



# USDA Infant Feeding Dietary Guidelines 2020 - 2025

## Webinar Key Takeaways

April 2021

# Every Bite Counts - Healthy Baby Nutrition from the USDA Guidelines

The first two years of a baby's life are critically important for growth & development. Children in this age group consume small quantities of food, so it's important to make every bite count!

## 1 Breastfeed until 4-6 months of age

Feed human milk exclusively, ideally until around 4-6 months of age, with supplemental vitamin D soon after birth

## 2 Introduce complementary foods at 4-6 months

At around 6 months, but not before 4, begin introducing nutrient-dense complementary foods. Ensure foods are introduced in infant safe formats so as to avoid choking hazards

## 3 Diet Diversity is important and has many benefits

Encourage a wide variety of food including iron and zinc. In infants who are breastfed (>50% daily feeds), iron supplementation is important since breast milk alone does not meet the infant's need for iron after age 4

## 4 Portion sizes matter and every bit counts

Portion sizes are helpful to ensure adequate nutrient intake, but all babies are different. Parents should listen to a baby's cues of being hungry and satisfied

## 5 Introduce common allergens with complementary foods

Introduce infants to potentially allergenic foods along with other complementary foods at 4-6 months of age. These include foods such as peanuts, cooked egg, cow's milk products, tree nuts, wheat, shellfish, fish, soy, and sesame

## 6 Pay attention to beverages

In general, infants should not consume beverages outside of human milk, formula and small amounts of water. Fruit juice should not be fed, even 100% fruit juice

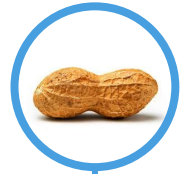
# Every Bite Counts - Sample Portion Sizes for 6-12 months of age

	Smaller portions for younger infants	Sample infant safe forms
<b>Fruits</b>	2-8 Tablespoons	Smooth puree or soft cooked and chopped
<b>Vegetables</b> Include red, orange, and dark green vegetables	2-8 Tablespoons	Smooth puree or soft cooked and chopped
<b>Grains*</b> Choose a variety whole grains including wheat grains	½– 1 ounce (This includes ½ ounce per day or fortified grains for the breast-fed infant)	Whole wheat or fortified infant cereal (or farina or cream of wheat), whole grain pasta or pastina, toast or crackers
<b>Protein foods **</b> Meat, fish, poultry, eggs, nuts, seeds	¾ - 3 ounces	Smooth diluted peanut or tree nut butters or powders or butters/powders mixed into pureed foods Hard boiled, well-scrambled eggs blended into pureed foods or chopped for finger foods Tahini (sesame)
<b>Dairy</b>	¼ – ½ cup	Yogurt, cheese
<b>Breast milk or formula</b>	3-5 feedings 24-32 ounces/day (and as low as 16-20 ounces as infant approaches 12 months of age)	

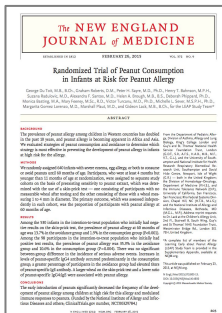
Common allergens span multiple food groups, so ensure families pay special attention to incorporating these on a regular basis

\*1 ounce grain = 1/2 cup pasta, 1 slice bread, or 4 Tablespoons for infant cereal; \*\*1 ounce protein foods = 50g egg; 28.35gram lean meat or seafood; ¼ cup tofu; 1 Tablespoon peanut butter, tree nut butters, or seed butter (diluted for infant safe feeding); For vegetarian diets the recommendation for protein foods increases to 4 ounces per day of nuts, seeds, legumes.  
Schroer B, Groetch M, Mack DP, Venter C. Practical challenges and considerations for early introduction of potential food allergens for prevention of food allergy. The Journal of Allergy and Clinical Immunology: In Practice. 2021;9(1):44-56.e1.

# Feeding Guidelines Have Changed Dramatically Since 2015



2015



**Leap Study:**  
Peanut allergy was five times more likely in children who avoided peanut



2016



**EAT Study:**  
Per protocol group had 67% lower relative risk of food allergy overall



2017

**AAP Reverses Guidelines and endorses NIAID recommendations:** early introduction of peanut protein for infants who are at increased risk of developing the allergy



2017

**FDA Releases Qualified Health Claim** on early peanut introduction



2020

**AAAAI, ACAAI, CSACI, USDA & HHS:** Feed babies ALL common allergens at 4-6 months when solids are introduced

2020

Joint North American guidelines (AAAAI, ACAAI, CSACI) and USDA & HHS issue updated infant nutrition recommendations to support **early introduction of all commonly allergenic foods**, when complementary foods are introduced into an infant's diet.



