

Feeding in the First Year of Life: Draft SACN Report
A response from British Specialist Nutrition Association (BSNA)
September 13th 2017

To: Scientific Advisory Committee on Nutrition (SACN)

The British Specialist Nutrition Association (BSNA) is the trade association representing manufacturers of high quality foods designed to meet the needs of people with very special nutritional requirements within the UK. This includes members who produce nutritional products designed for the feeding in the first year of life, such as complementary weaning foods.

We welcome the opportunity to respond to the Scientific Advisory Committee on Nutrition's consultation on the draft 'Feeding in the First Year of Life' report. We hope our response will make a useful contribution and we would be pleased to have further discussions on specific issues if this would be helpful.

We have comments on three specific areas of the report, outlined below.

The age of introduction of complementary foods

We welcome the acknowledgement in the report that the age of introduction of complementary foods should remain the same as current practice.

While we understand the importance of recommending an age before which complementary feeding should not begin (in this case, 4 months), we would emphasise the importance of using the term 'around 6 months of age' in acknowledging that the introduction of complementary foods before 6 months is common practice in the UK.^{1,2} Maintaining some flexibility in the advice provided will be beneficial in permitting an individual approach to the introduction of complementary foods in line with the natural variability in nutritional requirements and the neurodevelopmental readiness of infants at around 6 months of age.^{3,4} Furthermore, such flexibility goes some way towards ensuring that the UK position is not contradictory to that of other European groups.^{4,5}

¹ Lennox A, Sommerville J, Ong K, Henderson H, Allen R. Diet and Nutrition Survey of Infants and Young Children 2011; 2013. Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/139572/DNSIYC_UK_report_ALL_chapters_DH_V10.0.pdf

² McAndrew F, Thopson J, Fellows L, *et al.* 2012. Infant Feeding Survey 2010. Health and Social Care Information Centre. 2012. Available at: <http://content.digital.nhs.uk/catalogue/PUB08694/Infant-Feeding-Survey-2010-Consolidated-Report.pdf>

³ Carruth BR and Skinner JD (2002) Feeding behaviors and other motor development in healthy children (2-24 months). *J. Am. Coll. Nutr.* 21, 88-96.

Eating & Feeding of Solid Foods

We welcome discussion in the report of the behavioural, social and environmental influences of social food acceptance. This is an area in which the commercial infant feeding sector has invested resource and championed the need for research.

It is encouraging to see the inclusion of clear recommendations for offering variety and repeated exposure during complementary feeding, in keeping with the experimental evidence that these techniques are effective at promoting acceptance.^{6, 7, 8, 9}

However, in relation to the conclusion drawn [347] we believe it is important to differentiate between 'sensitive' and 'critical' period, and acknowledge expert opinion that the early complementary feeding period does represent a 'window of opportunity' where there is a need to capitalise on an infant's willingness to try new foods at the start of complementary feeding.

A British Nutrition Foundation expert panel consider that the 4-6 months period can be an appropriate time to introduce small tastes of age appropriate foods, that do not compromise breast milk intake, but support 'food acclimatisation'.¹⁰

Furthermore, it would be pragmatic of the report to acknowledge that most infants in the UK are introduced to complementary foods below 6 months,^{1,2} and as such, should include practical messages on the appropriate type, texture and amount of food for first complementary feeding in order to support parents who are introducing complementary foods below 6 months of age.

Introduction of Allergens in Complementary Feeding

At present, the advice provided by commercial infant food providers on allergen introduction reflects the current position of the Department of Health;^{11,12} to avoid the introduction of allergenic foods before 6 months of age. This advice has recently been challenged by clinical practitioners as contradictory to the evidence base and recent updates in European guidance.⁴

⁴ Fewtrell M, Bronsky J, Campoy, C *et al.* (2017). Complementary Feeding: A Position Paper by the European Society for Paediatric Gastroenterology, Hepatology and Nutrition (ESPGHAN) Committee on Nutrition. *JPGN*.64:119-132

⁵ European Food Safety Authority (2009) Scientific Opinion on the appropriate age for introduction of complementary feeding of infants. *EFSA Journal*.7(12):1423

⁶ Barends C, de Vries J, Mojet J *et al.* (2013) Effects of repeated exposure to either vegetables or fruits on infant's vegetable and fruit acceptance at the beginning of weaning. *Food Quality and Preference* 29: 157-165.

⁷ Barends C, de Vries JHM, Mojet J *et al.* (2014) Effects of starting weaning exclusively with vegetables on vegetable intake at the age of 12 and 23 months. *Appetite* 81: 193-199.

⁸ Fildes A, Lopes C, Moreira P *et al.* (2015) An exploratory trial of parental advice for increasing vegetable acceptance in infancy. *British Journal of Nutrition* 114: 328-336.

⁹ Hetherington MM, Schwartz C, Madrelle J *et al.* (2015) A step-by-step introduction to vegetables at the beginning of complementary feeding. The effects of early and repeated exposure. *Appetite* 84: 280-290

¹⁰ Chambers L. Complementary Feeding: Vegetables first, frequently and in variety, 2016, *Nutrition Bulletin*, 41: p. 142 – 46

¹¹ NHS Choices. Your baby's first solid foods. Available at: <http://www.nhs.uk/conditions/pregnancy-and-baby/pages/solid-foods-weaning.aspx>

¹² NHS Choices. Food allergies in babies. Available at: <http://www.nhs.uk/Conditions/pregnancy-and-baby/Pages/food-allergies-in-children.aspx>

In light of this, we welcome efforts by SACN and COT (2017)¹³ to review the evidence relating to the development of food allergy, atopic and auto-immune disease. However, we wish to highlight that the conclusions and recommendations drawn in this report [531,532,543,544] are ambiguous and open to interpretation. We would urge SACN to give consideration to how statements might be interpreted and translated into practical and consistent advice for parents and to amend the conclusions accordingly.

In particular, we urge the panel to consider whether:

- Recommendations for hen's egg and peanut will be extended, such that all allergenic foods need not be differentiated from other sources of complementary foods.
- Current advice to introduce allergens one at a time is still appropriate.¹²
- Recommendations need to be strengthened to support the continued offering of allergenic foods, following initial exposure, in order to prevent sensitisation.¹³

We acknowledge that the report is restricted to the risk assessment only of healthy term infants. However, it remains unclear whether this will include infants at high risk of atopy or whether the panel would acknowledge and support that specific recommendations for the population may be appropriate.

¹³ Scientific Advisory Committee on Nutrition (SACN) and Committee on Toxicity (COT) Joint Working Group Report. Assessing the health benefits and risks of the introduction of peanut and hen's egg into the infant diet before six months of age in the UK; 2017. Available at: <https://cot.food.gov.uk/cotwg/joint-sacn/cot-working-group-on-the-timing-of-introduction-of-allergenic-foods-into-the-infant-diet/sacn/cot-working-group-report>