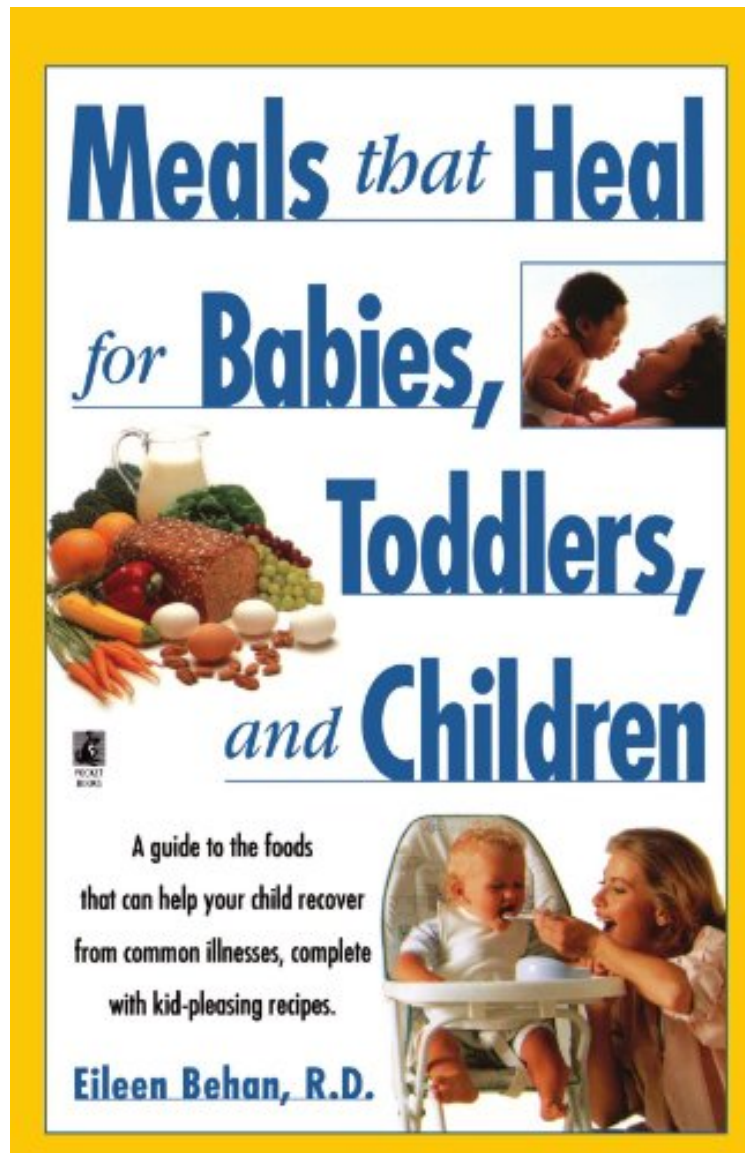


[Read free] Meals That Heal for Babies and Toddlers

## Meals That Heal for Babies and Toddlers

*Eileen Behan*

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**Eileen Behan : Meals That Heal for Babies and Toddlers** before purchasing it in order to gage whether or not it would be worth my time, and all praised Meals That Heal for Babies and Toddlers:

7 of 8 people found the following review helpful. A Disappointment By Rachel B. Ramey (blogger/author) This book was a great disappointment. Given the title, I expected large numbers of recipes that were highly nutritious. Instead, I found relatively few recipes, many of which are heavily sugar-laden. (Since sugar depresses the immune system, feeding it to a child when he's ill seems even more foolish than usual.) There is \*some\* good information in some of

the illness-specific sections. These, however, are each followed by approximately two recipes, very few of which are what I would consider nutritious. For example, of the two recipes provided for sore throats, one contains ice cream; the other contains candy. Now, ice cream might very well be \*soothing\* for a sore throat but, first of all, we all already know that and, second of all, it isn't going to help "heal" a sore throat. The end of the book contains recipes for comfort foods. Some of these are less unhealthy than the illness-related foods, but nearly all are recipes one can just as easily find elsewhere. (One example is macaroni and cheese.) I am certainly glad I did not pay \$19 to purchase this new! 1 of 5 people found the following review helpful. good food for sick kids By A Customer This is a great resource for parents and health care providers. Anybody who wants to know what to serve when a child has a stomachache, sore throat or even colic will find this very useful

For most childhood illnesses, rest and sound nutrition are the best medicine. When your little ones are ill, the foods you serve can alleviate their symptoms and even speed their recovery. But how do you know what to feed your ailing baby or toddler? What best soothes a sore throat, eases nausea, or relieves your baby's teething pains? Here Eileen Behan, registered dietitian, professional nutritionist, and mother of two, provides the answers. You'll discover: Comfort food classics like rice pudding and cinnamon toast Nutritious fluids and soups to soothe the symptoms of a common cold Easily digestible foods that can relieve an upset stomach Imaginative, no-sugar-added snacks for healthier teeth Iron-rich dishes, and foods that aid iron absorption High-fiber muffins, breads, dips, and desserts for regularity Fun foods with the right amount of cholesterol for growing bodies Just the right home remedies for fevers and flus Calming recipes for a good night's sleep Eileen Behan explains the connection between food and common childhood illnesses from asthma to ear infections to headaches to vomiting -- and gives you recipes for simple, delicious, kid-pleasing dishes that will actually help your child feel better faster.

