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## FORFWORD ≈

Welcoming a new baby into the world is a joyful time. As new parents, you want the very best for your child in the years ahead. But as you may know, the world your child is entering is one with a significant global health problem – the rapid rise of metabolic and allergic disease.

In Australia, 65% of adults and 25% of children are overweight or obese, based on their BMI. Around one million of us have type 2 diabetes and it's the fastest growing chronic disease. Approximately 1 in 10 adults and 1 in 9 children in Australia have asthma. Food allergies affect 5% of children. In the past decade, anaphylaxis (serious and life-threatening allergic reaction) has increased five-fold in children four years old and under, with hospital admissions doubling.

For many of these diseases, it's not genes, but environmental factors in the earliest stages of life – including nutrition – that are most influential. During pregnancy and through infancy, there are critical times when a foetus and baby are particularly susceptible to these environmental factors.

Of all the environmental variables, nutrition is the one thing you can influence most. Evidence continues to grow that good nutrition not only helps maximise growth and development in early life, it also reduces risk factors for numerous diseases in later life.

In April 2014, a multidisciplinary panel of expert researchers and clinicians was convened to review this evidence and from it, develop practical recommendations for parents and healthcare professionals. The review framework, perspectives and recommendations were agreed by the panel, independent of any external influence. Its full report can be downloaded from www.earlylifenutrition.org.au

This booklet summarises the panel's key recommendations as clear nutritional guidelines that are easy to put into practice. It is not intended to replace advice from your own doctor or nurse.

We hope the recommendations will help you take advantage of the critical window of opportunity now open to you, while the foundations of your child's future health are being laid.

ANZ, EARLY LIFE NUTRITION, WORKING PARTY

# OPTIMISE YOUR BABY'S FUTURE HEALTH

Most of the dietary advice parents and carers receive is to help avoid health issues in their child, or minimise risk. This booklet is different. It has been produced specifically to help you *optimise* the future health of your child.

Recommendations are grouped according to key stages of your infant's development – from before pregnancy right through to toddlerhood – to provide a simple guide to what you can do at every stage.

Each recommendation is presented in a way to help you understand:

- The principle behind the recommendation
- How it helps lay the foundation for your child's long term health
- Exactly what you can do, in practical terms

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- 5. Avoid alcohol
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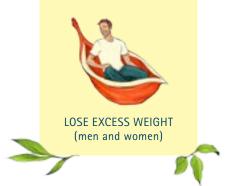


# Successful conception and healthy pregnancy

Knowing whether your levels of essential nutrients and vitamins are adequate is the first step in ensuring you maintain them at optimal levels for your child's health. It's also very important to control existing health conditions like asthma and chronic kidney disease, and particularly type 2 diabetes, before and during pregnancy, to improve the odds of a healthy birth.

- Ask your healthcare professional to check if you're deficient in any particular nutritional areas. It may also be helpful to review Australian guidelines for healthy eating.
- With your doctor's help, aim to get any existing health conditions under control.
- If you have type 2 diabetes, ensure you achieve good glycaemic control before conception, and maintain it throughout pregnancy.







# Fertility and healthy foetal development, and reducing your child's risk of diabetes and obesity

Increased body mass index (BMI) in men, as well as obesity in women, can lessen the chance of the female partner becoming pregnant. Studies have also linked male obesity to problems with embryo and foetal development, and miscarriage.

A mother who is obese when she becomes pregnant is more likely to develop gestational diabetes during pregnancy – increasing the risk of diabetes and weight problems for your child as well.

- If you, or your partner, are overweight, support each other in your efforts to get to a healthy weight, before your baby is conceived.
- Losing 5–10% of body weight increases an overweight woman's chances of becoming pregnant, and has other important health benefits.
- Women with a BMI of 30kg/m2 or more should definitely aim to reduce weight.
- If required, talk to your healthcare professional about getting the right balance of nutrients for safe weight loss, as well as appropriate physical activities.



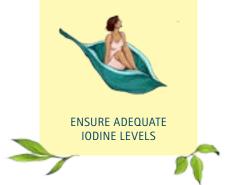


## Healthy development of the central nervous system

Studies have linked a deficiency in maternal folic acid to development problems of the foetus, which can result in spina bifida or other conditions in your child.

