Introducing Solid Foods



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Introduction

People with trisomy 21 have an increased likelihood (30% to 80%) of experiencing feeding challenges.

These difficulties can be influenced by several factors, such as sensory hypersensitivity or hyposensitivity, oral-motor difficulties, or cognitive rigidity toward new foods.

Muscle hypotonia, which is commonly observed in individuals with trisomy 21, can also affect feeding mechanisms. Trisomy 21 is a condition in which we generally observe either progress or a plateau in feeding skills, but rarely regression.



Best practices to remember

We first invite you to pay special attention to signs of aspiration, which refers to the passage of liquids or food into the airways.

This phenomenon is part of dysphagia, a medical term for difficulties in swallowing.

Here are some signs of aspiration:

- Cough lasting up to 30 minutes after a meal
- A wet voice, similar to when we have something stuck in our throat or a cold. This can even be heard in a baby's cooing.

It is very important to consult a doctor if you have concerns in this regard. **Note that aspiration can also lead to other health issues, such as pneumonia.**

Safety should always be the priority. When introducing textures, stay alert to signs of aspiration. This will guide you in determining whether the texture is safe for the child.

Mealtime routines

- **Encourage enjoyment.** Never force a child to eat. Remember that until the age of 1, formula or breast milk primarily meets the child's nutritional needs. This period is therefore perfect for exploration without the pressure to eat.
- **Prioritize the routine (times, seating, plate, utensils, foods, etc.)**
- Consistency, rules, and the approach between parents and the childcare environment should be the same.

Posture

- It is crucial to maintain good posture. We invite you to consult **this reference document from the Sainte-Justine Hospital on this topic** (french version).
- Make sure your child has good posture, either independently or with assistance. If your child cannot maintain a seated posture at 6 months, as is often the case for children with Down syndrome, compensation can be provided by adjusting the high chair. Start with a high chair that has support and is inclined. Once the muscle tone is sufficient, switch to a more upright high chair (an adjustable model like Tripp Trapp, for example).

Introduction of solids

- Around 6 months is the ideal time to start exploring different textures with your baby. **Unless advised otherwise by a healthcare professional, it's perfectly fine to begin at this age.**
- It is recommended not to wait too long before introducing more varied textures than smooth puree, in order to promote the development of oral and feeding skills.
- Exploration with hands is necessary—let your child manipulate and play with food.
- It is possible and completely normal to stay at the same texture stage for several months. The introduction can happen slowly but surely. Compare your child only to themselves. If your child seems to plateau at the same stage, it may be a sign to consult. The important thing is to observe progress, even if it is slow.
- Know that the chewing stage is difficult for people with trisomy 21.



Adaptation of Utensils and Cups



- Utensils with large handles are easier to handle.
- Prioritize wide, flat spoons with shallow bowls.
- We strongly recommend reading the document **Les principes de la présentation de la cuillère à l'alimentation (in french only),** (Principles of Spoon Presentation for Feeding) written by Sainte-Justine Hospital. It's important to use the correct principles when feeding with a spoon to prevent choking and promote oral-motor skill development. For example, when feeding your child by placing the spoon in their mouth, to maximize their participation, avoid raising the spoon upwards to spill food into their mouth without their effort to use their tongue to retrieve the food. Watch this video to better understand this example.
- Drinking through a straw promotes proper head positioning and reduces choking risks. The straw is also a good way to promote muscle tone in the mouth. Straw introduction can start as early as 6 months.
- Avoid sippy cups as they encourage cavities by keeping liquids in the mouth longer and promote immature drinking movements.
- It is recommended to discontinue the bottle at one year to ensure the development of chewing and language skills. If you wish to continue using the bottle, we encourage you to vary feeding methods and not rely solely on the bottle. Weaning off the bottle can be a difficult step, so feel free to seek help.
- **Drinking water is essential for health. Ensure that the child drinks enough each day.**

We encourage you to complement this reading by consulting the guide **10 stratégies pour favoriser le bon déroulement des repas avec votre tout-petit (in french only) (10 Strategies to Promote Successful Mealtimes with Your Toddler)** from Sainte-Justine Hospital.



What you need to know

A baby who does not put toys in their mouth is at risk of developing feeding difficulties. Gently encourage your baby to explore different textures with their mouth. If they still refuse, it would be helpful to consult an occupational therapist.

If you are concerned, consult your doctor, who can refer you to a specialized team. These professionals can identify issues such as mouth breathing, tongue weakness, sensory difficulties, swallowing problems (dysphagia), saliva loss, or constipation. Nutritionists and occupational therapists are valuable resources to guide you.

Before your appointment, document your child's difficulties to help specialists better guide you. We recommend starting with the public health system. However, if you seek faster care, private sector professionals are also available. At RT21, we offer reduced-price sessions with an occupational therapist to our members. Contact us to learn more.

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