



TEN STEP TUESDAY

Baby-Led Weaning Part I

Written by Alyssa Zimmerman

What is Conventional Feeding?

- Often starts as early as 4 months
- Parent/caregiver feeds baby from a spoon
- Starts with cereal and/or pureed foods
- Then progresses to finger foods

What is Baby-Led Weaning (BLW)?

*note: weaning here does not imply weaning away from breastmilk/formula, but rather weaning onto solid foods

- First coined by Dr. Gill Rapley and Tracey Murkett in their book *Baby-Led Weaning: The Essential Guide to Introducing Solid Foods*
- "Letting your child feed themselves from the very beginning."
- Offering graspable foods from the onset and letting baby pick up with his/her hands

Big concepts include sharing mealtimes, offering healthy foods, making sure only baby puts food in his/her mouth, trusting baby to know whether to eat, how much to eat, and how quickly.

When to start BLW?

At or around 6 months – when sitting upright unassisted, able to grasp objects and bring to mouth, diminished "tongue thrust reflex", shows interest in food. BLW does not replace breastfeeding on demand or formula feeding appropriately until 1 year of age.

**Some special circumstances such as dysphagia, oral ties, developmental delays, hypotonia, etc. may contraindicate BLW

Advantages:

- Convenience
- Autonomy - parents believe baby is capable
- Cost - less expensive than buying "baby food"
- Eat together as a family
- More diverse foods/flavors/textures
- Enhances fine motor skills
- Greater stimulation
- Better appetite regulation

Is BLW Safe? Yes.



Brown, A. (2017) 'No difference in self-reported frequency of choking between infants introduced to solid foods using a baby-led weaning or traditional spoon-feeding approach', *Journal of Human Nutrition and Dietetics*

Table 4 Frequency of choking episodes and association with weaning group

		Strict BLW	Loose BLW	Traditional	Significance
Ever choked (% yes)	Any food	11.90	15.50	11.60	$\chi^2 = 8.006, P = 0.091$
	Finger food	11.05	15.46	11.21	$\chi^2 = 19.04, P = 0.087$
	Lumpy puree	12.9	10.4	10.3	$\chi^2 = 11.44, P = 0.178$
	Smooth puree	3.44	1.35	2.10	$\chi^2 = 4.868, P = 0.301$
	Overall	1.94 (1.16) (n = 49)	1.73 (1.41) (n = 66)	1.83 (0.96)(n = 42)	$F_{2,153} = 7.901, P = 0.001$
Number of choking episodes (mean & standard deviation)	Finger food	1.57 (1.03) (n = 47)	1.21 (0.826) (n = 67)	1.76 (0.971) (n = 38)	$F_{2,147} = 4.417, P = 0.014$
	Lumpy puree	0.32 (0.57) (n = 40)	0.54 (0.80) (n = 57)	1.18 (1.16) (n = 39)	$F_{2,131} = 6.46, P = 0.002$
	Smooth puree	0.71 (0.75) (n = 7)	0.58 (0.94) (n = 26)	1.14 (1.21) (n = 37)	$F_{2,68} = 0.714, P = 0.493$

Ever choked: chi-squared; Frequency of choking: multivariate analysis of covariance. BLW, baby-led weaning

For more information contact

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A word about Choking Vs. Gagging:

Gagging

- Protective reflex
- Bringing food forward in mouth
- Noisy
- Expected
- No intervention necessary

Choking

- Blockage of the airway
- Little to no sound
- May notice color changes (lips/mouth turning blue)
- **Intervention is necessary**

Choking Prevention

- Baby has met solid foods readiness prerequisites (listed first page)
- Always eating in an upright position
- Limited distractions
- Allowed to eat at own pace/not rushed
- Safe foods (no whole nuts, round foods (grapes, cherry tomatoes, hot dogs) should be cut in half, etc.)
- Always feed under supervision
- First aid training for caregivers

Breastfeeding and BLW

- A natural progression - Breastmilk should remain the primary source of nutrients until 1 year old!
- Babies will likely breastfeed with the same frequency as before any complementary foods were introduced
- Offer breastfeeding prior to solids to protect supply and BF relationship

Lactation Consultants and Pediatricians should be ready to answer caregiver questions about baby-led weaning! Educate parents on basic principles of BLW, readiness to begin, how to maintain supply/continue breastfeeding when this is the goal, safety concerns, and other resources!

References:

Webinar, Babyled Weaning: What the Lactation Professional Should Know by Meghan McMillin MS, RDN, LDN, IBCLC | Baby-Led Weaning: The Essential Guide to Introducing Solid Foods by Dr. Gill Rapley and Tracey Murkett

Gagging vs. Choking
learn the difference - save a life

Gagging:	Choking:
<ul style="list-style-type: none">-Child will open mouth and thrust tongue forward. Face may appear bright red.-Child will sputter and cough. (Good signs- means they are working it out.)	<ul style="list-style-type: none">-Child will begin to turn blue-Child will be silent & unable to make noise-Child may begin coughing if it is a partial blockage. (This is a good sign they are clearing their passage)
Children have a very heightened gag reflex, designed to keep them safe from choking.	If child is silent and turning blue, proceed using standard first aid measures to dislodge the blockage
DO NOT INTERFERE WITH A GAGGING CHILD - THIS CAN LEAD TO ACTUAL CHOKING.	Learn more about first aid measures & find a class: www.redcross.org
LET THEM WORK IT OUT!	

REMEMBER:
Loud and Red, let them go ahead.
Silent and Blue, they need help from you!

This advice brought to you by a mother and deputy coroner. Choking deaths are an unfortunate reality in her line of work but can be preventable. Please share this information! For more advice and insight visit www.askacoroner.com & find her book Spoiler Alert: You're Gonna Die

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