



Raising healthy and fit kids

The Breast Feeding Link to Obesity

New Information Every Parent Should Know!

by Dr. Richard Visser

There's no disputing that breast milk provides the best natural nutrition for infants, and the psychological and immune-system advantages of breast feeding are also widely known.

What you may not know is that, of the many factors that contribute to childhood obesity, whether or not your child was breast fed can be the most influential. Why?

First, your child's growth — physically, intellectually, socially, psychologically — is fastest in the first year of life. Given this rapid development, it's the time when children are most vulnerable to poor nutrition. Babies need food that not only provides enough calories and nutrients, but also is varied, balanced and wholesome. Without this, a child's system, built to naturally regulate itself against obesity, can be compromised.

Second and perhaps more significant, obesity (as well as other diseases, such as heart problems and cancer) are directly related to *nutritional habits*. What I've found through my research is that these habits are formed *from the very beginning*.

Children who are breast-fed exclusively until their sixth month are better able to control how much they eat. Satiety, or “feeling full,” depends not only on the volume ingested, but also on the composition of the nutrients. The “stop eating” mechanisms in a nursing child are largely associated with the fats found in breast milk. What's more, compared to children who aren't breast fed, those who are have been found to be more active and work more to extract the milk from the breast (developing an early habit of “exercise”), stay awake longer, develop fine motor skills as well as visual acuity more quickly, and be able to distinguish between colors earlier.

So feeding your child in the first year of life has two goals: 1) to satisfy the child's energy and nutritional needs for optimal development, and 2) to provide the best combination of nutrients and feeding method that will help create appropriate eating/nutritional habits.

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Achieving both goals is best met through breast feeding for the first six months and holding off introduction of new foods until after that milestone, something recommended by the World Health Organization. After the first six months, when your child begins to teethe and is more active, introduction of solid and semi-solid nutrients to complement breast milk is ideal. This provides

- the macro- and micronutrients required to meet your child's increasing energy needs;
- the necessary amounts of proteins and fats;
- needed minerals, such as iron, zinc and selenium; and
- important vitamins, such as Vitamin A.

Ingesting solid foods is a trial-and-error learning experience for any child and should be made as pleasant as possible to encourage enjoyment of the flavor, smell, color and texture of different foods. Take your time, and don't worry about how much your child is eating. Remember, this is "complementary nutrition," and the breast remains the most important source of food until one year of age.

Premature introduction (meaning before a child is six months old, teething and sitting up on his or her own) of solid foods could cause energy intake above recommended levels. It can also create undesirable eating habits, such as an addiction to excess simple sugars, which can lead to obesity. Feeding solids too soon could also create a diet too high in animal and/or vegetable proteins. The child may also run the risk of allergic reactions, digestive intolerance to substances such as gluten, along with asthmatic respiratory conditions and skin lesions.

What about other kinds of milk? Non-human milk contains a higher concentration of proteins and energy density per volume unit than breast milk. Cows, goats and other species' offspring simply grow at a faster rate than human babies, so their milk contains protein content and types, as well as caloric density, inappropriate for an infant. Before a baby is six months old, consuming non-human milk and other protein-rich foods of animal origin, such as meat, can therefore result in a renal load that is too high and can lead to serious dehydration, especially if your child is ill with fever or diarrhea, which increases the loss of fluids through extra renal processes.

Bottom line? **If at all possible, foods other than breast milk should not be introduced before six months of age, particularly if you want to diminish the risk of childhood obesity.** In upcoming installments to this series on childhood nutrition, you'll see how to avoid the other risk factors that contribute to poor dietary habits, so you can ensure proper nutrition for your entire family.

Dr. Richard Visser recently completed clinical research on 10,000 children and the obesity pandemic in Latin America and the United States. He is the director of the Visser Wellness and Research Center in Aruba, CEO of SimplyH, LLC and Simply Toddler LLC in Los Angeles and works worldwide to raise awareness of proper nutrition for healthy and fit toddlers and children.

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