In late 2020, the North American Allergy Societies (AAAAI, ACAAI, CSACI) provided long-awaited guidelines on early allergen introduction and feeding. They are largely aligned with the USDA guidelines and provide additional detail on current evidence-based recommendations

## Summary of Recommendations

- **Infants with severe eczema have the highest risk for developing food allergies**
  - Mild or moderate eczema, family history of atopy or food allergy, have some increased risk of developing a food allergy
- **Allergy screening beforehand is NOT required for anyone, including those at increased risk, but should be preference sensitive**
- **No pre/postnatal maternal exclusion diet benefits**
- **Introduce cooked egg and peanut around 4-6 months, and do not delay introduction of other common allergens**
  - Strongest evidence for peanut, followed by egg, but we cannot ignore the other allergens
- **Infants should be fed a diverse diet**
  - Researchers followed a birth cohort from 2001 and found that increased infant diet diversity significantly decreased the likelihood of developing a food allergy later in life

# There are Two Viable Approaches for Families to Feed Allergens Early. Relying on commercial baby foods is NOT an option.

## Option 1:

### Self-Prepared Foods

- Parents can purchase foods to prepare at home in infant safe forms
- Extra consideration is needed to incorporate allergens on a consistent basis



## Option 2:

### Allergen Intro Products

- Different commercial options exist to help parents introduce and consistently feed allergens
- Families should look for products that cover a wide range of allergens, especially difficult to feed foods like shellfish or fish.



## Commercial Baby Food

Most babies eating commercial baby food alone will NOT be exposed to allergens early

-60-95% of US families rely on commercial baby food. Yet most of these foods lack food allergens

**92% OF**  
commercial  
BABY FOODS  
**DO NOT**  
CONTAIN ANY  
**FOOD**  
ALLERGENS<sup>1</sup>

1. IRI Unify, Walmart Corp RMA, Infant Nutrition: Baby & Toddler, Latest 52 Weeks Ending 07-26-20



# Practical Advice: 4 Tips For Smart Infant Feeding

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1

## **ROUTINE FEEDING**

All conversations about early allergen introduction should include an emphasis on **routine feeding** of these allergens. Food allergen introduction is not a diagnostic and requires routine feeding to help train the child's developing immune system

2

## **LOOKING BEYOND PEANUT**

After a child is developmentally ready, between 4-6 months, begin introducing all common allergens, not just peanut

3

## **WORK WITH THE FAMILY TO BUILD A REALISTIC PLAN**

Parents should be aware of both DIY and Commercial food options. A feeding plan can incorporate a hybrid of both and should be tailored to what would be most realistic for the family, taking into consideration access to the ingredients and time available to prepare foods

4

## **DISCUSS PACING OF INTRODUCTION AND REACHING DIET DIVERSITY**

There is no one correct way to introduce the different foods. It's important to work with each families comfort level on the pacing of introduction, whether it is multiple foods at once, which is safe to do, or to space them out. If spacing out the foods, they can try one new food a meal or even one new food a day, but not to delay too long!

# Sample of Commercially Available Options for Early Allergen Feeding

Product	Allergens	Form Factors	Protein Servings & Feeding
<b>SpoonfulONE</b>	Milk, egg, wheat, soy, sesame, peanut, tree nuts (almond, cashew, pistachio, hazelnut, walnut, pecan), fin fish (salmon, cod), shellfish (shrimp)	<ul style="list-style-type: none"> <li>Mix-in powder (4 months+)</li> <li>Puffs (6 months+)</li> <li>Crackers (12 months+)</li> </ul>	<p>3.4 grams per week (30mg each of 16 foods [480mg total daily])</p> <p>Feed 1 packet daily for 1 year</p>
<b>Lil' Mixins</b>	Peanut, tree nuts (almond, pistachio, hazelnut, walnut), egg	<ul style="list-style-type: none"> <li>Mix-in powder (4 months+)</li> </ul>	<p>6 grams per week</p> <p>Feed scoops 2-3 times per week</p>
<b>Ready Set Food</b>	Peanut, egg, milk, tree nuts (cashew, almond, walnut) sesame, soy, wheat	<ul style="list-style-type: none"> <li>Mix-in powder (4 months+)</li> </ul>	Variable: Maintenance servings (per pack: 430 mg milk, 125 mg egg, 430 mg peanut). Grow servings (2.5 grams total protein per pack per day for 6 months)
<b>Mission MightyMe</b>	Peanut	<ul style="list-style-type: none"> <li>Puff (7 months+)</li> </ul>	6 grams per week
<b>Bamba</b>	Peanut	<ul style="list-style-type: none"> <li>Puff (7 months+, softened in water)</li> </ul>	No recommendations on servings





# SpoonfulONE

Most complete way to introduce common allergens.



Patented formula



Peer reviewed research



Developed by a pediatric allergist



Certified organic



Nothing artificial



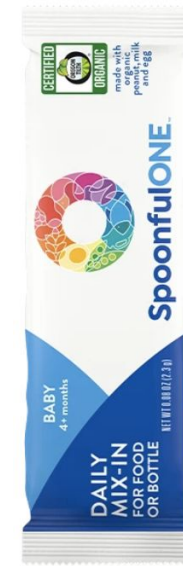
Every batch tested for protein integrity

available at  
**amazon**

Coming to Retail  
Stores Summer 2021

[SpoonfulONE.com](https://SpoonfulONE.com)

Only product  
that contains  
all food  
groups  
representing  
over **90%** of  
food allergies



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**3** formats to  
make routine  
feeding easy  
as a baby  
grows

**Questions? Reach out to the SpoonfulONE Medical Team**

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