

Feeding Your Infant

Infant feeding practices have a long term impact on health and growth. The following guidelines are based on current medical evidence and expert opinion.

The optimal source of nutrition for newborns and young infants is human breast milk. Infants who are breast fed enjoy multiple health advantages over those who are not breast fed. Those infants who receive only breast milk for the first few months of life enjoy the greatest benefit including:

- Enhanced bonding with their mothers.
- Lower risk of infection including middle ear infection, diarrhea and respiratory infection.
- Lower risk for Sudden Infant Death Syndrome.
- Lower risk for overweight/obesity.
- Lower risk for development of allergy, asthma, hypertension and other chronic disease.
- Lower risk for becoming overweight.
- Enhanced intelligence and developmental status.

Additional benefits of exclusive breast feeding for young infants are continuously being discovered. Exclusively breastfed infants benefit from vitamin D and iron supplementation. Available preparations include *Poly-Vi-Sol with Iron*, *Tri-Vi-Sol with Iron* and *Vi-Daylin with Iron*.

There are few instances when exclusive breast feeding is not medically advisable. Critically ill newborns, and those born very prematurely or with very low birth weight, benefit from supplemental nutrition. Mothers with Human Immunodeficiency Virus (HIV) infection and those who are taking certain medications/drugs should not breastfeed their infants.

There are a number of circumstances that often lead to inappropriate introduction of formula to newborns who are being exclusively breastfed:

- Perception of the mother/caregiver/family member that the infant is “not getting enough” nutrition despite adequate urine/stool output and normal weight status.
- Non-severe jaundice.
- Fussiness.
- Minor maternal illness and use of medications that pose little risk of harmful effects for the breastfeeding infant.

Seek advice from your child’s pediatrician before making a decision to introduce formula feeding.

Most infants who receive formula feeding thrive on commercial cow’s milk based preparations. Your pediatrician is best suited to advise you on choice of formula and indications for alternative formulas (i.e. soy-based formulas, hypoallergenic formulas, formulas thickened with rice solids).

Foods other than human breast milk and infant formula (complementary foods) should be introduced between five and six months of age. However, *cow’s milk and honey should not be fed to infants until one year of age.* Avoid sweetened beverages and foods that can cause choking (nuts, seeds, popcorn, hard candy.etc.). Offer your infant one to two ounces of water daily during this age range. Infant foods should be introduced individually, offering one new food for three to four days before introducing another. The foods should initially have a pureed/smooth consistency. Infants who sit independently and have a few erupted teeth usually tolerate soft foods and food with small soft chunks. By nine months of age, most infants tolerate a variety of soft table foods.

Please contact us for questions or advice regarding infant feeding and nutrition.