IMPLEMENTATION OF THE WHO RECOMMENDATIONS ON THE INTRODUCTION OF COMPLEMENTARY FOODS TO ARTIFICIALLY FED CHILDREN

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Relevance: infants do not have the physiological maturity to move from exclusively liquid food directly to food from the family table. Therefore, to bridge this gap between needs and opportunities, transitional food is needed, and the need persists until about 1 year. Official recommendations published in the Netherlands say that children with sufficient growth indicators, from an alimentary point of view, do not need to be given any complementary food until 6 months. The American Academy of Pediatrics recommends an age of "6 months", and the same has been adopted by various member States of the WHO European Region.

Purpose and objectives of the work: Implementation of the WHO recommendation on the introduction of complementary foods to children on artificial feeding in the conditions of an urban orphanage.

Materials and methods of the study: 20 children from the slider group of the City Orphanage were monitored from 01.11.20 to 1.02.21, of which 11 (55%) were boys and 9 (45%) were girls. Children were given complementary foods starting from the age of 6 months, since up to 4 months children still do not have neuromuscular coordination in order to form a food lump, transfer it to the oral part of the pharynx and swallow it. From the age of 6 months, children bring objects to their mouths, and the development of the "chewing reflex" at this time allows them to consume some solid foods regardless of the appearance of teeth. During the introduction of complementary foods, it was observed whether the child learned to enjoy the new food. As the first complementary food, vegetable puree was recommended. The bait began with one type of vegetables (potatoes, zucchini), then moving on to a mixture of vegetables. 3-4 weeks after the introduction of vegetable puree, a second (cereal) complementary food (milk porridge) was prescribed. From 8.5-9 months, the third complementary food (kefir and cottage cheese) was introduced into the child's diet.

The results obtained: In the children in the slider group, there was an improvement in appetite, an increase in weight gain, a timely occurrence of motor-motor skills and teething.

Conclusions: The timely introduction of correctly selected foods for complementary foods promotes health, improves the physical development of young children during the period of accelerated growth. Poor nutrition and poor feeding practices can increase the risk of physical development disorders (wasting and stunting) and can have long-term negative effects on health and mental development.

References:

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