

## Starting solids.

### **Introduction.**

The introduction of solid food to babies has become quite controversial. Multiple arguments are given both for and against commencing solid food before a particular age. Arguments are made that the child's bowel is immature, that there is an increased incidence of allergies, asthma or dermatitis later in life.

It is my experience as a father and as a doctor working in this field full time, that many children, and consequently their families, benefit from the introduction of solid food by approximately three months. The boys, particularly those who are growing strongly or who have tall parents, seem to appreciate solids earlier. Girls, particularly those who may grow to be petite, are less demanding and appear to be content with a later introduction of solid nutrition. The guidelines which I use are as follows.

### **When.**

The time of starting solids is variable. There are different rules in different cultures, different social groups and different families. The advice which you will receive is variable and somewhat confusing. My advice is that a fairly large majority of babies are interested in solid food by 3 months.

### **How do you know when for your baby?**

- Extra awakening. If the sleep program is going well, the child may begin to sleep through the night in the second month or, at least, be achieving blocks of sleep which are 6-8-10 hrs long. Then, for no reason that you can identify, the baby starts to awaken, genuinely hungry. The baby is indicating a need for extra nutrition. It may be time to start solids.
- The weight gain begins to decline. If you are recording weight gain, eg 30 gm per day, and this declines over a few weeks you may find introducing solids useful to bring the average daily weight gain back into the normal range for your baby.
- The child who is genuinely hungry will tend to be unsettled during the day.
- Another helpful guide is that the frequency of bowel actions may decrease. While bowel action frequency varies greatly I am always a little suspicious that if the bowel is open only every second or third or fourth day, the child may benefit from extra nutrition.

### **How to start.**

Start with ½ - 1 teaspoon. The consistency is similar to thickened cream. I start at the evening meal first, but some parents find that starting early in the day is more successful. The breast or bottle feed is given first and solids are a follow on. In some children a 15 minute gap between milk and solids is useful. Begin with a small volume and increase as the baby shows interest. It generally takes 2-3 days for the baby to learn the new swallowing style. Once the baby begins to understand solids then increase the volume as they show interest.

### **What to start with.**

My first choice in commencing solids is mixed vegetables. Generally using mashed potato as a base and then adding approximately 25% of sweet fruit or vegetable. The reason for the sweetness is to mimic the sweetness of human breast milk. Again, my first choice is pureed apple but a wide range of choices is fine. Some parents report more success using pumpkin, pear or sweet potato.

In preparing the child's vegetables, no salt or other additives are used. The consistency is somewhat similar to yoghurt or custard. A small volume of expressed breast milk or formula may be required to create the consistency which your child initially favours.

In the controversy over the early introduction of solid food and allergies the choices recommended here are rarely, if ever, associated with an allergic reaction in humans.

**Volumes.**

The volume of solid food commences cautiously as mentioned above. For many children their interest in solid food accelerates quite rapidly. Generally, after approximately two weeks of gradually increasing the food volumes, I transfer responsibility for volume from mother to child. Children will indicate quite clearly both interest in more and when they are completely satisfied. Another reason for passing responsibility to the child is that, on occasion, the volumes which the child eats can appear to be quite large. It is not uncommon, in my experience, for a child of say approximately six months, who weighs perhaps 15% of mothers weight, to be eating between 50 % and up to 100 % of the mother's food volume. It is very common for mothers to be warned against overfeeding. It is not my experience that this occurs. The key is not so much food volume but the food choices. Unhappily, there are some children whom I have seen being given sweetened soft drinks, oily potato chips and other inappropriate foods by 6 months. I encourage the families who see me to use mixed vegetables, mixed fruits, yoghurt, custard and generally foods which we would regard as healthy, nutritious and appropriate for babies. While a fair proportion of these children become generously rounded in their first year, it is my consistent experience that by approximately two years of age they are significantly taller and have slimmed down quite markedly.

**Milk first or solids first?**

Solids are given after the milk feed until about 6-7 months. At that age, the sequence changes and they are given solids first.

**What time of day?**

There is flexibility in the timing of solids. I tend to recommend solids in the evening as the first solid meal, then breakfast and then lunch. However, there is no hard and fast rule about this. If you start solids at breakfast, that is fine.

**When do you move from one solid meal to two.**

- Establish one meal of solids to a point that the baby is eating say  $\frac{1}{4}$  a cup plus and then consider going to two meals.
- The second indicator is age. If solids have been given successfully for say 2-4 weeks, then move to a second.
- Some mothers report that their child is showing clear interest in solids and the baby's interest leads the mother to move to two meals and then three.
- I tend to aim for a three meal day i.e. breakfast, lunch and dinner by 5 months.