From Library Journal Written especially for parents/care givers, this is another excellent book on the value of nutrition that will be highly useful when children are ill. Behan, a registered dietitian and mother (Cooking Well for the Unwell, LJ 5/1/96), has provided home-remedy nursing suggestions as well as recipes to use for common childhood illnesses, such as colds, nausea, ear infections, vomiting, sore throats, teething, asthma, upset stomachs, irregularity, fevers, and flus. This is an expansion of Cooking Well, which had a chapter on sick children. Included are tempting, low-cholesterol, low-sugar, low-fat, iron-rich, easily digested, high-fiber, and fun foods that will please kids and help make them well. Highly recommended for all health collections. [Index not seen.]?Loraine F. Sweetland, Rebok Memorial Lib., Silver Spring, Md.-?Loraine F. Sweetland, Rebok Memorial Lib., Silver Spring, Md. Copyright 1996 Reed Business Information, Inc. About the Author Eileen Behan is a member of the American Dietetic Association, a registered dietitian, and a mother of two. She has worked for the Harvard School of Public Health and the Veterans Administration. Her radio show, Food for Talk, aired on public radio in Boston for five years. She currently works as a nutrition consultant, helping families to improve their health through their diet. Ms. Behan lives with her family in New Hampshire. Excerpt. copy; Reprinted by permission. All rights reserved. Chapter One: Solid Beginnings There are no single foods or group of foods that will prevent your child from ever becoming ill. On the other hand, good nutrition can speed your child's recovery from illness and may even reduce the number of times he does get sick. Nutrients are what keep your child's immune system functioning and it is his immune system that guards against serious disease. It follows that poor nutrition makes any immune system less effective. Deficiencies of protein, calories, B vitamins -- even vitamins A and C -- are known to impair the immune system's ability to fight off illness. It is impossible and unnecessary for parents to keep track of all the nutrients essential to good health. Instead, this book focuses on the nine I consider most important. They are carbohydrates, protein, fat, iron, calcium, vitamin A, vitamin C, vitamin D, and vitamin E. Foods that carry these nutrients also carry small amounts of all the essential nutrients. THE NINE IMPORTANT NUTRIENTS YOUR CHILD NEEDS AND THE FOODS THAT CARRY THEM Carbohydrates: Provide energy (about half the calories a child needs each day should come from carbohydrate foods) and carry essential B vitamins, minerals, and fiber. Sources: Bread, cereal, rice, end pasta group, including rolls, tortillas, crackers, cookies, rice, noodles, potatoes. Beans (also a good protein source), vegetables, fruit, juice, milk and sugar carry carbohydrates, too. Protein: Builds and repairs tissues. Makes up digestive enzymes and the antibodies that protect the body. Also provides calories for energy. Sources: Meat, poultry, fish, dry beans, egg and nut group. Dairy products are a rich source of protein; grains such as rice cereal and bread carry protein, too. Fat: Concentrated source of calories. Carries essential fatty acids and essential vitamins such as A, D, and E. Sources: Butter, margarine, liquid cooking oils, cream, salad dressings from the fats, oils, and sweets group. Whole-milk dairy foods, along with meat, fish, poultry, and nuts, carry fat, too. Iron: Prevents iron-deficiency anemia, essential to healthy blood. Carries oxygen in the blood. Sources: Liver, red meats, poultry, shellfish, whole gains, beans; iron-fortified formula, cereal, and bread. Calcium: Keeps bones and teeth healthy. Helps muscles contract and blood clot. Sources: Milk, yogurt, and cheese group. Additional calcium sources include egg yolk, canned salmon with bones, dark-green leafy vegetables, soybeans, dried beans, and peas. Vitamin A: Prevents night blindness, keeps skin healthy. Sources: Vegetable group. Additional sources include liver, kidney, fish oils, milk, egg yolk. Carrots, sweet potatoes, squash, apricots, spinach,

collards, broccoli, and cabbage all carry vitamin A in its precursor form, known as carotene. Vitamin C: Enhances iron absorption; helps form collagen. May strengthen the immune system. Sources: Fruit group and vegetable group. Excellent sources include citrus fruits, strawberries, tomatoes, potatoes, melon, cabbage, broccoli, cauliflower, spinach, papaya, mango. Vitamin D: Works with calcium for healthy bone development. Sources: Milk, cheese, and yogurt group. Sunlight, cod liver oil, herring, mackerel, salmon, tuna, and sardines are all good sources. Vitamin E: Keeps blood, muscles, and liver healthy. Sources: Small amounts of vitamin E can be found in all food groups. Particularly good sources include vegetable oils, wheat germ, eggs, meat, fish, whole grains, nuts, beans.