- Take a folic acid supplement for at least one month before conception. The recommended daily intake is at least 400µg/0.4mg. (Folic acid should then be continued for the first trimester of pregnancy only. There's no evidence of benefit after this).
- If you're taking anticonvulsant medication, are overweight, have type 2 diabetes, or have previously had a child with neural tube defects (NTD), ask your doctor about your requirements.



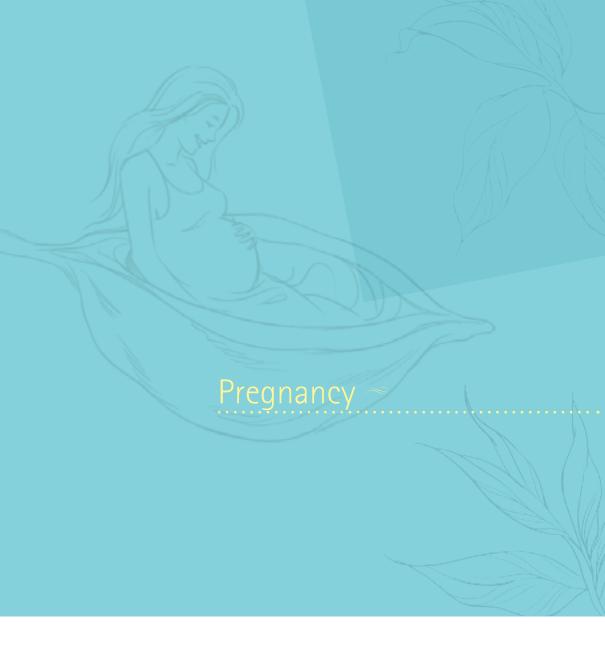




# Healthy thyroid function and mental development

A severe lack of iodine can impair mental and physical development in an unborn child, and sometimes lead to pregnancy loss. Even a mild or moderate deficiency in their mother will affect an infant's thyroid function, and possibly their mental development.

- Extra iodine is recommended while planning pregnancy, throughout pregnancy and as long as you breast feed.
- The recommended daily extra intake is 150μg/0.15mg.
- Women who have been diagnosed with a thyroid condition should check with their doctor before taking extra iodine.
- Women who eat seaweed soup daily should also seek advice, as supplementation
  may lead to excess iodine and affect thyroid function.







# Healthy pregnancy, birth weight and brain development

There is no safe level of alcohol consumption during pregnancy. It's linked to miscarriage, low birth weight and 'foetal alcohol syndrome' (which damages a child's intellectual development).

- Avoid alcohol altogether.
- Ask your healthcare professional for support and resources if you need it
  - they should be happy to assist you.





# Reducing the risk of obesity, heart disease and type 2 diabetes

Putting on too much weight can lead to high (or low) birth weights, and increases your infant's risk of diabetes and obesity in later years. Steady weight gain during pregnancy is normal, and important for your health and your baby's – but it's important to achieve this through a healthy, nutrient rich diet.

### PRACTICAL ADVICE

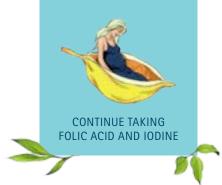
- Your appetite will probably change during pregnancy. Remember, it's your nutrient intake that needs boosting, focus on nutrient rich foods.
- Get weighed regularly by your healthcare professional, and discuss any issues.

#### RECOMMENDED WEIGHT GAIN DURING PREGNANCY

Pre-pregnancy body mass index	Recommended total weight gain
Less than 18.5kg/m²	
18.5 to 24.9kg/m²	
25 to 29.9kg/m²	
More than 30kg/m²	5 to 9kg

Focus on healthy eating, and don't diet while pregnant unless you get advice and supervision from your doctor, as it may damage the health of your unborn child.







# Neurological and mental development and thyroid function

Inadequate folic acid during the first 12 weeks of pregnancy can affect central nervous system development and cause conditions like spina bifida in your child, while iodine deficiency may hinder their mental development and affect thyroid function.

