

Starting Solid Foods



Rice, oatmeal, or barley? What infant cereal or other food will be on the menu for your baby's first solid meal? And have you set a date?

At this point, you may have a plan or are confused because you have received too much advice from family and friends with different opinions. To help you prepare for your baby's transition to solid food, read on for more information from the American Academy of Pediatrics (AAP).

When can my baby begin solid foods?

The following are some guidelines from the AAP book *Nutrition: What Every Parent Needs to Know*. Remember that each child's readiness depends on his own rate of development.

- **Can he hold his head up?** Your baby should be able to sit in a high chair, feeding seat, or infant seat with good head control.
- **Does he open his mouth when food comes his way?** Babies may be ready if they watch you eating, reach for your food, and seem eager to be fed.
- **Can he move food from a spoon into his throat?** If you offer a spoon of rice cereal and he pushes it out of his mouth and it dribbles onto his chin, he may not have the ability to move it to the back of his mouth to swallow it. It's normal. Remember, he's never had anything thicker than breast milk or formula before, and this may take some getting used to. Try diluting it the first few times, then gradually thicken the texture. You may also want to wait a week or two and try again.
- **Is he big enough?** Generally, when infants double their birth weight (typically at about 4 months) and weigh about 13 pounds or more, they may be ready for solid foods.

NOTE: The AAP recommends breastfeeding as the sole source of nutrition for your baby for about 6 months. When you add solid foods to your baby's diet, continue breastfeeding until at least 12 months. You can continue to breastfeed after 12 months if you and your baby desire.

Check with your child's doctor about vitamin D and iron supplements during the first year.

How do I feed my baby?

Start with half a spoonful or less and talk to your baby through the process ("Mmm, see how good this is?"). Your baby may not know what to do at first. She may look confused, wrinkle her nose, roll the food around her mouth, or reject it altogether.

One way to make eating solids for the first time easier is to give your baby a little breast milk and/or formula first, then switch to very small half-spoonfuls of food, and finish with more breast milk and/or formula. This will prevent your baby from getting frustrated when she is very hungry.

Do not be surprised if most of the first few solid-food feedings wind up on your baby's face, hands, and bib. Increase the amount of food gradually, with just a teaspoonful or two to start. This allows your baby time to learn how to swallow solids.

Do not make your baby eat if she cries or turns away when you feed her. Go back to nursing or bottle-feeding exclusively for a time before trying again. Remember that starting solid foods is a gradual process and at first your baby will still be getting most of her nutrition from breast milk and/or formula.

NOTE: Do not put baby cereal in a bottle because your baby could choke. It also may increase the amount of food your baby eats and can cause your baby to gain too much weight. However, cereal in a bottle may be recommended if your baby has reflux. Check with your child's doctor.

Which food should I give my baby first?

For most babies it does not matter what the first solid foods are. By tradition, single-grain cereals are usually introduced first. However, there is no medical evidence that introducing solid foods in any particular order has an advantage for your baby. Though many pediatricians will recommend starting vegetables before fruits, there is no evidence that your baby will develop a dislike for vegetables if fruit is given first. Babies are born with a preference for sweets, and the order of introducing foods does not change this. If your baby has been mostly breastfeeding, he may benefit from baby food made with meat, which contains more easily absorbed sources of iron and zinc that are needed by 4 to 6 months of age. Check with your child's doctor.

Baby cereals are available premixed in individual containers or dry, to which you can add breast milk, formula, or water. Whichever type of cereal you use, make sure that it is made for babies and iron-fortified.

When can my baby try other food?

Once your baby learns to eat one food, gradually give him other foods. Give your baby one new food at a time, and wait at least 2 to 3 days before starting another. After each new food, watch for any allergic reactions such as diarrhea, rash, or vomiting. If any of these occur, stop using the new food and consult with your child's doctor.

Generally, meats and vegetables contain more nutrients per serving than fruits or cereals. Many pediatricians recommend against giving eggs and fish in the first year of life because of allergic reactions, but there is no evidence that introducing these nutrient-dense foods after 4 to 6 months of age determines whether your baby will be allergic to them.

Within a few months of starting solid foods, your baby's daily diet should include a variety of foods each day that may include the following: breast milk and/or formula, meats, cereal, vegetables, fruits, eggs, and fish.