### HOW TO MEET YOUR CHILD'S NEED FOR NUTRITION

#### INFANTS AND TODDLERS

The only feeding decision you need to make in the first months of your baby's life is whether to breast- or bottle-feed. Enjoy this time. Later on, meal choices are likely to become much more complicated. By 4 months of age, many babies are ready to start eating solids, though the milk feeding is still the primary source of nutrition. At this age, they have improved body control, can swallow better, and can turn their head away to signal when they are finished or disinterested. When you start to add solid foods to your baby's diet, you will face new decisions that can affect her health. Dealing with food allergies, lowering salt intake, and achieving a balanced diet are all possible feeding trouble spots. To reduce the risk of food allergy: Serve only single-ingredient foods; skip the combination dishes until your child is older. Introduce one new food at a time. Wait a week before adding a new food. If you suspect the food is causing a rash or digestive problems, wait a few weeks before serving it again. Cow's milk, eggs, nuts, fish, and shellfish are commonly identified as the source of food allergies. Do not serve them until your child is 10 months of age; old in the case of cow's milk, wait until baby is 1 year old. The taste for salt is an acquired one, and salty diets are linked with high blood pressure in adults. Studies show that when infants move from baby food to table food, their intake of salt skyrockets. Children eating a high-salt diet may develop a lifelong taste for salty foods.

#### BREAST OR BOTTLE?

Formula is not equal to breast milk in nutrition or the health benefits it can import. Breast milk is perfectly designed to meet a baby's needs; it will even change in its fat and protein content to meet a child's growth and appetite. Studies show that breast-fed babies have fewer doctors visits and often recover from illness faster than formula-fed babies. Because a bottle cannot be propped or left in the mouth, a breast-fed baby is less likely to experience tooth decay from nursing bottle syndrome. Breast-fed babies are even more likely to have straighter teeth because the muscles that hold the teeth are better developed. Besides the potential health benefits, breast-feeding provides secondary, psychological benefits. A breast-fed baby must be held to be fed, and Mom has to sit down five to six times each day to feed and cuddle her baby. This gives Mom time to relax and, most important, an opportunity for baby to bond with Mom. Mom can express breast milk so dad and other family members can participate in feeding. Breast-feeding is not all blissful; it can be uncomfortable if breasts become tender and it means you are the only person who can feed your baby. Breast-fed babies are also notorious for waking up at night more often than formula-fed babies (thank goodness this is temporary). Despite these drawbacks, I would like to see new mothers breast-feed their babies at least for a short time. A baby fed breast milk for 4 months will be able to get many of the lifetime health benefits breast milk can provide. Today, 50% of mothers work outside of the home. Breast-feeding while working is difficult, but not impossible. There are many books on the subject. Contact the La Leche League [(800) LA LECHE] for information or seek out an experienced working mother for support.

#### DAILY INFANT AND TODDLER FEEDING GUIDE

These are general feeding recommendations meant to assist parents in planning healthy meals.

Birth to 4 months: 5-10 feedings of breast milk or 16-32 oz. of infant formula

4 to 6 months: 4-7 feedings of breast milk or 26-40 oz. of infant formula

Infant cereal (rice, oatmeal or barley) and infant juice can be introduced.

6 to 8 months: 3-4 feedings of breast milk or 24-32 oz. of infant formula

Strained mashed food, including cooked vegetables (avoid corn and peas), such as carrots and green beans, and fresh or cooked fruit are good choices to try now. Try serving infant juices in a cup.

8 to 10 months: 3-4 feedings of breast milk or 16-24 oz. of infant formula

Serve foods mashed or finely minced. Cereal and bread-type foods (2-3 servings daily): infant cereal, cream of wheat, oatmeal, toast, bagels, crackers

100% juice (4 oz. daily): orange, tomato, pineapple, or infant juices

Cooked or mashed vegetables (1-2 servings daily)

Ripe fruit (fresh or cooked) (1-2 servings daily)

Meat, chicken, fish, egg yolk, plain yogurt, beans, cottage cheese (1 -2 tbsp. daily)

10 to 12 months: 3-4 feedings of breast milk or 16-24 oz. of infant formula

Serve foods minced or chopped. Cereal, breads, all varieties of unsweetened cereal, rice, noodles, crackers, spaghetti (2-4 servings daily)

Vitamin C-rich juice (4 oz. daily): orange, grapefruit, pineapple

Cooked or raw vegetables (1-2 servings daily)

Fresh or cooked fruit (1-2 servings daily): ripe peaches, pears, and oranges are good choices.

Protein-rich food (1-2 tbsp. twice a day): lamb, beef, pork, fish, poultry, eggs, cheese, yogurt, beans, tofu, peanut butter

12 to 24 months: Cow's milk and cow's milk products can replace some or all of the formula or breast milk feedings after 1 year of age. 2-3 feedings of breast milk or 16-24 oz. of formula or 2-4 servings of milk or other calcium-rich food: yogurt, cottage cheese, tofu, green leafy vegetables. Cereal, bread, rice, pasta, noodles (4 or more servings about 1/3 of an adult-size portion)

Vitamin C-rich juice (4 oz. daily)

Vegetables, raw or cooked (2 or more servings)

Fruit (2 or more servings) -- offer at least one citrus fruit daily

Meat, fish, or poultry, eggs, nut butters; beans; tofu (2 servings daily, each portion at least 1/2 ounce)

