

6 MONTH CHECK UP

DIET

Your baby can now have **meats**. Your baby can actually have any food, except eggs, milk and stuff he or she can choke on. Meats are started and given exactly like fruits and vegetables. Some children will stop taking more and more formula and level off at 26 to 32 ounces per day. **Stage two**, or thicker foods, just have more texture. Try thicker foods when you feel your child is ready. If he or she likes them, then give more. Should your child not like the thicker foods, just try again later. **Teething crackers** may be given; just be careful that your child does not break off a piece and choke on it.

Egg yolks will be started at 9 months of age, while egg whites and whole milk must wait until 12 months. These foods fed to early, may cause allergies and bowel disorders. Formula or breast milk (and the vitamin you are giving) has all of the **vitamins** your child needs until 12 months of age. There is good evidence that feeding oranges, peanuts, oatmeal, and shellfish may cause allergies in a child who has a strong family history of allergies (avoid them until 1 to 2 years just in case).

COMMON ILLNESSES & PROBLEMS

Prepare for the inevitable **temper tantrums** that are about to infest your lovely child. Most experts think that temper tantrums start when a parent responds too quickly to a new baby's every whimper, causing the child to assume that this is what should always happen. When a child realizes that they can have something other than their basic needs, he or she will do what always worked in the past, which is cry, but the alert parent soon realizes that junior cries louder and more forcefully, because this has always worked in the past, and when the parents give in, then the hook is set, and junior starts reeling mommy and daddy in. Fixing your child's inevitable tantrums by preventing them is much easier than the pure misery you will surely go through trying to fix them after they are set in. You can prevent the temper tantrums by responding to your child when appropriate, and not when you know that your child is just throwing a fit. Remember that your child is learning how to communicate, and if he or she gets the message that all I have to do is throw a fit to get what I want, then the only way your child will know how to communicate is by throwing fits.

Allergy symptoms rarely start before 6 months of age. The usual symptoms are pink, puffy eyelids with extra or deeper creases in the lower eyelid, watery eyes, clear, runny, nasal discharge, continual sniffing or sneezing, and occasionally skin rashes. When a child is exposed to something (antigen) that may cause an allergic reaction, the child does not have an immediate reaction, but rather develops antibodies to that substance. Upon the next exposure to that antigen, the child then produces many antibodies that in turn cause the release of chemicals like histamine. This delay is why children have been exposed to an antibiotic (or formula, food, etc.) first and then develop the allergic reaction later. Histamine causes blood vessel dilation (widening), blood vessel leakiness (swelling, itching and

increased secretions) and if released in large enough amounts may cause the blood pressure to drop. Antihistamines work by preventing the histamine from doing its job, but they work best when present before the histamine is released. This is why antihistamines must be given all the time for people with chronic allergy symptoms, but only are needed occasionally for people who have minor symptoms. The antibodies that cause allergic reactions to food may also cause severe allergies, diabetes and asthma; this is why we recommend avoiding feeding certain foods too early. Those people with strong family histories of allergies may want to take the extra precaution of not feeding their child oranges, shellfish, peanut butter or oatmeal until after 2 years of age.

Upper respiratory infections (colds) cause some release of histamine and this is why antihistamines have some minor effect on cold symptoms in adults. We currently think colds mainly cause the release of leukotrienes. We currently have no anti-leukotriene medicines, and the current cold medicines have little effect on those chemicals. This is why cold medicines generally don't help cold symptoms. The current cold medicine doses are not well understood in young children, and they also cause considerable side effects (100,000 children go to the emergency room each year for cold medicine effects). This is why cold medicines are not generally recommended below certain ages.

	Teething	Ear Infection
Fever	< 102	> 102
Fussy	Comes and goes	Continuous and worsens
Stools	Sometimes mild loose stools	No change
Runny Nose	Yes	Yes
Cough	Rare	Often
Pulling on Ears	Comes and goes	Frequent
Weather change	No effect	Ear pain worse with rapid barometric change
Hearing	No effect	Frequently reduced
Drooling	Frequent	None
Teething gels help	Yes	No

SAFETY

Infants must face backwards in the car seat until 1 year of age AND 20 pounds in weight, and should never ride in the front seat of a car, especially one with an air bag.

NEXT VISIT

The next check up will be at 9 months of age. At that visit, your child should not get any vaccines (unless we were out or missed some).