NOTE: If you make your own baby food, be aware that home-prepared spinach, beets, green beans, squash, and carrots are not good choices during early infancy. They may contain large amounts of nitrates. Nitrates are chemicals that can cause an unusual type of anemia (low blood count) in young babies. Commercially prepared vegetables are safer because the manufacturers test for nitrates. Peas, corn, and sweet potatoes are better choices for home-prepared baby foods.

When can I give my baby finger foods?

Once your baby can sit up and bring her hands or other objects to her mouth, you can give her finger foods to help her learn to feed herself. To avoid choking, make sure anything you give your baby is soft, easy to swallow, and cut into small pieces. Some examples include small pieces of banana, wafer-type cookies, or crackers; scrambled eggs; well-cooked pasta; well-cooked chicken finely chopped; and well-cooked and cut up yellow squash, peas, and potatoes.

At each of your baby's daily meals, she should be eating about 4 ounces, or the amount in one small jar of strained baby food. Limit giving your baby foods that are made for adults. These foods often contain more salt and other preservatives.

If you want to give your baby fresh food, use a blender or food processor, or just mash softer foods with a fork. All fresh foods should be cooked with no added salt or seasoning. Though you can feed your baby raw bananas (mashed), most other fruits and vegetables should be cooked until they are soft. Refrigerate any food you do not use, and look for any signs of spoilage before giving it to your baby. Fresh foods are not bacteria-free, so they will spoil more quickly than food from a can or jar.

NOTE: Do not give your baby any food that requires chewing at this age. Do not give your baby any food that can be choking hazards, including hot dogs (including meat sticks [baby food "hot dogs"]); nuts and seeds; chunks of meat or cheese; whole grapes; popcorn; chunks of peanut butter; raw vegetables; fruit chunks, such as apple chunks; and hard, gooey, or sticky candy.

What changes can I expect after my baby starts solids?

When your baby starts eating solid foods, his stools will become more solid and variable in color. Because of the added sugars and fats, they will have a much stronger odor too. Peas and other green vegetables may turn the stool a deep-green color; beets may make it red. (Beets sometimes make urine red as well.) If your baby's meals are not strained, his stools may contain undigested pieces of food, especially hulls of peas or corn, and the skin of tomatoes or other vegetables. All of this is normal. Your baby's digestive system is still immature and needs time before it can fully process these new foods. If the stools are extremely loose, watery, or full of mucus, however, it may mean the digestive tract is irritated. In this case, reduce the amount of solids and introduce them more slowly. If the stools continue to be loose, watery, or full of mucus, consult your child's doctor to find the reason.

Should I give my baby juice?

Babies do not need juice. Babies younger than 6 months should not be given juice. However, if you choose to give your baby juice, do so only after 6 months of age, give only 100% fruit juice, and offer it only in a cup, not in a bottle. To help prevent tooth decay, do not put your child to bed with a bottle. If you do, make sure it contains only water.

Limit juice to no more than 4 ounces a day and offer it only with a meal or snack. Any more than this will reduce her appetite for other, more nutritious foods, including breast milk and/or formula. Too much juice also can cause diaper rash, diarrhea, or excessive weight gain.

Using a high chair

The following are safety tips when using a high chair:

- Make sure the high chair you use cannot be tipped over easily.
- If the chair folds, be sure it is locked each time you set it up.
- Whenever your child sits in the chair, use the safety straps, including the crotch strap. This will prevent your child from slipping down, which could cause serious injury or even death. Never allow your child to stand in the high chair.
- Do not place the high chair near a counter or table. Your child may be able to push hard enough against these surfaces to tip the chair over.
- Never leave a young child alone in a high chair, and do not allow older children to climb or play on it because this could also tip it over.
- A high chair that hooks on to a table is not a good substitute for a freestanding one. If you plan to use this type of chair when you eat out or travel, look for one that locks on to the table. Be sure the table is heavy enough to support your child's weight without tipping. Also, check to see whether your child's feet can touch a table support. If your child pushes against the table, it may dislodge the seat.

Does my baby need water?

Healthy babies do not need extra water. Breast milk and/or formula provides all the fluids they need. However, with the introduction of solid foods, water can be added to your baby's diet. Also, a small amount of water may be needed in very hot weather, but check with your child's doctor about how much is safe. And if you live in an area where the water is fluoridated, drinking water also will help prevent future tooth decay.

