

In fact, the priority signs of readiness for solids relate to baby's physical development. The ability to take in, prepare and swallow food requires the development of certain muscles in the mouth, jaw and neck. Eating is second nature to us, we really don't stop to think just how complex eating is; it is

also intricately connected to respiration (breathing). Have you ever tried to swallow food with your chin on your chest or while holding your breath? It's not so easy! In order to swallow, baby needs to have good head control, plus their tongue extrusion reflex needs to subside (that's why some babies end up with more food down their chin than in their mouth). The whole process is quite a departure from the sucking and swallowing of fluid they have perfected over so many months. Often this sort of subtle information takes time to become mainstream knowledge.

When we 'consume' advice it's important we are clear whether what is being espoused is a view based on personal experience and belief over real expertise. At the very least this might make sense of why there is so much conflicting advice.

Trust in yourself and baby!

Science has given us a much greater understanding, or maybe it is an overt appreciation, of the intricacies of eating in the early days. Science has shown us that infants' bowel flora doesn't fully take hold until at least 16 weeks. Importantly, this finding has influenced our approach to allergies and immunity. We also now know that most babies' stores of iron gained in utero become depleted at around six months, hence the recommendation for iron-fortified foods around this point. And as we have seen, we have an improved understanding about the process of moving from swallowing your food to chewing it.

Having access to these pearls is vital, with this information in hand we, as parents, can observe our babies, giving us more influence in the decisions and making them more relevant to our individual babies. If you understand how to read the signals of readiness you are very likely to make a great start based on the best evidence you have at the time... your baby! We must be encouraged to understand the facts but be guided by our babies, as apposed to following linear prescriptive timelines and guides. Science provides the details, but our babies provide the foundation, and in such a process we are acknowledged as being intimately involved. No 'one-size-fits-all', no stress to conform to or keep up, no judgments, and we have the foundation knowledge so we can be discerning about advice. Doesn't it just make perfect sense! Why hasn't anyone put it that way?

So who should you listen to?

Be wary of those who are a little too eager to lavish you with their 'expert' advice. Beware also of those who talk in absolutes, 'always', 'never', 'definitely' as apposed to 'often' 'generally', 'may', 'potentially'. Anyone who has studied anything long enough will know there are few things we are certain of and there is more that is unknown than known. Seek advice that is less prescriptive and not bogged down in sounding authoritative in favour of information that is more about supporting your role.

It's true, pearls of wisdom can come from all sorts of sources and as a parent you will receive your fair share of advice. But ask yourself, is what an 'expert' is telling me what the industry experts are saying? And if not, why? The next time you read something by a 'nutrition expert' ask yourself what their background is. What it is that is their actual expertise? Where they are from? It's also not uncommon that the way things are done differs across even Western cultures, for example between the UK or US and Australia or New Zealand. What do you believe the messages they are giving is based on? Be encouraged to ask questions, so you can make your best decision. And remember you shouldn't feel bad about getting a second opinion.

Finally...

This nutritionist is almost prepared to say that we have paid far too much attention to the food and not enough to the baby when it comes to solids and that we have deferred too often to would-be experts. Thank goodness for paediatric speech pathologists who have finally come out of the shadows and made some sense of how babies eat, to hopefully put an end to the oscillating starting solids recommendations.

A baby-focused approach, based on where baby is in terms of their development, is likely the best way forward. Solids should be introduced in relation to your baby, not before 16 weeks and ideally prior to 6 months. Parents need greater access to easy user-friendly information regarding oral developmental stages so that they can witness the obvious signals that baby innately demonstrates as a readiness for solids.

Words by Early Childhood Nutritionist Leanne Cooper, author of
What Do I Feed My Baby? – Australasia 's favourite guide to introducing solids
www.sneakys.com.au

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