

Dr. Briana Sinatra: We've all experienced it. You plan your meals, you spend precious time after a

busy day cooking a tasty and nutritious meal for your family, only to have your picky kid turn their nose up at it. They'd much rather just have some mac and

cheese, or a hot dog.

Dr. Drew Sinatra: There are ways to avoid this battle up the table.

Dr. Briana Sinatra: Today, we'll teach you some tips and tricks that we've learned with our two

young boys to make sure they're getting all the nutrients they need and enjoying their meals — like creative, fun ways of hiding veggies and ways to

make the whole dinner time routine fun.

Dr. Briana Sinatra: Hi, I'm Dr. Briana Sinatra.

Dr. Drew Sinatra: And I'm Dr. Drew Sinatra, and this is **Be HEALTHistic**.

Narrator: Welcome to **Be HEALTHistic**, the podcast that is more than just health and

wellness information — it's here to help you explore your options across traditional and natural medicine, so that you can make informed decisions for you and your family. This podcast illuminates the whole story about holistic health by providing access to the expertise of Drs. Steve and Drew Sinatra, who together have decades of integrative health experience. **Be HEALTHistic** is powered by our friends at Healthy Directions. Now, let's join our hosts.

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channels.

Dr. Drew Sinatra: All right. Well, this is Dr. Drew Sinatra — and I've got my wife, Dr. Briana Sinatra,

on the podcast today.

Dr. Briana Sinatra: Hi.

Dr. Drew Sinatra: And today, this is another episode about "Ask Dr. Mom and Dr. Dad," and we'll

be talking about fussy eaters. Because, well, we have two kids — we have a boy that's seven and a half, and then another boy that is four and a half. And as



parents, we struggle, too. So we wanted to provide some tips for you on what we do to allow our children to eat healthier foods. Okay. Well, Brianna, let's talk about what we do. How do we do it? Because look, we struggle as well, just like other parents listening to this podcast. So how do we do it?

Dr. Briana Sinatra:

Absolutely. It is a common issue, and I definitely see parents in my practice coming in at all different ages and stages, not quite happy with what their kid is eating, or having a struggle around the dinner table. So we will talk about all of that. But I think an important place to start is that if you have an idea of how you want your child's nutrition to be at a young age, the best place to think about this and start creating an impact is actually the moment you find out that you're pregnant. Because I think maybe what people don't realize is that taste develops as your child is in the womb. So their taste buds are actually maturing, are starting to be developed even as early as three to four months. So what the mother chooses to incorporate in her diet, is what the baby will start tasting and what they might start getting a preference to. So incorporating strong foods like garlic, and ginger, and spices, can really help set the stage later on for maybe a wider acceptance of different spices by your child.

Dr. Drew Sinatra:

This is probably the reason why our kids love Indian food, because you ate a lot of Indian food during pregnancy.

Dr. Briana Sinatra:

I craved SO much Indian food when I was pregnant with our first son. It was almost comical, and I didn't really have a preference to spice before that. But women crave different things during pregnancy. That's what it was for me. So I think don't be afraid to introduce all those different spices when you're pregnant. And then during the food introduction years — and we can start talking about that, too.

Dr. Drew Sinatra:

Well, speaking of Indian food, while we are on the topic — we went two nights ago to an Indian restaurant here in town. We walked over there with our boys, and we ordered the baingan bharta, which is an eggplant dish. We had the chicken saag, and we also had a coconut curry lamb dish, and some gluten-free naan.

Dr. Briana Sinatra:

Yeah, it was all gluten- and dairy-free.

Dr. Drew Sinatra:

All gluten- and dairy-free. Our kids loved it. And what I love about Indian food is not only the spice, but also the way that they hide veggies in the food. The chicken saag that we have is full of spinach that's pureed in there.

Dr. Briana Sinatra:

Yeah.



Dr. Drew Sinatra: And Kai was just devouring that thing on his gluten-free naan. So, there's so

many good things about Indian food, I can't speak highly enough about it.

Dr. Briana Sinatra: It's true.

Dr. Drew Sinatra: So, what else in terms of the pregnancy piece — like what else can you think of

in terms of the spice component, or introducing different foods?

Dr. Briana Sinatra: Yeah, I think there's so much more awareness about your diet during

pregnancy, and how that is so important for the health of our child. And so I think just another element of that to think about is incorporating different spices — because not only do those spices have antioxidants and great aspects for your health and your future baby's health, but it's also a wonderful way to start incorporating different tastes for you and then for your baby, as your child

is tasting it through your amniotic fluid as they're developing.

