

PORTLAND PEDIATRIC GROUP, LLP

JOHN R. BOSCO, M.D., FAAP
RODERICK G. DAVIS, M.D., FAAP
MICHAEL J. HOLMES, M.D., Ph.D., FAAP
CHAD B. PRESTON, M.D., FAAP
JOANNE P. CORDARO, M.D., FAAP
SHERRY W. SMITH, M.S., P.N.P.

1700 Hudson Ave
Rochester, N.Y. 14617

12 MONTHS

By Dr. Chad Preston

Nutrition

By 12 months, your child may be eating mostly table food. By their first birthday, most kids are developing good fine motor skills to help feed themselves, and there aren't a lot of foods they can't have. Older recommendations to delay introduction of potentially allergic foods like fish, eggs and peanuts were based on a small amount of available research. More recent studies have had conflicting results. Current American Academy of Pediatrics policy states that there is no current convincing evidence that delaying these foods will prevent allergic disease. Discuss with your doctor what is best for your child.

Continue to avoid choking hazards—anything hard or crunchy like nuts, popcorn, carrots, apples, etc. Make sure foods are cut into small pieces, especially round items like grapes and hot dogs. Strive for healthy snacks like fresh fruit between meals. Eat together as a family and do not push your child to “clean the plate” if not hungry. Brush teeth twice per day with a non-fluoride toothpaste.

Unless otherwise directed by your doctor, whole milk is the drink of choice between age 1 and 2. Toddlers need the extra fat both for growth and for development of the brain. Average intake is 16 to 24 ounces per day. Let your doctor know if your child takes more than 32 ounces per day, as this may put her at risk for constipation and iron deficiency anemia.

Because almost all of us are vitamin D deficient, I recommend that all 1 year olds take an over-the-counter vitamin like Poly-vi-Sol. Iron is not necessary unless indicated by the results of bloodwork.

Between 12 and 18 months, try to wean off the bottle (and pacifier). Every child will adapt to the sippy cup differently. Some may prefer to tip their head back and drink, while others may like to suck through a straw.

Safety

Continue to promote a safe home environment: working smoke and carbon monoxide detectors, stair gates, outlet plug covers, latches on kitchen cabinets, hot water heater set at maximum of 120 degrees, supervision of animals around the child. Make sure there are no small objects like buttons or coins that can be grabbed and swallowed. It is not too early to talk to your toddler about street safety.

All kids should wear sunscreen when outdoors in the sun. Even kids that don't burn need protection against skin cancer later in life. Choose a sunscreen with SPF of at least 15 that protects against both UVA and UVB rays. Remember to reapply every few hours or after swimming. Even with sunscreen, try to avoid too much outdoor time in the hottest midday hours.

A study in the December 2007 issue of the journal *Injury Prevention* found that from 12 to 23 months of age, forward-facing children were five times more likely to sustain a severe injury in a crash than rear-facing children. Therefore, the American Academy of Pediatrics recommends keeping your child rear-facing until age 2 or when he or she reaches the highest weight or height permitted by the seat manufacturer.

Development

Read together. Talk and sing to your baby all the time to get her interested in language. Children should not watch any television before the age of 2. There are many companies that want to sell you DVDs, but no study has ever shown any educational benefit in children younger than 2. In fact, there may be some harm. Studies have shown:

Children who watched the most television at 12 months had 28% more attention problems at age 7. (*Pediatrics*, April 2004)

In infants from 8 to 16 months of age, each hour of daily viewing of baby DVDs was associated with lower scores on a language development test. (*Journal of Pediatrics*, October 2007)

Illness

If your child ingests any medicine, chemical, or other potentially hazardous substance, immediately contact Poison Control at 1-800-222-1222.

Fevers are common in this age group. Fevers can be very high, although it is rare to go much higher than 104 degrees. The number on the thermometer does not tell you "how sick" a child is—that is, a child at 103 is not sicker than a child at 102. Temperatures between 99 and 101 do not represent a true fever. These slight elevations above normal body temperature are beneficial to help the immune system fight off illness. Temperatures above 101 should be treated with Tylenol or ibuprofen (Advil, Motrin). **Decongestant and cough medicines should never be given to children younger than 4 years.** If a child with a fever is generally acting well (normal activity, appetite, and color, no rashes), then they are best evaluated in our office during office hours.

Remember that there is a doctor to see patients in the office in the morning every Saturday and most Sundays. If you have an urgent issue after hours that cannot wait until morning, call the doctor on call at 342-5665. Before calling, please check the American Academy of Pediatrics Symptom Checker as 90% of common questions are answered there. Go to <http://www.healthychildren.org>, click Tips & Tools, then Symptom Checker. Much more information about infant care is available at our Web site: <http://www.ppgkids.com>

Additional reading: *Caring for Your Baby and Young Child: Birth to Age 5*, revised edition (2004) by the American Academy of Pediatrics. Available in the Monroe County Library System: <http://www3.libraryweb.org>
reviewed and updated May 2011