To control your child's intake of salt: Do not add salt to baby food and do not serve processed foods meant for adults, such as canned beef stews, prepared soup, or frozen meals. Avoid processed deli meats; serve plain chicken and fresh

cooked meat. Serve fresh fruit and vegetables and unprocessed snack foods or those designed for babies, as baby-food companies do not add salt to their products. SALT There is no conclusive evidence that salt is detrimental to children, but high salt intakes are unnecessary. Salt is a combination of sodium and chloride; it is the sodium part that affects body fluids and health. A high-salt diet is linked with high blood pressure and possibly asthma. The addition of salt to so many processed foods makes the elimination of salt in cooking and at the table much less effective at controlling total salt intake than you might think. Children need a minimum of 225-500 mg of sodium per day to maintain health, and 2,400 mg per day is the upper limit. Studies show that many Americans easily eat 5,000 mg per day. Sodium cannot and should not be eliminated from your child's diet, but it is easy to see that she can get much more than she needs. Fresh fruits and vegetables are naturally low in sodium, dairy products are higher, and many of the foods from the bread, cereal, rice, and grain group carry sodium because salt is used in the leavening agents. To keep your child's sodium intake low: Do not use salt at the table. Balance high-sodium foods with low-sodium foods. For example, if you are serving a high-sodium conned soup, serve fruit or vegetable sticks along with it. Read labels to learn which foods carry a lot of sodium. Choose snacks in the 100- to 300-mg sodium range or lower. Introduce your child at an early age to herbs and spices. These are wonderful salt substitutes. My girls help me grow and pick parsley, chives, rosemary, basil, and thyme, which we use in cooking. Once your baby starts solid food, use the Daily Infant and Toddler Feeding Guide to guide you toward healthy feeding decisions. After your baby's first birthday, the milk feeding becomes less important (but not eliminated), and other foods must be added to supply the essential nutrients baby needs. A varied diet of all types of food is what will keep baby well nourished. Milk can be an effective way to meet caloric, protein, and calcium needs, but keep it in its proper place. Don't let a toddler substitute the bottle for a meal. Milk is not a good source of iron or vitamin C. Don't serve low-fat milk until after age 2. Young children need fat for proper growth. Start a regular meal schedule and eating routine. Three meals plus two or three snacks works well for toddlers. Offer a spoonful of all the food groups at each meal, but don't expect your toddler to finish what you serve -- at least not always. Serve snacks when she is hungry, but not as an answer to boredom. Snacks should be low in salt and sugar. Fruit, vegetable sticks, bread slices, crackers, even dry cereal are all good choices. In her first year, your child will nearly triple her weight, but she can't continue at that rate or she'll be as big as a five-year-old at her next birthday. For this reason, children often eat less when they turn 1. Toddlers are ready to feed themselves when they like finger foods, want to try a cup, and practice with a spoon. Learning to eat will be messy and time consuming, but meals are very important social events for kids, presenting an opportunity to express how you feel about food and your child. Make mealtimes pleasant and enjoyable. If your baby is spitting out the fresh green peas you prepared, don't get discouraged. A 1993 study in the *Journal of Pediatrics* found that babies do eat their vegetables eventually if they are repeatedly offered to them. In this study of 36 infants, it took 10 offerings before the majority of babies decided to accept the new, foreign foods we know as peas and green beans. If you have concerns about the type and amount of food your baby is or isn't eating, discuss your worries with his pediatrician. In general, offer a good variety of foods and trust your child. A healthy child will eat what he needs. Milk deserves singling out because it is such a prominent food in most children's diets and a swirl of controversy now surrounds it. Milk has been linked as a trigger in the development of insulin-dependent diabetes, identified as a cause of iron-deficiency anemia and food allergies, and accused of increasing mucus secretions during respiratory illness. In response to the concerns about milk and diabetes, the American Academy of Pediatrics (AAP) convened a work group to look at the milk and diabetes connection in children. The annual incidence of insulin-dependent diabetes under age 19 is 15 per 100,000 persons. The work group concluded that avoiding milk protein in the first several months of life may reduce the later development of insulin-dependent diabetes. It is specifically recommended that mothers breast-feed for the first year of their babies' lives, particularly if there is a strong family history of diabetes. In infants whose mothers do not breast-feed, commercial infant formula made from cow's milk is the next recommended feeding. Soy-milk formula is not an accepted substitute for breast milk because in animal studies it, too, was found to be linked with the development of diabetes. Another down side of milk is that it is a poor source of iron, and it can cause the loss of minute amounts of blood from the intestinal tract that can lead to iron-deficiency anemia. Cow's milk is also a common cause of food allergy when given in the first year of life. During children's respiratory illnesses, lots of parents might withhold milk and dairy foods for fear of increasing mucus production. In 1992, Carole E. Pinnock published a study in the journal *American of Respiratory Disease* that found no association between milk and nasal secretions, congestion, or symptoms. She and colleagues objectively measured the nasal secretions in used facial tissues from 51 volunteers, most of whom believed milk would indeed worsen their condition, but no link was found. The most recent milk controversy involves the use of bovine somatotropin (BST), a genetically engineered growth hormone used in dairy cows to increase milk production. Consumer groups claim that BST is not good for cows or people, but the U.S. Food and Drug Administration (FDA) disagrees and has approved its use. According to the FDA, there are no known health reasons not to drink milk that comes from treated cows -- and it looks and tastes just like any milk. With all the concern regarding milk, one might ask why it should be included at all. Milk is still being recommended for children because of the nutrients it does contain. Milk, along with other dairy products, such as cheese and yogurt, is preferred by most kids over other calcium-rich foods, such as beans and green leafy vegetables. Just 1 cup carries 25% of the U.S. Recommended Daily

Allowance (RDA) for calcium, and it is a great source of protein and riboflavin and is fortified with vitamin D. Raw milk is not necessarily organic and it is not recommended for children because it can contain harmful bacteria -- serve only pasteurized milk.

