

Ask the Pediatrician: Is it OK to make baby food at home?

19 April 2021, by Dr. Jaclyn Lewis Albin, The American Academy Of Pediatrics



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Q: Is it OK if I make food for my baby at home?

A: Yes. You may find several benefits to feeding your baby homemade foods.

It can be less expensive than the <u>baby food</u> found in grocery stores, for example. It can let your child enjoy baby-friendly versions of foods he or she sees the rest of the family eating, and it may be easier than you think. All you need is a blender, <u>food</u> processor or even a good hand-held mixer.

The American Academy of Pediatrics recommends exclusive breastfeeding for about the first six months. Before your child starts solid foods, be sure he or she is developmentally ready. Your baby should be able to sit in a highchair or feeding seat with good head control and should show interest in food, opening her mouth on her own. Your pediatrician can help guide you.

When making food, first think about what's already on your menu. There's probably no need to make a special item. After introducing individual foods, you

may want to try combinations. Don't worry too much about ratios—there is no magic formula. And try not to overthink which solids and how much of each to give your baby. (Remember that breast milk or infant formula still provides the vast majority of calories and nutrients in the first year.)

Instead, consider balancing several types of foods to offer different nutrients. You may find that your baby only eats a few bites of something new, so plan to store leftovers for later.

The latest USDA Dietary Guidelines for Americans encourage parents to "make every bite count" by having every food in an infant's diet support nutrition and growth needs. Think of each bite as a chance for your child to explore the color, taste and texture of a nutritious food.

When offering your baby new foods, try to include fruits and vegetables in all the colors of the rainbow. Also offer good sources of protein (such as beans, chicken, fish, and yogurt), fat and iron (for example, iron-fortified oat cereal or meats). Serving a variety of foods also is key to helping lower the risk of toxic element exposure, including cadmium, mercury, lead and arsenic.

Early exposure to common food allergy culprits, such as eggs, soy, gluten, dairy, nuts and fish, can lower the risk of <u>babies</u> developing allergies to them. Try mixing a small amount of peanut butter with oatmeal cereal, for example, or offer bites of scrambled eggs. You can also introduce yogurt or shredded cheese once your baby is eating solids, along with small bites of a well-cooked white fish like tilapia or cod. If your child has severe eczema or an egg allergy, be sure to discuss introduction of these foods with your pediatrician.

Do not feed honey to infants under age 1, because it can contain bacteria that could make them sick. Also beware of foods that may be a choking hazard, such as nuts or raw carrots. You can offer



your baby water with meals, but it is best to avoid all other beverages except breast milk or formula.

You can prep in advance by cooking in batches and storing the pre-made baby food. This can make life easier during busy days. Consider freezing the leftovers. An ice cube tray is a handy way to freeze leftover food. Each cube is about one ounce of food. You can transfer to a plastic food container or bag and label it. Plan to eat frozen baby food within three months by reheating on the stove or in the microwave.

Some families choose to skip pureed foods and offer babies small bites of regular table foods, typically without utensils. This allows infants who reject purees or prefer texture to feed themselves, even choosing what and how much they eat.

It's a good idea to talk with your pediatrician before starting. Your child should show signs of general developmental readiness for solids, plus the ability to bring her hands to her mouth.

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