

PROPER CHILDHOOD FEEDING

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Bruce Berkowsky, N.M.D, M.H., H.M.C.

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Overview

A lifelong legacy of good health emanates from the institution of correct feeding practices at birth. Unfortunately, in this era, feeding children in accordance with Nature's dictates has fallen out of fashion.

Good parents make every effort to provide for their children materially and to orient their moral compasses. But their nutritional guidance responsibility is often neglected. As a result, many parents unwittingly subvert their offspring's health and human potential. Proper feeding not only benefits the child in the immediate sense, but also serves as a paradigm the child is likely to adopt and pursue throughout his or her adulthood. Proverbs 22:6 teaches: **“Train a child in the way he should go, and when he is old he will not turn from it.”**

For the most part, disease is not, as is popularly thought, a direct outcome of microbial infection; rather, it's the result of disregarding one of Nature's primary laws: Human beings have an inherent relationship with those fundamental elements necessary for life: *proper diet; pure water; fresh air; adequate sunlight, exercise, warmth, rest and sleep; emotional harmony; proper posture.* Disease is an outgrowth of a *deficiency or excess* of one or more of them.

Violation of this law leads to the two primary roots of disease: *autotoxemia and enervation.* Autotoxemia is a polluted state of the internal milieu. This toxic burden impedes all bodily functions, including elimination, and so increases and perpetuates itself. Enervation is a state characterized by depletion of nerve force and reduction of the body's resistance to infection. These two conjugated factors fuel each other and constitute the primary disease state. Acute ailments such as *colds and flu* as well as chronic ailments such as recurrent *middle ear infections, diarrhea and eczema* are secondary effects of this primary state.

When systemic level of toxicity surpasses the body's threshold point of tolerance, a crisis of toxemia ensues. Medical science classifies these crises as acute “diseases,” according to their unique symptom complexes (e.g., bronchitis, colds, flu, pneumonia, etc.).

In reality, these crises are the body's urgent efforts toward elimination of toxins. The crisis of toxemia continues until the level of toxicity has been reduced (via sweating, fever, vomiting, diarrhea, nasal drainage) to below the threshold point of tolerance, after

which it subsides as naturally as it arose. However, if drugs are used to suppress toxic discharges, the poisonous matter (which the body is seeking to expel) is forced away from eliminating organs and secreting surfaces, and forced deeper into the tissues which further lowers the body's vitality, setting the wheels of chronic disease in motion.

In this era, *traditional* naturopathic knowledge regarding childhood feeding has fallen into near-total obscurity. Harry Benjamin, N.D. writes in *Everybody's Guide To Nature Cure* (1936): **“Parents assume that the children's ailments of today are something inevitable. So they are –if children are fed as they are today.”** The import of this observation has increased exponentially in this ubiquitous junk-foods era.

Aliveness is dependent upon what naturopaths refer to as *vital force* and Chinese medicine calls *chi*. Vital force is the fundamental energy sustaining life and is present in every cell's vibratory, biological process. The Chinese feel that a large proportion of vital force is liberated from food upon digestion and assimilation. Thus, the quantity of vital force—the very force that is the impetus of growth and development—is dependent upon our food's quality.

Medical science now clearly acknowledges that childhood diet is a critical factor in adult health. A recent study published in the *International Journal of Cancer* found that weekly servings of French fries to girls between the ages of 3 and 5 significantly increases their risk of developing breast cancer later in life.

By now, the link between improper childhood feeding and lifelong obesity with all its associated health risks (e.g., diabetes, heart disease, cancer) is well-established. Astonishingly, 60% of American children are obese (i.e., over 30% of bodyweight is fat). Unlike adults, a child's body, when challenged by an excess quantity of fat, creates new fat cells rather than relying upon the storage capacity of pre-existing cells. At maturity, the number of fat cells is fixed and can never be reduced. Normally, the adult body contains 30 to 40 billion fat cells. Adults who became overweight as children may have as many as 90 to 120 billion fat cells.

In cases of childhood physical illness and behavioral dysfunction, a pivotal and often overlooked factor is improper diet. In the digestive system, intestinal villi represent a type of “root system” charged with absorbing nutrients from the small intestine and transporting them to the blood. Like a plant, the integrity and vitality of the human organism is largely dependent upon its root strength and the quality of accessed nourishment.

Poor nutrition directly contributes to behavioral- as well as physical dysfunction in a variety of ways. Vital nutrient deficiency is an obvious one. For instance, zinc-deficient children are not only immunologically compromised, they are also subject to learning disabilities, moodiness and proneness to violent behavior.

Proper childhood feeding actually begins before birth. William Howard Hay, M.D. writes in *Superior Health Through Nutrition* (1891): **“As we eat, so are we. We die, cell by cell, every day of our lives and, cell by cell, we are recreated. We not only have the means of proper re-creation in our hands through our manner of feeding, but also original creation [of cells] depends largely on the state of the mother’s chemistry.”** Thus, the importance of optimal prenatal nutrition cannot be overemphasized. For many children, a pattern of *food allergies, obesity and chronic unwellness* is institutionalized before they are even born.