- Take a folic acid supplement for at least a month before conception, and continue taking
  it for the first trimester of pregnancy. There's no need to take it beyond this point.
- You should take a supplement of 150/0.15mg of iodine each day (unless you have a pre-existing thyroid condition or consume seaweed soup daily, in which case you should ask your doctor).







# Brain development and reduced risk of cardiovascular and allergic disease

Omega-3 fatty acids are important for foetal development, including brain development. Dietary omega-3 also has anti-inflammatory benefits that can aid metabolism – helping reduce the child's risk of cardiovascular problems in later life and lowering their chances of developing allergic disease.

### PRACTICAL ADVICE

Oily fish is a good source of omega-3 fatty acids.

- Aim for 2–3 serves of oily fish like salmon or tuna each week (as recommended in Australian dietary guidelines).
- Try to be aware of the mercury levels of different types of fish, as too much mercury can harm the child's developing nervous system.







# Brain, behavioural and immunological development

Iron is needed as a foetus grows, and with it, a mother's blood volume. Iron shortage can lead to anaemia in the mother and affect brain development in the foetus, increasing the likelihood of poor mental processing, behavioural and motor development in your child.

Low zinc during pregnancy has been linked to problems with immunological development and sensory responses in the unborn child, as well as retarded growth and congenital abnormalities. It may also be a factor in low birth weight and premature delivery.

- Get advice from your healthcare professional about dietary sources of iron, and factors affecting how well your body absorbs it.
- Ask your healthcare professional about monitoring your iron and zinc levels.
   If they're low, get their advice about supplements.







# Neurological development and metabolic health

Low levels of vitamin  $B_{12}$  in early pregnancy have been linked to a child having high levels of insulin resistance later (increasing their risk of diabetes and cardiovascular disease). Vitamin  $B_{12}$  is also essential for healthy cell and neurological function, including development of the central nervous system.

- Make sure you get the recommended daily intake of vitamin  $B_{12}$  (6µg/0.006mg).
- Foods containing  $B_{12}$  include milk and milk products; eggs; and foods like soy milks which have been fortified with it.
- If you follow a vegetarian or vegan diet, consider taking a B<sub>12</sub> supplement throughout pregnancy and breast feeding. Speak to your healthcare professional.
- Don't rely on the B<sub>12</sub> in plant sources like spirulina and seaweed
   it doesn't provide the type of B<sub>12</sub> activity the human body needs.







## Healthy foetal growth and bone health

Low vitamin D during pregnancy can impede foetal growth and put your child at risk of rickets, a preventable early childhood bone disease. It can also affect bone mineralisation during your child's early adulthood, just as they are reaching 'peak bone mass'. Low calcium can also affect normal bone development.

#### PRACTICAL ADVICE

## Vitamin D intake:

- If you wear a veil, have dark skin, use sunscreen regularly or are obese, your absorption of vitamin D through the sun may be limited.
- If you're at risk of vitamin D deficiency, ask your doctor to check.
- If necessary, increase your intake with more sun exposure or a supplement with healthcare professional advice.

### Calcium intake:

- If you avoid dairy and don't consume an alternative high calcium food (e.g. calcium-enriched soy milk), a calcium supplement is advised.
- The total recommended daily calcium intake is 1,000,000μg/1,000mg a day
  if you're between 19 and 50 years, and 1,300,000μg/1,300mg if you're 18 or under.







## Promoting foetal growth and development

A pregnant woman's need for protein also increases, especially into the third trimester.

- Aim for 8.5 servings of breads and cereals (preferably wholegrain) each day.
- Increase your protein intake as your pregnancy progresses, but avoid a high protein diet (over 20% of total energy), as it can lead to an increased birth weight.
- Around 20–35% of your energy should be from fat, which may mean reducing your intake, especially of saturated fat.







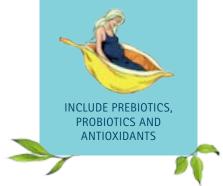
## General health in the foetus and infant

Exposure to a wide range of nutritious foods consumed by the mother during pregnancy, and while breast feeding, has health benefits for the developing foetus and newborn infant.

### PRACTICAL ADVICE

 Unless you're allergic to them yourself, there's no need to avoid allergenic foods (e.g. peanuts and peanut products) while pregnant or breast feeding.







