



Guide to Whole Health - 6 Months

Weight today:

Length:

Head:

Development:

- Your baby:
 - Is probably rolling over both ways.
 - Looks for a toy when it drops out of sight.
 - Has no head lag when pulled to a sitting position.
 - Sits up with minimal support (often like a "tripod" with one hand on the ground for support)
 - Tries to rake small objects to pick them up.
 - Tries to feed herself a little.
 - Smiles, laughs, tries to imitate sounds. He may be saying "ma-ma" or "ga-ga"
 - Likes social games like Peekaboo.

Feeding

- Continue to breastfeed or give formula or donor breastmilk. **Remember that breastmilk or formula is the primary source of nutrition until 12 months of age.**
- Please review the discussion of solid food introductions from the 4 month visit. We highly recommend introducing "tastes" of potentially allergenic foods between 4-11 months of age. This includes peanuts, tree nuts, dairy products and shellfish.
- At 6 months of age most babies are ready to move beyond "tasting" food and are ready to eat 1/4, 1/2 or full jar-sized portions.
- **Signs that your baby is ready for solid foods** (beyond "tastes"):
 - Is able to sit unsupported
 - Can push food away
 - Is interested in food
 - Does not gag on foods or use his tongue to thrust food out of his mouth.
- We **do not recommend introducing rice cereal as a first food**. Rice cereal has almost no nutritional value and can be constipating. Here are some great first foods (purees):

Avocado	Squash	Yams and Sweet Potatoes	Applesauce or Pearsauce
Banana	Prunes	Broccoli	Plums

- After these "first foods" here are some other excellent "next" foods (purees or BLW):

Quinoa cereal	Kale	Peas	Collard greens
Cooked beans	Potato	Asparagus	Lentils
Oatmeal	Cabbage	Millet (cooked and made into a cereal)	String beans
Nectarines, apricots, peaches	Carrots	Blueberries, blackberries and cherries	Beets
Spinach	Kiwi	Buckwheat	Humus

- We **highly** recommend incorporating **iron-containing foods** within the first month of solid food introductions. Babies need additional iron at around 6 months - it is very important to include iron containing foods early to prevent iron-deficiency anemia. (Bold items are highest in iron.)

Black beans	Grass-fed beef, lamb or wild game	Turkey	Spinach
Other greens: beet greens, swiss chard, kale, brussel sprouts etc.	Blackstrap molasses	Lentils, split peas or lima beans	Prunes (or prune juice), dates

- **How to introduce solid foods:**

- We recommend **starting with purees**, either store-bought or homemade, for the first 1-2 feeds with your baby. Purees allow you to assess food readiness. If your baby spits out the spoon with his tongue, refuses foods, turns his head or exhibits poor head control then he may not be ready for solid foods just yet. Try again in another week!
- After the first 1-2 times you can continue with purees or move on to **Baby Led Weaning**^{*}. Here at Naturopathic Pediatrics we are big fans of Baby Led Weaning. Baby Led Weaning essentially lets babies learn to feed themselves immediately. Rather than pureeing foods you give your baby food in its "whole" form. Your baby will learn to grasp the food, bring it to her mouth and "gum" or "chew" it. This is helpful for multiple reasons: 1) your baby controls the rate at which food enters her mouth, which prevents over-feeding, 2) your baby is more able to spit out or gag on food that she feeds herself, which actually prevents choking (this is often opposite of what you would imagine!), 3) babies are more excited and engaged in the feeding process, which encourages healthful eating habits. You can give your baby any healthy non-chokable food. Here are some examples:
 - Roasted or steamed vegetables (like broccoli, sweet potato fries with no salt, cooked potato pieces, steamed carrots, broccoli stems, etc.)
 - Chicken drumsticks with most of the meat taken off
 - Homemade turkey or lean beef meatballs (we strongly recommend organic meats)