Good eating habits start early

It is important for your baby to get used to the process of eating—sitting up, taking food from a spoon, resting between bites, and stopping when full. These early experiences will help your child learn good eating habits throughout life.

Encourage family meals from the first feeding. When you can, the whole family should eat together. Research suggests that having dinner together as a family on a regular basis has positive effects on the development of children.

Remember to offer a good variety of healthy foods that are rich in the nutrients your child needs. Watch your child for cues that he has had enough to eat. Do not overfeed!

If you have any questions about your child's nutrition, including concerns about your child eating too much or too little, talk with your child's doctor.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

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Sample Menu Ideas for Babies on Solid Foods

Babies differ in the amounts of food they eat. Expect your baby's appetite to vary from day to day. The amounts listed below are suggestions, **some babies eat more, some eat less**. Follow your baby's cues for hunger and satisfaction.

Feeding	4-6 Months	6-7 Months
Early morning	Breast milk or formula	Breast milk or formula
Breakfast	1-2 tbsp vegetable or cereal Breast milk or formula	3-4 tbsp infant cereal Breast milk or formula
Lunch	Breast milk or formula	2-4 tbsp strained vegetables Breast milk or formula or water in a Sippy cup
Late Afternoon	Breast milk or formula	Breast milk or formula
Supper	Breast milk or formula	3-4tbsp strained vegetables/fruit 1-2 tbsp infant cereal Breast milk or formula
Evening	Breast milk or formula	Breast milk or formula (optional)

- If baby is not breastfed, iron-fortified infant formula is recommended for the first year
- Iron-fortified infant cereal is recommended for babies during the first year. Look for whole grain cereals like brown rice cereal.
- Vegetables: Can introduce ALL vegetables in the first year.
- Fruits: Can introduce ALL fruits in the first year (check with your physician).
- Meats: Can be introduced in pureed form after age six months.
- NO honey for the first year.

Feeding	7-9 Months	9-12 Months
Breakfast	2-3 tbsp fruit 4 tbsp infant cereal Breast milk or formula	Breast milk or formula 4-6 tbsp infant cereal Can offer plain yogurt, cottage cheese, mild cheese or tofu 2-3 tbsp fruit
Lunch	1-3 tbsp meat or meat alternative (lentils/mashed beans) 2-3 tbsp vegetables 2-3 tbsp fruit Breast milk or formula or water in a Sippy cup	1-2 tbsp meat or meat alternative 3-5 tbsp vegetables 3-4 tbsp fruit Early in this period try introducing finger foods- puffed cereal snacks; cheerios, pieces of boiled very soft vegetables or noodles, tofu, peeled soft fruit, whole grain bread squares 2-4 tbsp infant cereal Breast milk or formula or water in a Sippy cup
Late Afternoon	Breast milk or formula	Breast milk or formula
Supper	2-3 tbsp vegetables 2-3 tbsp fruit 4 tbsp infant cereal Breast milk or formula	2-3 tbsp meat or meat alternative 3-5 tbsp vegetables 2-3 tbsp fruit Breast milk or formula
Evening	Breast milk or formula (optional)	Breast milk or formula (optional)

Teething

What is teething?

Teething is the normal process of new teeth working their way through the gums. Your baby's first tooth may appear any time between the time he is 3 months to 1 year old. Most children will have all 20 of their baby teeth by the age of 3.

Most children have completely painless teething. The only symptoms are increased saliva, drooling, and a desire to chew on things. Teething occasionally causes some mild gum pain, but it doesn't interfere with sleep. The degree of discomfort varies from child to child. Your child won't be miserable. When the back teeth (molars) come through (age 6 to 12 years), the overlying gum may become bruised and swollen. This is harmless and temporary.

Because teeth erupt almost continuously from 6 months to 2 years of age, many unrelated illnesses are blamed on teething. Fevers are also common during this time because after the age of 6 months, infants lose the natural protection provided by their mothers' antibodies.

Which baby teeth come in first?

Your baby's teeth will usually erupt in the following order:

1. 2 lower inner incisors (bottom front teeth)
2. 4 upper incisors (top front teeth)
3. 2 lower outer incisors and all 4 first molars
4. 4 canines
5. 4 second molars.

How can I take care of my child?

- **Gum massage**

Find the irritated or swollen gum. Massage it with your finger for 2 minutes. Do this as often as necessary. You may also massage the gum with a piece of ice.

