Maternal and Infant Nutrition: An overview of current UK Policies

Charlotte Stirling-Reed BSc, MSc, RNutr (Public Health)
Overview

• UK Maternal and Infant Nutrition Policies
• The first 1000 days of life (UK Guidelines)
• Implications of Recommendations
• Future Research
1991 – DH (COMA) Dietary Reference Values for UK

1994 – DH (COMA) Weaning and the Weaning Diet

2001 – SACN took over from COMA & recommended 6 month exclusive BF, in line with WHO (2001)

2003 – DH Infant Feeding Recommendation

2011 – SACN Early Years Nutrition & Chronic Disease

2016 – SACN Maternal and Infant Nutrition draft DUE
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Maternal and Child Nutrition PH 11

- Promote Healthy Start Scheme
- Train Staff in Maternal and Child nutrition
- Advise women to take folic acid and vitamin D supplements
- Promote and support breastfeeding

Subgroup on Maternal and child nutrition

- Folate and disease prevention (2006)
- Iron and Health (2011)
- Early Life Nutrition (2011)
- Draft Vitamin D (2015)
- Maternal & Child Nutrition (Draft 2016)
Maternal and Child Nutrition PH

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- Draft Vitamin D (2015)

NICE

Birth to Five

This book gives you information on:
- Becoming a parent: Taking care of yourself and your child
- Finding practical help and support

Scientific Advisory Committee on Nutrition (sacn)
Government Schemes

Free milk, fruit, veg and vitamins for you and your family

To apply please see the form inside www.healthystart.nhs.uk

HEALTHY START

DHSSPS
NHS
healthier Scotland
NHS
Public Information

- Nutrition during pregnancy
- Complementary feeding
- Breastfeeding
- Safe Bottle Use
- Public Friendly
- Based on COMA (1994)
Factsheets and online information
International Policies

• UNICEF & WHO – Baby Friendly Initiative
• Launched in UK in 1994

• Baby friendly award - new set of standards (2012)
International Policies

• WHO

“Recommendations for optimal infant and young child feeding include that infants should be exclusively breastfed for the first 6 months of life to achieve optimal growth, development and health, and thereafter, they should receive nutritionally adequate and safe complementary foods while breastfeeding continues up to 2 years or beyond.”
International Policies

• WHO

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The First 1,000 Days

- WHO + 1,000 days campaign – policies
- From pregnancy to 2^{nd} birthday

Evidence shows that the right nutrition during the 1,000 days can:
- save more than one million lives each year;
- reduce the risk of non-communicable diseases such as diabetes, and other chronic conditions later in life;
- improve an individual’s educational achievement and earning potential; and,
- increase a country’s GDP by at least 2-3 percent annually.

http://www.thousanddays.org
The First 1,000 Days

“There is growing evidence that malnutrition during the crucial period of human development—before and during a woman’s pregnancy and during a child’s first two years of life—“programs” a person’s future ability to regulate weight and affects brain development.” The Lancet 2013
The First 1,000 Days

“We conclude that damage suffered in early life leads to permanent impairment, and might also affect future generations.” The Lancet 2008
The First 1,000 Days

“Many babies in the womb in the Western world today are receiving unbalanced and inadequate diets. Protecting the nutrition and health of girls and young women should be the cornerstone of public health. Not only will this prevent chronic disease, but it will produce new generations who have better health and well-being through their lives.” Barker 2012
# Nutrition During Pregnancy

<table>
<thead>
<tr>
<th>What</th>
<th>Specifics</th>
<th>Why?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy diet</td>
<td>In line with Eatwell Plate, 5-A-Day, 200kcal in 3rd trimester</td>
<td>Help baby grow and develop &amp; help mother and baby meet nutrient demands</td>
</tr>
<tr>
<td>Folic acid</td>
<td>Take 400μg until 12 weeks, Eat food containing natural folate, Specific groups may need higher doses e.g. people with diabetes &amp; previous NTDs (see GP)</td>
<td>Reduces the risk of neural tube defects (NTDs) &amp; supports healthy blood for mums-to-be</td>
</tr>
<tr>
<td>Vitamin D</td>
<td>Take 10μg/day throughout pregnancy</td>
<td>Lack of vit. D during pregnancy may affect bone mineralisation of foetus and may affect infants’ own stores</td>
</tr>
<tr>
<td>Eating fish</td>
<td>2 portions of fish/week (1 oily – no more than 2 oily), Avoid shark, marlin, swordfish, No more than 2 tuna steaks or 4 cans of tuna/week</td>
<td>Omega 3 important for brain health, High levels of mercury can be found in these fish which could build up in the body before pregnancy</td>
</tr>
<tr>
<td>Vitamin A</td>
<td>Avoid supplements with vitamin A, Avoid liver &amp; liver products incl Cod liver oil</td>
<td>Too much vitamin A could harm baby as can be toxic in high amounts.</td>
</tr>
</tbody>
</table>
Nutrition During Pregnancy