Dr. Drew Sinatra: Exactly. Well, for listeners that aren't pregnant, they already have children. Let's

say they've got an infant on hand. Let's tell our listeners about what we did with

baby-led weaning, and why we did that.

Dr. Briana Sinatra: Yeah, absolutely. So if you are currently breastfeeding or formula feeding your

child, and you're getting close to the time when you would start introducing foods, something that was super positive for our family and that I've seen be really positive for a number of my patients who this resonates with is something called baby-led weaning. And so this isn't new, this is something that cultures around the world have probably been doing for years and years. But in North America and Europe, it was re-popularized with a book called *Baby-Led Weaning*, by Gill Rapley and Tracey Murkett. And so it is the idea of not pureeing foods and then spoon-feeding it to your child. Instead, it is still maintaining either the breast milk or the formula as their primary form of nutrition, but giving them the space to explore whole pieces of food, safe sizes of food. So, we'll talk a little bit more about that. But if you are interested in this, I strongly recommend reading the book because it will just go through a lot

of the safety aspects about it.

Dr. Drew Sinatra: Well, as a dad who...changing Kai's diaper was my first diaper, I had very little

experience raising kids. And so once we did this baby-led weaning — it was a little frightening for me, actually. And I remember there was a time where I looked at Kai, and he looked like he was struggling or almost, like, gagging on one of the foods. It may've been, like, a cucumber stalk, or it may've been a celery stalk or something like that. Can you tell our audience about that gag

reflex, and the development of that and how it gets delayed?



Dr. Briana Sinatra:

Yeah, so as far as the safety — you want to feel comfortable with it, but I think another important thing is for you to feel comfortable with it and understand what's going on, so you can educate those around you. Because I think it can be startling, too, for — hopefully, you're having that conversation with the father, too, and you guys are making that decision together. But even grandparents...we had grandparents watching our kids eat, and they were concerned, or the child starts to cough, or look like they're gagging, and their instinct is to go "GASP" or pat them on the back — when actually, that's not what you want to do. So, let me just explain...so the idea is that you put out pieces of food, and then the child self-feeds. So for example, if a child puts, like, they took a bite of a soft cucumber or something, they're moving it around in their mouth. And actually as an infant, the gag reflex is a lot more anterior on the tongue. So as we...

Dr. Drew Sinatra:

Okay. So it's location of it that's different, not necessarily that it's delayed. Got it.

Dr. Briana Sinatra:

Exactly, yeah. It's more anterior. So as we age, that gag reflex gets triggered further, further back on the tongue. So it's a bit of a safety mechanism. The child will actually start to gag and push that food forward, away from their airway and their epiglottis in the back of their throat — that little piece of tissue that's hanging down — a lot sooner. So, we think they're gagging because it's close to their airway and they might be choking — but it's not. It's actually just in a place where their tongue, where their natural instinct is to go "UGH" and push it forward. So you want to stay calm, watch them, make sure that they're safe...this is never something you let a child do unsupervised, by themselves. You always want to be there with them, ut what you don't want to do is gasp, or look startled yourself...or do anything that will make them scared, and cause them to "GASP," because then that could push food back.

Dr. Briana Sinatra:

So if it's something that you want to do, I think, reading about it, making sure that you feel comfortable with the safety is super important. But if I can, I'd just love to say four main reasons for why I thought it was so beneficial for our family, and starting off with the healthy eating. So one of the biggest things was, even before our child was ready to eat — and when you are looking for readiness, it's signs of being able to sit on their own, they are grabbing at the food that you have, they might already have some teeth coming in. There's some important signs to be ready for, it's not necessarily just based on age. Sometimes they stay around four months, sometimes they say around six months — it might be different for each child. But I think they really need to be showing those readiness signs. So even before that, when they were able to sit, we would have the baby in the family up at the dinner table with us. So that they could be watching us eat, and they were part of the family meal.



Dr. Briana Sinatra:

And so, one of the things I really love about baby-led weaning is, they're part of the dinner table from the get-go. You have a high chair with a big wide tray, or you push the baby's chair right up to the table. There's certain ones where they can actually have the table be their eating surface, as well. And you just lay out a variety of food in front of them. And so they're eating off their plate, just like everyone else around the table is eating off their plate. Another beautiful thing is that it exposes them to the taste, the texture, the aroma of the food, without an agenda. I felt like...didn't you feel like it really gave us an opportunity to connect, eat our own meal around the dinner table...we weren't focused on the baby, spoon-feeding the baby first, and then eating for ourselves.