- **Teething rings**

Your baby's way of massaging his gums is to chew on a smooth, hard object. Teethers or teething rings are helpful. Most children like them cold. Offer a teething ring that has been chilled in the refrigerator, but not frozen in the freezer. A piece of chilled banana may help. Avoid ice or Popsicles that could cause frostbite of the gums. Also avoid hard foods that he might choke on (like raw carrots). Teething biscuits are fine.

- **Diet**

Avoid salty or acid foods. Your baby probably will enjoy sucking on a nipple, but if he finds this uncomfortable, use a cup for fluids temporarily.

- **Pain medicine**

If the pain increases, give acetaminophen (Tylenol) for 1 day. Special teething gels are not necessary and probably not beneficial. Many teething gels contain benzocaine, which can cause an allergic reaction. In addition it's unlikely they can numb the gums because they are washed out of the mouth and swallowed within a few minutes. If you still want to use a gel, do not apply it more than 4 times a day.

- **Common myths about teething**

- Teething does not cause fever, sleep problems, diarrhea, diaper rash, or lowered resistance to any infection. It probably doesn't cause crying. If your baby develops fever while teething, the fever is caused by something else.
- Don't tie a teething ring around your baby's neck. It could catch on something and strangle your child. Attach it to your baby's clothing with a "catch-it-clip."

When should I call my child's healthcare provider?

Call during office hours if:

- Your child develops a fever.
- Your child develops crying that doesn't have a cause.
- You have other questions or concerns.

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Sleep Learning: The First Four Months

MARC WEISSBLUTH, MD

Sleeping at About Four Months

Now that your baby is older, the times when your baby will become sleepy are more predictable. Another way of saying this is that the biologic sleep-wake rhythms are more mature. This allows you to change your strategy to keep your child well rested. Previously, at about 2 months of age, the focus was on brief intervals of wakefulness to avoid the overtired state; now you can begin to use clock time as an aid to help your child sleep well. Stated simply, you can use your child's natural sleep rhythms to help your child fall asleep. Let's start in the morning and go around the clock.

Starting the Day

Most children will wake to start the day about 7:00 AM, but this can vary widely from between 6:00 AM and 8:00 AM.

First Nap

The first nap occurs about 9:00 AM and may last as long as 2 hours. Sometimes you will stretch your child to get to this time, or you may wake up your child at 7:00 AM in order for your child to be able to take this nap. Please remember that previously you focused on maintaining short intervals of wakefulness, but now you try to anticipate your child's predictable best nap time. If your child takes this nap too early or too late, then it is difficult for your child to take the second nap on time. This morning nap disappears between 15 and 21 months.

Second Nap

The second nap occurs about 1:00 PM and also may last as long as 2 hours. The most common problem at this nap time is too long of an interval of wakefulness following the first nap. This causes your child to become overtired. The time window for this second nap is between 12 noon and 2:00 PM, but you may notice that your own child's time window during which it is easiest to fall asleep is much narrower. This afternoon nap commonly continues for about 4 years.

Third Nap

The third nap may or may not occur. If it does occur, it may vary between 3:00 PM and 5:00 PM. Also, the duration of this nap may vary, but it is usually a very brief nap. Usually this nap disappears by about 8 months.

Bedtime

Because of the variability of the third nap, bedtime also may vary. Most children are asleep between 7:00 PM and 9:00 PM. The most common problem at bedtime is keeping your child up too late. If the child is put to sleep after a time of tiredness, he or she has more difficulty

falling asleep and staying asleep. If you keep your child up past the time when he or she is drowsy, for example, because you return home late from work, then you are depriving your child of sleep. Try to avoid making your child overtired just as you would not deliberately make your child go without food when hungry.

First Night Waking

This may occur 4 to 6 hours after your child's last feeding. Some children do not get up at this time. Feeding your child differently or giving cereal will not help your child sleep better. There is a shifting from deep sleep to light sleep throughout the night. Partial awakenings or light sleep stages called arousals occur every 1 to 2 hours when your child is asleep. Sometimes your child will call out or cry during these arousals. Loud crying during these arousals usually signifies an overtired child.