**OLDER CHILDREN**As your child gets older and breast milk or formula no longer makes up the bulk of his diet, balanced eating becomes more important. There is no one food that your child must eat to be healthy but he does need to get enough of the foods that carry the essential nutrients. The key points to remember are:

**Variety:** Parents should offer a wide variety of foods to children.

**Moderation:** The suggested number and size of servings are good guides for balanced nutrition.

**Proportionality:** Serve more foods from the larger groups and fewer from the smaller ones.

**Vegetables** carry lots of minerals and vitamins; fruits carry mostly vitamins. To meet calcium needs, your child should always eat at least the minimum two servings from the milk, yogurt, and cheese group. Two servings from the meat, poultry, fish, dry beans, eggs, and nuts group will meet your child's need for protein.

**FOUR WAYS TO MAKE FAMILY MEALS HEALTHIER AND COOKING EASIER**Start the day off right! Serve at least two fruits at breakfast, such as a glass of juice and a banana, grapefruit, or melon. Serve whole-grain cereal, toast, or bagels. At lunch and supper, be alert to ways to add veggies. Try a grated-carrot salad, add tomatoes to a sandwich, or fortify a soup with minced vegetables. Think of the bread, cereal, rice, and pasta group as the main course in your menu. Make foods from the meat, poultry, fish, dry beans, and egg group the side dish. To make life easier, keep pre-cut, washed vegetables on hand and canned no-added-sugar fruits. Stock the cupboard with canned ready-to-use beans for chilies, soups, and stews.

**REALLY GOOD FOODS FOR YOUR KIDS**There is no one perfect food. Any food that comes to us unprocessed and unrefined is likely to be packed with nutrients and good for kids. There are some foods that are particularly rich in specific nutrients and chemicals that may be beneficial to your child's health. Don't force your child to eat any of these foods if he doesn't want to, but consider these as snacks or part of meals when you're deciding what to feed him.

**Yogurt, Mother Nature's Penicillin?**Yogurt is not a substitute for antibiotics, but it might be useful when they are prescribed. Yogurt is a good source of protein and carbohydrate nutrients that may be able to counter the side effects of diarrhea and stomachaches that can come with these medicines. Serve yogurt when the doctor or pharmacist says to take medication with food. Antibiotic therapy can disrupt the friendly healthy bacteria that live in the intestine. Yogurt made with live cultures may restore or maintain the bacterial balance in your child's intestinal tract, and studies show that yogurt cultures can help control infection. To get the most health-promoting yogurt, look for one with a label noting that it contains live cultures. Heat-treating yogurt prolongs shelf life, but beneficial cultures can be destroyed by this process.

**Foodaceuticals?**There are hundreds -- maybe thousands -- of chemicals found in plants that go by the collective name phytochemicals, and they may be the reason why people who eat their fruits and vegetables have less cancer. All the cruciferous vegetables, such as Brussels sprouts, cabbage, cauliflower, broccoli, turnips, and rutabagas, carry a variety of these health-promoting chemicals. Many varieties of fruit carry ferulic acid, which may bind with nitrates to prevent them from turning into cancer-causing nitrosamines. Grapes are a great source of the phytochemical known as ellagic acid. Soybeans carry lots of these plant chemicals, too. In short, the whole plant kingdom from apples to zucchini, is packed with them. To give potential cancer-prevention benefits to our children, offer them a wide variety of fruits and veggies.

**Fish**Serve fish a few times a week, and there is a very good chance you will reduce your child's risk of heart disease when she is older. Scientists believe that fish contains a fat called omega-3 that protects the heart. In studies of Eskimo Indians, a diet rich in fish appears to be the reason they have fewer heart attacks. Fish rich in these oils include mackerel, herring, tuna, sardines, salmon, and trout. Other kinds of fish carry these oils, too, but in lesser amounts. To get the true health benefits of fish, serve it baked, broiled, or steamed.

**Fiber**Fiber is good for the whole family. Studies from the National Cancer Institute show that people who eat a fiber-rich diet of grains and vegetables have a lower cancer risk. A diet richer in fiber may also help keep cholesterol levels in a desirable range by carrying away some of the acids that are needed to make cholesterol. Also, fiber is certainly recognized as an important factor in preventing and treating constipation. Increase your family's fiber intake by serving the recommended amounts of fruits and vegetables every day. Encourage the use of more whole-grain products, such as cereal and bread. Read product labels to select foods, such as crackers, and snacks with a higher fiber intake. Get your kids in on the decision making, too: have them read and compare labels and sample products that provide more fiber.