Dr. Drew Sinatra:

Well, it's really set the stage, too, for them eating healthy foods in the future. Because that whole texture piece, or the color of something is so important. When I cook a meal — let's say if I cook that zucchini Bolognese, which the first couple of times, the kids loved it. They absolutely loved it. And then I'll cook it again, and they'll look at it and say, "I don't want that." And I'm like, "You haven't even tried it yet. It tastes so good. You loved it last week. You haven't even tried it yet." But they get so caught up in just looking at the texture, the taste or something, or the way the food looks and such. And I think that has helped us later on, though, in terms of them exploring different foods.

Dr. Briana Sinatra: Yeah.

Dr. Drew Sinatra: So in looking back, I am so grateful that we did that because it has set the stage

for us going forward.

Dr. Briana Sinatra: Yeah, absolutely. I think another thing that it's really great for is developing

motor development. If you're the one actively feeding your child, they're more a passive eater — versus, if food is another activity for them, they are increasing their hand-eye coordination by getting the food to their mouth. I remember them first, like, taking the food and smacking it to their cheek, and then using their other hand to gradually move that hand and that food towards their

mouth.

Dr. Drew Sinatra: It's avocado smeared all over the face.

Dr. Briana Sinatra: Yeah, it's not for the faint of heart. It will be messy. It is a whole activity on

itself. And then another point that I just wanted to bring up that I think is super important is, it's also an opportunity for self-regulation for a child. If you put safe pieces of food in front of a child, and they start eating — when they are done, they are done. Versus, if you're spoon-feeding a child and then they start to turn their face away, I think it's easy as a parent to think, "Oh, we didn't finish this bowl or this jar. I just want them to have a little bit more." And so you might



go, "Open the hanger..." or try and get more food in their mouth. And I think of course, it's well-intentioned — but I think that can also be where that starts, is pushing a child past their limit and not having them be in tune with their hunger and full cues, and maybe pushing past that. So I think this creates a less goal-oriented way of eating. I'm glad we did it.

Dr. Drew Sinatra: Absolutely. Yeah. And another piece that you brought up that I absolutely love

that we try to do at every meal is to have them there, eating their own food. At least, well, we're eating the same food, but they're deciding, they're choosing — "Hey Dad, can I have some of that?" And Luca will get some salad out of the bowl, or Kai will pick up another hamburger or whatever it is. And they're really deciding what they want to eat, and how much of it they want to eat. Instead of

us telling them, "Well you need to eat this much."

Dr. Briana Sinatra: Absolutely. And I think that's another point, too — it's easy within our society to

think, "Oh, kids like sweet foods, or they need the pasta or the carbs." And I think marketing-wise, they've really grabbed onto that. There's so many crackers and carbohydrate foods that actually have a lot of hidden sugar in it that are geared towards kids. And we think, "Oh, kids shouldn't like vegetables." But really, if they're in front of them and that's what they're used to eating — if that's what is being modeled at your dinner table, if you have a variety of the foods that you would eat, and let them choose out of that because you know that there's healthy options instead of having this meal for the kids, this meal for the adults. Then, if it's a healthy dinner that you're making for yourself, so you know that your child can choose anything within that meal and it's going to

be a healthy option for them, too.

Dr. Drew Sinatra: And another piece that we found to be really helpful is to make it fun, in some

way. So at times, we've had broccoli on the table. Sometimes they love the broccoli, other times they don't want the broccoli. And the times that they don't

want the broccoli, we typically will hold them up and say, "Cheers!"

Dr. Briana Sinatra: Yeah, we went through big cheers-ing phase! That's true.

Dr. Drew Sinatra: And I encourage the listeners, too, if you get curious or if you just have fun at

the dinner table in some way, your kids will eat better. That's what we found.

And to take the stress away, too.

Dr. Briana Sinatra: Yeah, absolutely. And I think — not to say that our kids have never been picky,

because there's definitely times when they're not. And in those times, we have used different dips — or we went through a period of using nutritional yeast, and sprinkling nutritional yeast on the steamed broccoli and we called it fairy



dust. And so we would let our son sprinkle the fairy dust. For whatever reason, that made it so much more exciting.

Dr. Drew Sinatra: They love it.