If your baby is not sleeping with you in your bed, going to your child at the time of these partial awakenings will eventually lead to a night-waking or night-feeding habit. This is because you stimulate your baby when you pick up your baby, hold your baby, and feed your baby. Eventually, your baby will force him- or herself to a more alert state during these arousals. Consequently, your baby will learn to expect to be fed or enjoy the pleasure of playtime with you at every arousal. However, if you are sleeping with your baby and breast feeding, you might promptly nurse at all of these arousals while your baby is still in a somewhat deep sleep state, and then no night waking habit might develop. The most common problem regarding these naturally occurring arousals is to project psychological problems into our children such as saying that they must be lonely or afraid. However, 4 to 6 hours after the last feeding, many children are actually hungry, and you should promptly respond by feeding.

Second Night Waking

This may occur around 4:00 AM or 5:00 AM in the morning. Some children do not get up at this time. Most children who do awaken at this time are wet, soiled, or hungry and a prompt response is appropriate. Maintain silence and darkness, because your child should return to sleep. A common mistake is to play with your child and prevent him or her from returning to sleep. Returning to sleep is important so that your child will be able to comfortably stay up to the time of his or her first nap. Although this pattern of getting up once in the middle of the night or in the early morning is common, some children will simply get up once around 2:00 AM or 3:00 AM in the morning or not get up at all. Some night waking is very common during the first 8 months.

Activities for Infants 4 - 8 Months Old



Put a windup toy beside or behind your baby. Watch to see if your baby searches for the sound.	Give your baby a spoon to grasp and chew on. It's easy to hold and feels good in the mouth. It's also great for banging, swiping, and dropping.	While sitting on the floor, place your baby in a sitting position inside your legs. Use your legs and chest to provide only as much support as your baby needs. This allows you to play with your baby while encouraging independent sitting.	Gently rub your baby with a soft cloth, a paper towel, or nylon. Talk about how things feel (soft, rough, slippery). Lotion feels good, too.	Let your baby see herself in a mirror. Place an unbreakable mirror on the side of your baby's crib or changing table so that she can watch. Look in the mirror with your baby, too. Smile and wave at your baby.
Common household items such as measuring spoons and measuring cups make toys with interesting sounds and shapes. Gently dangle and shake a set of measuring spoons or measuring cups where your baby can reach or kick at them. Let your baby hold them to explore and shake, too.	Play voice games. Talk with a high or low voice. Click your tongue. Whisper. Take turns with your baby. Repeat any sounds made by him. Place your baby so that you are face to face—your baby will watch as you make sounds.	Fill a small plastic bottle (empty medicine bottle with child-proof cap) with beans or rice. Let your baby shake it to make noise.	Make another shaker using bells. Encourage your baby to hold one in each hand and shake them both. Watch to see if your baby likes one sound better than another.	Place your baby on her tummy with favorite toys or objects around but just slightly out of reach. Encourage her to reach out for toys and move toward them.
Fill an empty tissue box with strips of paper. Your baby will love pulling them out. (Do not use colored newsprint or magazines; they are toxic. Never use plastic bags or wrap.)	Safely attach a favorite toy to a side of your baby's crib, swing, or cradle chair for him to reach and grasp. Change toys frequently to give him new things to see and do.	Place your baby in a chair or car seat, or prop her up with pillows. Bounce and play with a flowing scarf or a large bouncing ball. Move it slowly up, then down or to the side, so that your baby can follow movement with her eyes.	With your baby lying on his back, place a toy within sight but out of reach, or move a toy across your baby's visual range. Encourage him to roll to get the toy.	Play Peekaboo with hands, cloth, or a diaper. Put the cloth over your face first. Then let your baby hide. Pull the cloth off if your baby can't. Encourage her to play. Take turns.
Place your baby in a chair or car seat to watch everyday activities. Tell your baby what you are doing. Let your baby see, hear, and touch common objects. You can give your baby attention while getting things done.	Place your baby on your knee facing you. Bounce him to the rhythm of a nursery rhyme. Sing and rock with the rhythm. Help your baby bring his hands together to clap to the rhythm.	Your baby will like to throw toys to the floor. Take a little time to play this "go and fetch" game. It helps your baby to learn to release objects. Give baby a box or pan to practice dropping toys into.	Once your baby starts rolling or crawling on her tummy, play "come and get me." Let your baby move, then chase after her and hug her when you catch her.	Place your baby facing you. Your baby can watch you change facial expressions (big smile, poking out tongue, widening eyes, raising eyebrows, puffing or blowing). Give your baby a turn. Do what your baby does.