Don't be overzealous about restricting your child's fat intake, either. The American Academy of Pediatrics (AAP) has expressed concerns over emphasizing lower intakes of fat, cholesterol, and salt along with higher intakes of high-fiber cereal, grains, and plant products. A low-fat diet is believed to decrease the risk of heart disease later in life, but a low-fat, plant-based diet could be too low in calories to meet the needs of growing kids. The AAP urges moderation for older children, but infants and toddlers should never be put on low-fat diets. Parents who want to feed a safe, low-fat diet to their children over 2 years of age can do so by following these simple suggestions: serve low-fat dairy products (after age 2), trim meats of visible fat, and bake or broil instead of frying. Make foods from the bread, cereal, rice, and pasta group the foundation of all your meals. Avoid high-fat snack foods that contain more than 5 grams of fat per serving, particularly if they replace more nutritious foods. In addition to promoting healthy eating, parents should encourage regular exercise.

It is impossible to know exactly how much food a young child needs every day. Nutritional needs are determined by growth, activity level, and the type of food being eaten. In our house, I serve at least the minimum suggested servings from each food group. I find that fruits and vegetables are hardest to get my

kids to eat, but I serve at least three fruits and two vegetables each day. If they are hungry, they can choose second helpings from any food group they want as long as they have already eaten the basics from every food group. Snacks are very important to growing kids. Don't be afraid to serve food between meals, but do use the Food Guide Pyramid to make decisions about what you serve. Encourage snacks from the base of the pyramid, since these are the foods we need most. Graham crackers would be a serving from the bread, cereal, rice, and pasta group; a snack of sliced apples can count as a serving of fruit. As long as your child is selecting a variety of foods, he will be well nourished. THERE IS NO ACCOUNTING FOR TASTE A child's preference for food will be strongly influenced by the foods served and eaten around her. Though she might initially turn her nose up at some of your favorite meals, over time she will adopt many of the same food likes and dislikes as her parents. Food preference is not an entirely random event. How a food tastes, smells, looks, and even feels in the mouth are all qualities that will determine whether the food will be eaten or refused. All children begin with a preference for sweet tastes and a dislike for bitter or sour tastes. This is a built-in protection against accidental poisonings, since toxic substances are most likely to taste sour or bitter. Infants and children are indifferent to the taste of salt, at least initially, but once it is added to food, it can be a learned and preferred taste. Mother Nature seems to have endowed the human body with an innate desire to select a variety of food. Studies show that the pleasantness of food declines as it is eaten, and this is not based on satiety. More food is likely to be consumed when a meal contains several different foods instead of one or two items, increasing the likelihood that your child will eat enough food to satisfy nutrient needs. If you want your child to eat more, you may find success when you offer small servings of several different foods instead of a large serving of just one food. With all these built in biological and psychological taste and preference controls, you might wonder if you can trust your child's ability to select a healthy diet. Over 60 years ago, researcher Clara Davis first looked at this issue and found that when they are given nutritious choices, children can select a diet that is nutritionally adequate even without adult supervision. In 1991, Leann Birch, Ph.D., took a more contemporary look at the question of a child's ability to self-regulate food intake. Over a 6-day period, Dr. Birch kept track of the food eaten by 15 children ages 2 to 5. If the kids ate a little at one meal, they compensated by eating more at the next, or vice versa. At the end of any given day almost exactly the same total amount of calories as the day before or the following day. The study results showed that what children eat at any given meal is likely to be quite variable, but that in the end, it all seems to balance out. For example, one child in the Birch study, offered the same foods at breakfast 2 days in a row, consumed food with only 100 calories one day, but with 350 calories the next. You do not need to coerce your child into eating -- you can stop using threats or bribes forever. In fact, results of at least one study done with preschoolers showed that parents who have a very authoritarian and controlling attitude about what their kids eat actually impede their children's ability to learn how to control food. The researchers suggest to parents that it is best to offer a variety of nutritious food and allow the child to select the type and amounts they want to eat. This does not mean you should be cavalier about what your child eats. In a public health report released in 1994 regarding 1,392 children aged 1 to 10 who participated in a nationwide food consumption survey, it was noted that vitamins A, C, and E, calcium, iron, and zinc were the nutrients most often consumed in amounts below recommended levels. The percentage of calories from fat, saturated fat, and sodium were above levels recommended for most children. This shows that despite the body's innate mechanisms to keep your child on the right nutrition course, she can easily fall off the path. Our children are exposed to many more kinds of foods than we were as kids. Ready-to-eat snack and convenience foods and low-nutrient drinks have replaced the once-traditional snack foods of juice and crackers or milk and cookies. Much of what children learn about food comes from television; it is important for you to appreciate the impact this medium has on what your child eats. According to a 1985 Nielsen report, children aged 6 to 11 years watch approximately 26 hours of TV per week and see between 30,000 and 40,000 television commercials each year. Advertisers spend \$700 million to advertise during children's TV programming. Unfortunately, they are not trying to persuade your child to eat his peas and carrots. More likely, they are promoting cereal that contains 3 to 6 teaspoons of sugar per serving or juice products that carry pictures of fruit but actually contain only 10 to 15 percent real fruit juice. TV is not all bad, but studies clearly show that kids are at greater risk of obesity and are generally less active if they watch a lot of TV. It is now common for both parents to be working away from home. Working mothers often worry that the meals served in their homes are not as nutritious as in those of mothers who are at home full-time. The 1987-1988 Nationwide Food Consumption Survey also looked at the effect maternal employment had on young children's diets. Although a number of dietary problems -- such as a lower than recommended intake of calcium, iron, zinc, and vitamin E -- were found, it was not because more mothers were working. This survey's results indicated that working moms are doing just as good a job at feeding their kids as mothers at home but that there is room for improvement all the way around. Most households could do better at serving nutritious meals. FOOD AND ILLNESS All this useful information about nutrition and food preferences will most likely be set aside when your child becomes ill. One of the first signs of illness is loss of appetite. Fear, stress, and pain can also suppress appetite. A child who fears he may vomit is certainly not going to eat. A shot or a trip to the doctor are events that can create stress and kill your child's appetite. Pain from a sore throat or bad tummy-ache can squelch the desire for food, too. When illness turns off a usually robust appetite, don't panic. The body is prepared for this emergency. When your child does not eat, her body will automatically turn to the energy it has in reserve in the