Mother’s Milk

Human milk meets the infant’s special growth requirements. To accommodate evolving nutritive requirements, both composition and volume of breast milk change as the infant matures. Each species’ milk is adapted precisely to the specifications of its own young. Accordingly, vast differences exist between nutrient profiles of human milk and those of other species. For instance, human milk contains 1% - 2% protein as opposed to the 3.4% protein-content in cow’s milk.

Importantly, human milk’s amino acid composition is ideally suited to facilitate the great degree of brain growth that occurs in a child’s first year of life. Cow’s milk, on the other hand, is structurally adapted to rapid development of muscle and bone mass rather than brain tissue (adult cows have relatively small brains).

Whether milk or soy based, commercial baby formulas are a highly problematic substitute for mother’s milk. Commercial formulas evoke diverse *allergic reactions* which often affect digestive function. Formulas generally provide difficult-to-digest proteins (more than baby can absorb), giving rise to putrefying accumulations in the bowels. Also, undigested protein can enter the bloodstream which causes distal-site inflammation and elicits adverse immunological responses.

Mother’s milk contains only one type of sugar: *lactose*. Artificial formulas are laden with refined sugars such as sucrose, maltose and dextrose which tend to ferment in the child’s digestive tract, interfere with the digestion of formula protein-content and lay the groundwork for many catarrhal disorders associated with childhood, including *chronic ear infection, tonsillitis, croup and colic*.

The Nursing Mother’s Proper Diet And Lifestyle

Despite breast milk’s superiority to the milk of other species and to commercial formulas, this does not mean that all breast milk is of good quality. Quality of breast milk will vary in accordance with the quality of mother’s diet and lifestyle. A healthy, thriving child is most likely the product of a nursing mother’s lifestyle that is characterized by: proper diet; adequate fresh air, exercise, sunshine, rest and sleep; emotional balance; avoidance of negative influences.

The nursing mother should eat a high water-content diet consisting of large quantities of fresh fruits and vegetables and comparatively smaller quantities of whole grains, legumes, seeds, nuts, fish, skinless chicken and turkey. She must also avoid all common allergenic foods (e.g., dairy, wheat, peanuts, etc.) and rotate moderately allergenic foods such as corn and eggs on a four-day schedule.

The Three Feeding Periods Of Childhood

Ideally, childhood feeding should consist of three clearly demarcated phases:

- 1) *Breast milk period*: breast milk is taken along with supplemental fresh, raw fruit and vegetable juices.
- 2) *Transition period*: intermediate-phase when the child takes both breast milk and proper solid foods.
- 3) *Post-weaning period*: the child subsists on a diet similar to that of adults.

Ultimately, the best way to ensure a child's physical and behavioral integrity is through careful and knowledgeable implementation of each phase. For example, a common feeding error in infants is the premature introduction of starches. Starches do not occur in breast milk and infants are unable to digest it.

Starch digestion begins in the mouth as saliva contains the starch-splitting enzyme *salivary amylase*. Noted naturopath Paavo Airola, N.D. writes in *Every Woman's Book*: **“Salivary amylase will not be present in a child in any appreciable quantity for at least 6 months. Another starch-digesting enzyme secreted by the pancreas is also not present in sufficient amount to digest starch....The baby's digestive system is not equipped to efficiently digest starch foods until 1-year or longer, and therefore, he should not be fed starchy foods for at least that long.”**

It's common practice for mothers to introduce cereals to 4-month-old infants. This crucial feeding error may impact the child's health for the rest of her life. Herbert Shelton, N.D., founder of the Natural Hygiene System, writes in *The Hygienic Care Of Children*: **“The present widespread practice of feeding cereals, baked potatoes, bread and other starch foods to babies is responsible for much illness in them. Indigestion, constipation, diarrhea, colic, skin rashes, tonsillitis, etc. are chief among the outgrowths of such feeding.”** I have always advised mothers against feeding starches to babies until they are at least 14-months-old.

Clearly, investing in a child's future must go beyond a college education fund to include parental investment of time and effort to learn about and implement optimal prenatal and childhood nutrition. In fact, it is one of the most important gifts a child can receive.

BIO: Bruce Berkowsky, N.M.D., M.H., H.M.C.--registered naturopath, master herbalist, classical homeopath, nationally certified in massage and therapeutic bodywork, member of The American Naturopathic Medical Association, The Registry of Naturopaths (UK) and the British Naturopathic Assoc.

He is the founder/teacher of both *Spiritual PhytoEssencing* and the Natural Health Science System (NHSS). Dr. Berkowsky writes two internationally acclaimed e-journals: *The Journal Of Spiritual PhytoEssencing* and *Nature's Therapies Journal*.

E-mail: DrBruceB@cnw.com. To sign up for Dr. Berkowsky's free, on-line journals or to learn more about his books, classes, teleseminars, workshop recordings, *Spiritual PhytoEssencing Distance Learning Diploma and Master's Courses* and more, visit: www.NaturalHealthScience.com