# Metabolic health and possible prevention of allergies

A healthy balance of micro-organisms in a mother's gut is important for the child's later health. Prebiotics (food for probiotic bacteria) in late pregnancy may protect them against eczema and other allergic diseases. Probiotics help the developing immune system and metabolism. Antioxidants may have multiple benefits, including a reduced risk of obesity, asthma and eczema.

- Fresh fruits and vegetables are good sources of both prebiotics and antioxidants, so ensure you get plenty.
- Unprocessed grains, nuts and seeds also contain soluble prebiotic fibre, and are important in the diet.
- Include yoghurt and foods containing yeast, as these provide probiotic bacteria.
- Consider boosting your probiotic intake with supplements with healthcare professional advice.









## Optimal growth, mental function and future health

Breast feeding is one of the single most important ways to improve a child's life-long health, helping reduce the risk and severity of many conditions in infancy and beyond. Mother-infant bonding is also strengthened by breast feeding, which is likely to significantly influence the child's well-being right through life. For pre-term infants, breast feeding has particular benefits in lessening the risk and effects of necrotising enterocolitis (death of bowel tissue).

- If you can, breast feed exclusively for around six months. Continue until the child is at least 12 months old, and as long as it suits you and the child.
- Pre-term breast fed infants should be given iron supplements from four to eight weeks of age.
- If your infant is born at less than 32 weeks' gestation, you will probably be advised
  to fortify breast milk with protein and calories up until 'pre-term' (37 weeks after
  conception).
- If you are dark-skinned or wear a veil, ask your doctor about breast feeding and vitamin D.
- Feeding with expressed milk is practical and safe, provided the milk is appropriately stored to prevent bacterial growth.







## Prolonged breast milk production and feeding

Your own nutrition has a direct influence on the quality of nutrition your breast fed infant receives. Keeping up your energy intake may mean you're able to breast feed for longer – helping strengthen the foundations of your child's short and long term health.

- Typically, a breast feeding woman needs an additional 2,000-2,100kj per day over the recommended daily intake for women.
- The energy intake of a breast feeding woman would be at least 20% fat

   any less may affect the fat content of your milk.
- Ensure you are getting adequate iodine (150,000µg/150mg daily) and other important vitamins and minerals.
- If you follow a vegan, vegetarian, or other restrictive diet, you may be at greater risk for nutrient deficiencies. Consider seeing a dietitian to ensure your breast milk has the nutritional quality your baby needs.





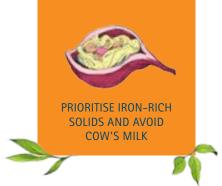


## Building a strong immune system

The way solids are introduced can help reduce your child's risk of developing allergies. Including potentially allergenic foods and continuing to breast feed are also thought to have immunity benefits for your child.

- Breast milk may help the immune system respond appropriately to the introduction of solids. So continue as long as possible.
- During the early stage of solids (up until around seven months), milk should still
  dominate the diet. Solids help your child learn to eat, but don't yet contribute
  significantly to their nutritional intake.
- Unless your child has an allergy, suspected allergy, or is at extreme risk of developing one to a certain food, don't avoid introducing potentially allergenic foods in the early stage of weaning.
- Current guidelines recommend starting solids from around six months. However, emerging evidence suggests introducing them between four to six months (but never before 17 weeks) may help reduce allergy. Speak to your health professional about what's right for your child.







# Preventing anaemia and promoting healthy development

Iron is an essential requirement for healthy development and is a key nutrient required during early solid introductions.

Feeding infants cow's milk as a main milk drink before they're one year old affects their haemoglobin and red blood cell production, putting them at increased risk of iron deficiency. It has also been linked to hidden gastrointestinal bleeding.

- Continue to breast feed while supplementing the infant's diet with nutrient dense and iron-rich foods.
- Include foods like pureed meat, poultry and fish, and iron-enriched infant cereals.
- Don't feed your child cow's milk as a main milk drink before they are 12 months of age.