form of a substance known as glycogen. If glycogen stores have been used up, muscle tissue can be changed to amino acids that can be converted into glucose and used for fuel. If absolutely necessary, the liver can turn stored fat into ketones and use this as fuel, too. While the body relies on its stored sources of fuel and nutrients, what you can do is offer fluids in the form of ice chips, water, or even fruit juice, if your child will drink it. In some cases of diarrhea or vomiting, the pediatrician may ask you to add a drink like Pedialyte. It contains minerals that may be depleted during prolonged vomiting or diarrhea. You'll read more about the need for fluid under specific problems in chapter 3. What is important for you as the parent to grasp is that good nutrition will count during illness, but it often cannot be fully supplied during illness: the time to worry about nutrition is before your child becomes ill. The well-nourished child will have a healthy supply of nutrients to draw upon when ill and may even be able to resist and fight off more illness.

**FOOD POISONING** Our children, because of their small size and developing immune system, can be seriously harmed by food poisoning. USFDA officials estimate that we experience some form of food-borne illness every 2 years, but we don't identify it as such. Symptoms, which we attribute to the flu, can include nausea, vomiting, diarrhea, fever, and breathing difficulty. Always alert your doctor when you do suspect food poisoning, because in some cases, it can cause death. So how do you reduce your child's food-poisoning risk? Follow this simple rule: keep hot food hot, cold food cold, and always keep the kitchen clean. Bacteria causes food poisoning. Cooking kills bacteria, and refrigeration prevents bacteria from growing. At room temperature (anywhere between 60deg;F and 125deg;F), bacteria will multiply like crazy. Meat, poultry, fish, and dairy are the foods bacteria like best, but even unwashed fruit and vegetable skins and dishes made with mayonnaise can carry unwanted bacteria. Cook all foods to at least 165deg;F. (Get a small thermometer to take the guesswork out of barbecuing and roasting.) This goes for reheated food, too. Keep your refrigerator temperature at 40deg;F and your freezer at 0deg;F. Keep cold food in the refrigerator until ready to serve, cook, or reheat. Thaw frozen food in the refrigerator and then cook it the some day. Cook ground beef, turkey, or pork until all the pink is gone. When using a microwave oven to cook or reheat, make sure all parts of the meal are equally cooked through. To keep school lunches safe, place a small freezer pack in with cold foods. Keep eggs in the refrigerator, throw out eggs with a cracked shell, and cook eggs until they aren't runny. If your kids love eating raw cookie dough, use a liquid egg substitute when baking instead of fresh eggs. These products are pasteurized and do not carry the risk of salmonella as do raw, fresh eggs. Keep it clean. Cross-contamination from hands, dirty cutting boards, and countertops is a common way to spread bacteria. Finally, don't rely on your nose to sniff out contaminated food. Some foods can be tainted even if they are not smelly.

**PUTTING IT ALL TOGETHER** Food is a great medium through which to express your love and concern for your family. The Norman Rockwell image of one big happy family gathered around the table for a meal might be our ideal, but times have changed, and along with it, the family meal. A relaxed Friday-night family dinner at the local pizza parlor complete with laughs and hot, yummy pizza certainly has a place in family life today. Though a good meal should include lots of vegetables, grains, and the like, there is certainly room for all foods kids love, too, like chocolate-chip cookies and ice cream. Even parents who are very conscientious about their children's diet should experience the pleasure of the occasional break in routine. The best way to know how well you are doing at providing healthful meals and how well your child is doing at actually eating them is to keep a 24-hour food diary and compare it to the suggested servings on the Food Guide Pyramid. Remember to include the foods eaten at the day-care center, school, or at parties. Include beverages, too. It is the rare child (or even adult) who eats exactly as recommended, but the food diary can plainly point out just how well your child is doing at getting the foods -- from all the food groups -- that she needs. It will also help you keep track of the amount of foods consumed in the less nutritious fats, oils, and sweets group. Though you might think your efforts at healthy eating often go unappreciated by your child or are even looked upon with disdain when you serve fruit instead of candy as snacks, the type and quality of food you serve your child can have a profound effect on his health for all his life.

