Introduction to solid foods

Here’s our guide for NCT practitioners to some of the background to this topic, including evidence, controversies and teaching tips.

What do parents want to know about solid foods?
Parents want to know which foods to introduce and when. They want practical information on which foods will be safe and enjoyable for their baby, and which ones will support their baby’s development, health and growth. They may be aware of conflicting and confusing advice and practice, and lack confidence in their own judgment.1

What is current official guidance about when to introduce solid foods?
Present guidance in the UK is that babies’ introduction to solid foods ‘should start at around six months old’,1 following endorsement by the UK’s Scientific Advisory Committee on Nutrition (SACN)2 of a systematic review from the World Health Organisation in 2001, also published as a Cochrane review in 2002. The review concluded that the ‘optimal duration of exclusive breastfeeding’ was six months.3

The guidance allows for some flexibility. If a baby’s carers decide (or are advised) to give solids sooner than six months, then the lowest safe age, the guidance states, is 17 weeks.

Before 2003, guidance from a 1994 report advised parents to introduce solid foods between four and six months old.4

What do parents do in practice?
The Infant Feeding surveys carried out every five years in the UK since 1975 provide high-quality observations on many aspects of feeding, including weaning.

The latest survey shows mothers tend to introduce solids earlier than six months.5 Just over half of all babies have had solids by the age of four months, and 75% have had solids by five months. This is, however, later than earlier years.

What questions do parents raise about the introduction to solids?

Sometimes, questions are raised about whether the guidance is realistic in practice, given that so few parents follow it. The evidence base of the guidance is sometimes questioned, too.

NCT practitioners hear from parents that some healthcare professionals advise solids earlier than six months as a response to night waking. There is evidence that introducing solids does not affect the length of time babies sleep.6 Mothers may be told that the research behind the ‘six months’ guidance is only applicable to the developing world, but the data was collected from different settings, from the developed and developing worlds.3,7

It is also sometimes suggested that ‘they’ are about to change the guidance again, or even that it has already changed. SACN has guidance under review at all times, but there are no changes planned at the time of writing.

The current guidance is well established. The updated Cochrane review of 2012 reached the same conclusions as in 2002, that six months exclusive breastfeeding should form the basis of public health guidance.8

Does the guidance apply to all babies?
Yes. Although there are no recent systematic reviews which include evidence for babies who are formula-fed, or both breast-fed and formula-fed, the guidance is intended for all babies.

Does it have to be precisely ‘six months’?
No. Sometimes parents interpret the guidance as a ‘cut-off’ date, almost like a rigid ‘target date’. But babies are likely to be ‘ready’ for solids at different ages, and ‘around six months’ gives scope for flexibility. Other important ‘readiness’ factors besides the baby’s age are development, behaviour and growth. Parents may need to be supported in ‘watching their baby’ rather than ‘watching the calendar’.

Is there a risk to babies’ health if solids are introduced too soon?
It’s clear that solids before 12 weeks are of no nutritional benefit, and there is evidence linking solids as early as this to a range of health problems, including coeliac disease, kidney damage and allergy.8 The lowest safe age for solids, SACN concluded, is 17 weeks.

The effect of solids introduced after four months but before six months is less clear. Current studies don’t look at the different outcomes for babies of solids offered at 19 weeks compared to, say, 23 weeks.

From a physical health point of view there is certainly no harm in waiting until six months, and there may be benefits. We know breastfeeding still provides all a baby needs in terms of nourishment, and there continues to be a protection against infection. The evidence on allergy and atopy – asthma and eczema – is more confused, and we don’t have the evidence to state with certainty that solids before six months (but after 17 weeks) increases the risk or worsens any existing condition.

Mothers of healthy, thriving babies should certainly be supported and enabled to continue to breastfeed exclusively to six months.

It’s helpful for parents to know that if a baby, breastfed or formula-fed, is given solids before six months, but after 17 weeks, research suggests that any health risk is likely to be very small. For good health and nutrition, the solids should be limited and gradual, so they don’t start taking the place of milk.

How do parents know if their baby is ready for solid food?
Healthy, term babies tend to show the following behaviours and signs of development at around six months of age, which, when occurring together, indicate readiness for solid foods:

- They can hold their head steady, and can stay sitting up.
- They can pick things up and put them into their mouth (development of hand-eye co-ordination).
- They can swallow food easily (so they have grown out of the tongue-thrust movement that tends to push food out of the mouth).9

The iron stores babies are born with are depleting, and although there is iron in both breastmilk and in formula, at around six months babies start to need more iron from their diet.10
tips on:
  • Getting babies used to the idea of eating
  • Avoiding added sugar, salty and fatty foods
  • Before six months, avoiding foods that contain wheat, gluten, nuts, peanuts, peanut products, seeds, liver, eggs, fish, shellfish, cows’ milk and soft or unpasteurised cheese.
  • What to do if a baby chokes
  • Food hygiene
  • Vitamin supplements

What’s baby-led weaning?
Baby-led weaning or self-feeding involves giving babies ‘finger foods’ in the right size and shape to hold, rather than spoon-feeding with purees or mash. NCT’s First 1,000 days study shows that most parents give a combination of finger foods and purees.12

Which is the best way to wean?
This is a matter of personal choice, and not nutrition. Self-feeding means the baby’s appetite is in control, rather than the person offering the spoon in spoon feeding. Self-feeding supports the baby’s development of co-ordination, and his explorations of taste and texture. However, there is no good evidence of different health or development outcomes from self-feeding or spoon-feeding. So far, studies that have looked at this are quite weak.13 Spoon-feeding is a more efficient way of ensuring sloppier foods, like yoghurt, or stews, or cereals with milk, which is the best way to wean? ••

Parents need to know:
• Guidance says that solid foods ‘should start at around six months’.
• The same guidance applies, whether their baby is formula-fed, breastfed or both.
• Observation of their baby is a better guide to readiness than a date on the calendar.
• There is no right or wrong way to offer solid foods and parents can follow whatever method they and their babies prefer.

Tips and teaching points
• NCT offers Introduction to Solids workshops.
• NCT works with Baby’s Taste Journey to support parents’ learning about nutrition beyond the first stages14
• NCT breastfeeding counsellors can support and inform parents with concerns about introducing solids.
• There is no need to reduce a baby’s formula feeds or breastfeeding in the first weeks and months of solids.
• As the weeks go by, a formula-fed baby should be offered less milk as the solids part of his diet increases. A breastfed baby will regulate his intake anyway.15,16

When parents want information
Some parents want information about when and how to wean, and which foods to offer. Managing these expectations may be a challenge for practitioners:
• We want to encourage parents to feel confident to make decisions to meet their baby’s needs.
• NCT practitioners can support parents to think through the various options.
• Providing them with information can help them to feel knowledgeable and confident.
• We can acknowledge that it can feel stressful to have to make so many decisions.
• We can refer parents to a breastfeeding counsellor, a health visitor, GP or a dietician.

References
1. Start4Life. No rush to mush – the three signs that show your baby is ready for solid food. Available from: http://www.nhs.uk/start4Life/Pages/babies-introducing-solid-food.aspx

Start4Life. Introducing solid foods