

Starting Solids

Starting your baby on solids is an exciting milestone! It can also be stressful trying to figure out what, when, and how to feed your baby. Here is some guidance to help get you started.

Signs that Your Baby is Ready to Start Solids

- Able to sit upright with minimal support, and has good head control
- Able to bring toys to mouth
- Loss of tongue thrust reflex
- Shows interest in food and opens mouth when food is offered
- Around 6 months old. However, reaching the above developmental milestones is more important than a specific age.

Feeding Environment

- Your baby should not be tired or overly hungry
- Provide a calm, quiet environment with minimal distractions, including no toys or electronics at the table (such as tablet, phone, tv)
- Seat the baby upright and safely in a highchair (not reclined)
- Include baby at family meals so they can learn good eating skills and behavior from others

How Often to Feed Baby Solids

At first offer 1 “meal” a day. Your baby will likely only take a few bites. Over time, follow your child’s lead and increase the amount of food and the frequency. Typically, babies 6-8 months eat 2-3 times per day. Babies 9 months and up eat 3-4 times per day. Continue offering breastmilk or formula, as this is still your baby’s primary source of nutrition until their first birthday.

How to Feed Your Baby

There are two different methods: Standard-Weaning (Purees) or Baby-Led Weaning (BLW*)

- Purees – traditional method of starting solids. The caregiver spoon-feeds the baby pureed baby food. Thicker and lumpier foods are introduced as baby’s eating skills develop.
- BLW - In this feeding approach that is gaining popularity, babies feed themselves finger foods right from the start instead of being spoon-fed purees. Babies start with soft, long, easy to grasp pieces of food such as pieces of avocado, sweet potato, or meatloaf. As their feeding skills improve, they are offered different sizes and textures of foods.

- There is not one right approach for all babies and all families. You can also do a combination of purees and baby led weaning. All babies are different. Do what you feel is best for your child and most practical for your family.

Let Baby Lead

- Babies are born with the ability to control their appetites. They eat when they are hungry and stop when they are satisfied. Force-feeding overrides fullness signals and can lead to overeating in the future.
- Pay close attention to your baby's cues while eating and let him lead. Establishing a positive relationship with food during infancy has life-long benefits.
- Let your baby touch the food and get messy – it's all a part of the learning process!
- Responsive feeding with purees: Give your child your full attention and watch for signs of hunger, fullness, and enjoyment. If your baby turns his head away from the spoon or pushes the spoon away, he is done eating. Do not coax the spoon into his mouth. Keep feeding if he continues to be excited and leans forward with his mouth open.
- Responsive feeding with BLW: Provide appropriately sized foods on baby's tray and allow him to self-feed. You can also pre-load a spoon with food and allow your baby to grab the spoon and bring it to his mouth. He will get better with practice!

First Foods

- Solid foods can be introduced in any order. There is no evidence that foods need to be introduced in a certain order, or that your baby will dislike vegetables if fruit is given first.
- At 6 months of age, a baby's iron and zinc stores start to run out, so they must get those nutrients from food. Foods such as meats, poultry, beans, eggs, and iron-fortified infant cereals are great foods to start with.
- Fats are also essential for babies' brain development. Offer foods such as avocado, whole-milk cheese and yogurt, egg yolk, thinly spread nut-butters, and red meats.
- Give them flavor! The more flavors introduced at a young age, the greater the chance that the child will accept a variety of flavors down the road. Explore bitter and non—sweet vegetables (cooked broccoli, kale stems, pureed leafy greens, asparagus, cauliflower), sour foods (citrus, raspberries and plain yogurt), and an array of herbs and spices.
- If doing BLW, start with long, thin, soft foods the size of an adult pinky finger. This allows the baby to grasp it and take a bite. Provide soft foods, such as cooked sweet potato, ripe avocado, and strips of omelets. If you can squish the food against the roof of your mouth with your tongue, then it is soft enough for your baby. As your baby masters eating these foods and their pincer grasp improves, decrease the size of food into smaller morsels.

Foods to Avoid

- Honey until 1 year of age
- Undercooked meat, poultry, egg, and fish
- Highly processed foods (cookies, chips, pastries, etc.)
- Choking-risk foods: small, round, sticky or hard foods such as raisins, grapes, nuts, seeds, raw carrot, thickly spread nut butters, popcorn, hot dogs

Allergens

- Contrary to prior belief, current research shows that early and frequent exposure to common allergens may be protective against food allergies.
- The 8 most common allergens are milk, eggs, fish, shellfish, peanuts, tree-nuts, wheat, and soybean. Introduce these foods one at a time spaced several days apart to observe how your baby reacts to each food. Once a food has been successfully introduced into the diet, continue to offer it on a regular basis.
- If you have a family history of food allergies and/or your baby has severe eczema, talk to your pediatrician about how to introduce these foods into your baby's diet.

Choking vs Gagging – Know the Difference

Some parents are nervous for their baby to start solids due to the fear of choking. If you practice safe feeding – baby sitting upright in the highchair, pureed or soft solid foods cut to the appropriate size – the risk of choking is low. However, it is important to know the difference between gagging and choking, and to know how to intervene in the event of an emergency.

- Gagging is your baby's safety mechanism against choking. Gagging is common when babies start eating solids. It can be caused by food overload or experiencing a new taste or texture of food. Gagging is typically noisy – your baby may cough, retch, or spit food out.
- Choking is when a piece of food partially or completely blocks the airway. Choking can cause high pitched sounds, or your baby may not be able to make any noise at all.
- It is a good idea to take an infant CPR class so you can feel confident and prepared.
- To learn more about what to do in the event of an emergency, or to find a CPR class in your area, visit: redcross.org/take-a-class/cpr/performing-cpr/child-baby-cpr

**Note: BLW may not be appropriate for babies with dysphagia, cleft palate, developmental delay, hypotonia, and some genetic disorders. Talk to your pediatrician to find out if BLW is right for your baby. Additionally, follow up by a dietitian is recommended for babies at risk for anemia, such as babies born premature, babies born low birth weight, babies born to an anemic mother, and babies following a vegan diet.*

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