**MAKING IT LOOK GOOD** Special foods make a child feel cared for, and so can decorations and fancy utensils. We have a set of sturdy, inexpensive cut-glass goblets out of which my kids love to eat pudding and ice cream when they're sick. Of course, straws are always popular, and so is being allowed to eat on the couch or in bed -- just select food items that are not likely to be too messy or spill too easily. A lap tray, available at many stores that sell household goods, can be a good investment. It will be used many times over the years. Try some of these decorative suggestions: Serve a pear half with a face made of raisins and with carrot-curl hair. Serve pudding or ice cream in an ice cream cone. Use candy canes as swizzle sticks in warm tea or milk shakes. Serve food on fancy plates or even birthday- or party-type paper plates. Put flowers on the food tray. Use pretty place mats and napkins.

**VITAMIN AND MINERAL SUPPLEMENTS** The official position from the AAP and other medical organizations is that healthy kids don't need vitamin and mineral supplements. A well-balanced diet is recommended as the source of all nutrients. The only exception to this is if a child is anorexic, eats a very poor diet, or is on such a restrictive diet for obesity that nutrient intake is likely to be low. Children with chronic diseases, such as cystic fibrosis or inflammatory bowel disease (IBD), may need a supplement. In limited cases, specific nutrients are recommended -- for example, vitamin B-12 for children eating very strict vegetarian diets, iron for the treatment of iron-deficiency anemia, and fluoride if there is insufficient fluoride in the local water supply. Though health survey results do not find full-fledged nutrient deficiencies in healthy kids, parents still worry about their children's diet and often give vitamins "just for insurance." Recognizing that

parents are likely to turn to multivitamins, the Food and Drug Administration (FDA) regulates the nutrient content of supplements marketed to children. Children's multivitamins must keep nutrients in a range of 25 to 150 percent of the recommended dietary allowances for any given nutrient. This means that you can give your child a children's multivitamin mineral supplement in the directed amounts without fear of giving him a dose too large for his small body. Single-nutrient supplements are not recommended for children except in the specific situations mentioned above. Excessive doses of some nutrients can be harmful: vitamins A and D can be toxic; niacin can cause flushing and irregular heartbeat; vitamin B-6 can cause numbness and neurological disorders. You must be alert to the danger of accidental poisoning from supplements because to kids, vitamins look like candy and must be kept out of reach, just like any medicine.

### VEGETARIAN EATINGS

Some 12 million Americans now say that they eat a vegetarian diet, which means that a lot more kids than ever before are eating that way, too. A vegetarian diet can be adequate in all nutrients, including protein and iron. Surprisingly, vegetarians do not have a greater risk of iron-deficiency anemia even though red meat is one of the best sources of this mineral. Children who are not meat eaters get their iron from beans, potatoes, dried fruit, and iron-fortified cereals, and their bodies probably become very efficient at absorbing all the iron they do ingest. Vegetarian families that include dairy and egg products in their diets can easily get the right balance of protein and the essential vitamin B-12. It is only the very, very strict vegan diets -- which eliminate meat, poultry, eggs, and all dairy products -- that are likely to be at risk of nutrition deficiencies. To select a healthy vegetarian diet, use the Food Guide Pyramid and choose beans or eggs instead of beef, or tofu instead of poultry, and include the recommended servings from the milk, yogurt, and cheese group.

A report released in 1993 called "Pesticides in the Diets of Infants and Children," issued by the National Academy of Sciences, suggests that the American food supply and the pesticides it carries may be contributing to serious illness, such as cancer, nervous-system injury, and disorders of the immune system. Your child is at greater risk of harm from pesticide residues than you are because (1) children eat more food relative to their size, (2) they are still growing, and (3) they will have a higher lifetime exposure than you because more pesticides are used now than when you were a child. The best strategy for parents is to minimize a child's intake of pesticides. This is no easy task, given that pesticide residues are invisible. Here are some practical tips you can try:

- Wash all produce. Use a scrub brush on all foods with edible skins, such as carrots and potatoes.
- Peel waxed fruits and vegetables, such as cucumbers and apples. Wax, used to make the food look appealing, can seal in pesticides.
- Discard the outside leaves of lettuce, kale, and cabbage.
- Buy domestic produce. Pesticides on imported produce may carry illegal pesticide residues. Ask your produce market to label the origin of the food.
- Trim fats from meats; do not eat poultry skin. Pesticides are often carried in the fatty part of foods.
- Fish and seafood products contain pesticide residues. Cod, pollock, haddock, and canned tuna are better choices.
- Serve low-fat dairy products after your child is 2 years old. (If your child is having trouble gaining weight, ask the child's doctor about the use of low-fat dairy products.)
- Buy certified organic foods when possible. These foods often look imperfect, but they taste good. They often cost more than nonorganic foods, but purchasing them sends a message to farmers that there is a market for organic produce.
- Shop at farmers' markets when they're open for the season. Locally grown and sold foods may not carry the preservatives that are required when foods are shipped.
- Vary your child's diet as much as possible. This way, if it turns out that a particular food carries pesticides, at least you won't have been serving tons of it for years.

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