- Raw slices or chunks of banana, avocado, peaches, pears, melon, cucumber
- Cooked pasta (with or without sauce) or cooked rice
- Cooked beans (delicious if they have been cooked in a broth or soup)
- Scrambled egg or scrambled egg yolk. (Egg yolk in particular is high in choline and other nutrients that are excellent for babies.)
- Breadsticks
- **Foods NOT to give to babies**
 - Salted foods
 - Honey or corn syrup
 - Shark, swordfish or marlin, tuna more than once per week (due to high mercury levels)
 - Cheeses made from non-pasteurized milk
 - Sweets like cookies, candies, cakes or soda or juice
- **Food sensitivities.** We recommend introducing 1 new food at a time, with at least 3 days in between each new food. If your child has a food reaction/allergy/sensitivity please inform your physician at the next well child visit. Stop the food and wait for all reactions to subside before introducing new foods. If your child seems to react to most or nearly all foods please let your physician know. Signs of food reactions are:
 - Rashes around the mouth or anus
 - Diarrhea, blood or mucous in stools
 - Severe gas, bloating, constipation or colic-like symptoms
 - Skin reactions like eczema, rashes, itching or redness, or dark circles under the eyes
 - Change in personality or loss of newly acquired developmental milestone
- **Drinking from a cup.** We recommend introducing a cup! Let your baby sip water or breastmilk from a cup with help. 1-2 ounces of water with meals can help sensitive tummies digest solid foods better.

Sleep

- By 6 months of age babies typically no longer "need" to feed during the night. However, our experience is that most breastfed babies typically wake 1-2 times per night at 6 months, and continue to wake at least once per night until around 12 months of age. If sleep is a problem you may want to review our sleep-training guidelines in the 4 month well child guide.
- **Average awake time for babies who are 6 months is no more than 2.5 hours.** You should place your baby down for a nap whenever they show signs of fatigue (rubbing the eyes), but no later than 2.5 hours since their last nap/sleep.
- Bedtime rituals become very important by 6 months. Allow time for bath, stories, a gentle massage, and snuggles before bedtime. Keep this routine consistent every night.
- By 6 months **the risk of Sudden Infant Death Syndrome has decreased dramatically.** Some babies who are not cosleeping with Mom or Dad may want a "transitional object" like a blanket or teddy bear. Some guidelines for safety: stuffed animals and blankets must be small enough to not cover his entire face, must not have any removable objects like buttons or attachable toys, and

must have no chokable parts. Speak with your child's physician first before introducing a "lovey" - for some babies this may not be safe.

Safety

- Your baby will be on the move very soon! Baby-proofing is now a necessity!
 - **Install electrical outlet covers.**
 - **Put away small objects** and make sure **sibling's rooms and toys are secured.**
 - Put **safety gates at the top and bottom of the stairs.**
 - Store poisons, herbs, medications and supplements in a **locked cabinet.**
 - Keep the temperature in your **hot water heater below 120 degrees F** to prevent scalds.
- If you are taking your baby outside please keep her **out of the sun** whenever possible. Dress her in a hat with a brim and clothes that cover the arms and legs. Keep your baby in the shade. If this is not possible then you can apply a **safe sunscreen.** We highly recommend checking out the sunscreen guide at Environmental Working Group which is updated yearly. (www.ewg.org.) In general the safest sunscreens are those that include zinc oxide - these may not look the prettiest (your child will have a white tinge) but we strongly urge you to consider safety over having a picture-perfect child.

Vaccines

- Again, **we want to make it clear that we support families regardless of whether/how they choose to vaccinate.** It is our goal to provide unbiased information on vaccines to allow parents to make a choice they feel good about!
- The following vaccines are recommended by The Advisory Committee on Immunization Practices (ACIP) at 6 months: **Rotavirus, IPV, DTaP, Hib** and **PCV.** The **Hepatitis B** vaccine may be given during this visit. Additionally the **seasonal influenza vaccine** may be given to babies 6 months and up during the flu season.
- **Vaccines given this visit** (Circle administered R or L leg)
 - **DTaP** R / L
 - **IPV** R / L
 - **Rotavirus** (oral)
 - **Hib** R / L
 - **PCV** R / L
 - **Hepatitis B** R / L

What to expect from your baby between 6 months and 9 months:

- He will have a **Wonder Week** at around 6.5 months and again near 9 months (it may be more difficult to accurately time Wonder Weeks as your little one gets older. See the book for more information!)
- She will say sounds like bah-bah and dah-dah, will feed herself small pieces of soft food, will sit up well and stand with support, may begin to crawl, will develop separation anxiety, and will try to imitate your sounds.

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