# Normal development and healthy nutrition for life

Breast milk should be continued as long as possible, but by around six months of age, breast milk alone no longer provides all the required nutrients and energy your growing infant needs. It is also unlikely to satisfy their appetite. Encouraging infants to try new tastes and textures can help make them more accepting of a broad range of foods in later life.

- Introduce foods from all five food groups, keeping the emphasis on iron-rich foods.
- Introduce new textures gradually (from pureed to lumpy to normal).
- From the age of about eight months, most children can manage finger foods by themselves, so offer these. Always supervise your child while eating.
- To help stop your child getting a liking for them, don't encourage foods that are high in saturated fat or have added sugar, salt or honey. (Also, honey may contain clostridium botulinum, which can cause food poisoning in babies).
- Don't feed them cow's milk as a main milk drink yet.
- Persevere through any periods of pickiness and continue to offer healthy foods, and eat as a family unit.









# Balanced nutrition and healthy eating habits for life

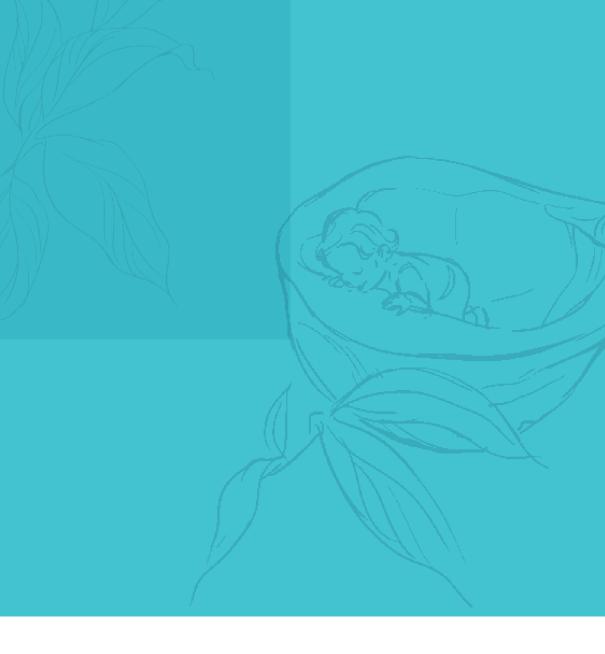
From the age of 12 months, your toddler should get an increasing proportion of their nutrition from a broad variety of solids. A balanced approach to food, and other lifestyle behaviours that affect later health, are formed during this phase of life. While a majority of toddlers go through a fussy eating stage, for most it's temporary.

- Continue breast feeding as long as possible.
- Give your child small meals, tailored to your child's appetite, often. Aim to get them into a regular routine, eating as part of the family.
- Offer a wide variety, and give positive reinforcement when they try new tastes and textures. If they're picky, persevere.
- Avoid foods with lots of saturated fat, sugar and/or salt (e.g. potato chips, cakes, biscuits and confectionery).
- Avoid sugar-sweetened drinks and fruit juices, and don't offer caffeinated drinks (e.g. some cola energy drinks, coffee and tea), as these aren't suitable for toddlers.
- Healthy children don't need special milks water and pasteurised full-cream milks are suitable.
- Set a good example parents who eat healthily and enjoy a physical, active lifestyle are important role models for helping establish life-long patterns.



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# PRACTICAL GUIDELINES FOR POSITIVE ACTION

Most dietary advice offered to mothers is done so with the aim of avoiding health issues, or *minimising risk*. The aim of this booklet is different. It has been developed specifically to provide parents and carers with nutritional guidance, from pre-conception right through to toddlerhood, which can help *optimise the long-term future health* of your baby.

Information and recommendations in the booklet are based on the findings of an expert panel, specially convened to review findings and develop recommendations around how early nutrition helps lay the foundations for future health.

## Panel members included:

Professor Peter SW Davies,
Queensland Children's Medical Research Institute,
University of Queensland

**Professor John Funder,** Prince Henry's Institute

Associate Professor Debbie Palmer, University of Western Australia

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**Associate Professor Mark Vickers,** The University of Auckland

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Sources for all information in this booklet are detailed in the panel's report,

Early Life Nutrition: The opportunity to influence long-term health, available at www.earlylifenutrition.org.au

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