- Alcohol – can increase the risk of a miscarriage
  - Avoid if possible, especially if planning and in first 3 months
  
  Or
  
  - No more than 1–2 units 1–2 times a week
  - No binge drinking

<table>
<thead>
<tr>
<th>1 unit</th>
<th>2 units</th>
</tr>
</thead>
<tbody>
<tr>
<td>- ½ pint of beer/lager/cider</td>
<td></td>
</tr>
<tr>
<td>- 1 small measure of spirit</td>
<td></td>
</tr>
<tr>
<td>- 175ml glass of wine</td>
<td></td>
</tr>
<tr>
<td>- Pint of lower strength beer/lager/cider</td>
<td></td>
</tr>
</tbody>
</table>

Nutrition During Pregnancy

Caffeine – risk of low birth weight

- <200mg/day as higher intakes may increase the risk of miscarriage
- Tea, coffee, soft drinks, energy drinks, medications and chocolate are all dietary sources of caffeine

<table>
<thead>
<tr>
<th>1 mug of instant coffee</th>
<th>100mg</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 mug of tea</td>
<td>75mg</td>
</tr>
<tr>
<td>1 can of cola</td>
<td>40mg</td>
</tr>
<tr>
<td>1 50g bar of milk chocolate</td>
<td>25mg</td>
</tr>
<tr>
<td>1 can of energy drink</td>
<td>80mg</td>
</tr>
</tbody>
</table>

Adapted from BNF 2013 www.nutrition4baby.co.uk
Nutrition During Breastfeeding

• Exclusive breastfeeding first 6 months

• BF to continue beyond first six months with intro of appropriate solid foods

“All infants are individuals and will require a flexible approach to optimise their nutritional needs. Mothers should be supported in their choice of infant feeding.” DH 2003
Nutrition During Breastfeeding

Similar to advice during pregnancy:

• Take 10μg vitamin D daily (\textbf{folic acid not needed})
• Consume a healthy diet in line with DH advice
• Avoid alcohol OR 1–2 units 1–2x/week
• Limit caffeine (only consume occasionally)
• No more than two portions of oily fish/week
• No more than one portion of shark, swordfish, marlin/

Additionally:

• \textbf{330 kcal/day extra energy in the first 6 months of lactation (SACN 2011)}
• Peanuts OK to eat during breastfeeding as long as mum is not allergic to them
• Fluid intake 600-700mls extra per day
Nutrition for Infants

- **Exclusive** breastfeeding until **around** 6 months
- Developmentally ready around 6 months
- **Not before** 4 months
- Continue BF w. **appropriate** other food
- Include meat, fish, pulses, vegetables and fruit without added salt or sugar + **M.Hetherington** work*
- Certain foods more likely to upset a baby or cause **allergic reaction** – not introduced before 6 months*.  
- **Healthy Start Drops** 6 months (1m)/<500mls formula 

* SACN review looking at **timing**, **allergies** & **method** of feeding.
Implications of Recommendations

• **Translating** nutrition messages – HCPs
• **Out of date** – 1994 recommendations
• **Awareness** of updates – e.g. CMO vitamin D ‘12
• **Adherence** – e.g. < 1% of women BF *exclusively* until 6 months & only 2% delay introduction of solids until 6m.
• **Pre-pregnancy** advice – 50% pregnancies unplanned
• **Training** and delivery – e.g. HS access
• **Provision** – current cuts
Research Recommendations

- **SACN report** to shed more light
- **Collecting data** – NDNS, IFS – incl. during pregnancy & BF
- **Identify gaps** in current data e.g. iodine, allergies
- Effective ways of **communication** esp. pre-preg.
- Increasing **public adherance** to guidance
- Interventions to support young and **low income parents**
- Cost effectiveness for **early intervention** – better than cure
- Long term studies into early life nutrition & chronic disease
- Weight gain during pregnancy & health outcomes
Thank you for listening...

Charlotte Stirling-Reed BSc, MSc, RNutr (Public Health)
SR Nutrition

www.srnutrition.co.uk
References

9. SACN. Draft Vitamin D and Health Report. Scientific Advisory Committee on Nutrition; 2015;