Dr. Briana Sinatra: It gives it a little cheesy taste, they're getting some good B vitamins. So yeah, be

creative. I think another thing, too, is we often think that babies want more bland foods. But actually, spice is exciting, even for a younger child. I remember when we were making egg yolk omelets for Kai, and he loved them — and then all of a sudden didn't. And so I started adding cumin, or a little bit of curry powder to them, and he gobbled them up. So I think we don't want to use hot sauce for kids, we don't want to use salt for kids in excessive ways, especially for a young infant. But I think not being afraid to add flavor and spice, it actually... just like it does for adults, it makes it exciting for kids and it changes things up. And I think it really helps to develop their palate, because I think the more you do before the age of three, it will probably make it easier going forward.

Dr. Drew Sinatra: I agree. Well, let's transition into talking about older fussy eaters. Okay, so

we've got our son, Kai, who's around seven and a half right now, and he's in a new phase of being fussy. So let's get some tips and other things around what

we can do, or how else can we help?

Dr. Briana Sinatra: Yeah. Well, so, one thing that we've been doing lately is finding something we

know they like. So, our kids are gluten-free, they do bread, and...

Dr. Drew Sinatra: they love bread.

Dr. Briana Sinatra: ...like anything like that. And so, one thing that's been super helpful lately

is...and he actually doesn't like eggs, he's kind of going through a no-egg phase. And so, what I've done is, I've found some gluten-free pie crust and I will make a quiche. So I will blend up eggs with pesto — it's actually like a walnut, kale, vegan pesto — saute zucchini, onions, sometimes we'll do broccoli, whatever veggies you want to put in there, and bake the quiche. And literally, our kids come home — they're not even focused on the fact that there's veggies in there

and eggs in there. They see that pie crust, and they're like, "Pie!"

Dr. Drew Sinatra: Yeah, it's pie to them.

Dr. Briana Sinatra: And they eat the whole thing!

Dr. Drew Sinatra: Yeah, that's a great way to get vegetables into them.



Dr. Briana Sinatra: So, find something that you know they like, like the pie crust. Literally, I could

put anything in there, and they are just so focused on the fact that it's in a pie

crust that they will eat it.

Dr. Drew Sinatra: Yeah. That's why we make quiche probably once a week around here. Yeah.

Dr. Briana Sinatra: We're on a quiche roll.

Dr. Drew Sinatra: Now, another way that I've found to be creative in bringing more vegetables

into something, or food, is a smoothie.

Dr. Briana Sinatra: Absolutely.

Dr. Drew Sinatra: And generally, in the last couple of weeks, I've been making a smoothie that has

a half a banana, we have some hemp or almond milk that I put in there, and I'll throw in some frozen blueberries, and I'll throw in two heaping handfuls of, like,

a greens mix, like a super-greens mix.

Dr. Briana Sinatra: Or spinach.

Dr. Drew Sinatra: Or spinach.

Dr. Briana Sinatra: Like, you always you can hide it in there without tasting it.

Dr. Drew Sinatra: Right. And then...

Dr. Briana Sinatra: With a banana or some blueberries.

Dr. Drew Sinatra: I'll throw in sometimes a big tablespoon of like a nut butter, like an almond

butter or a mixed nut and seed butter, and then...

Dr. Briana Sinatra: Yeah, good fat and protein.

Dr. Drew Sinatra: And then I'll also throw in some MCT oil. And in the last couple of weeks, and

even couple of months for that matter, I've been thrown in some colostrum to help support their immune systems in their gut and everything. And when I make that, Kai loves it and he drinks it all the time, asks for it every morning. And that's a great way to get those vegetables in there, like those greens.

Dr. Briana Sinatra: Yeah, usually greens for breakfast for a child can be tricky. So that is a great

way.



Dr. Drew Sinatra: Now, another way that I think works for fussy eaters is to allow them to get

involved in the dinner process, or the lunch process, or whatever it is that you're making in the kitchen. So if you bring them in there and you want to have them stir up something, or take one of the spatulas and get something out of the bowl, or help put ingredients into the pot if you're making a stew or a soup or something like that. That seems to get them really into it — and then once they've seen how it's been cooked and prepared, they're ready to eat it at the

dinner table.

Dr. Briana Sinatra: Absolutely. Again, with the difficulty with eggs — we started doing French toast.

And Kai was able to crack the eggs, dipped the bread, we let him do it on the

skillet and turn it — and he wanted to make French toast every day.

Dr. Drew Sinatra: Well, and it's so good for him — and also good as a parent, because it teaches

us to be patient.

Dr. Briana Sinatra: Absolutely.

Dr. Drew Sinatra: All those spills that occur, and pans that get dropped, and glasses that break and

whatever it is. I just take a big, deep breath and say, "Well, hey, this is teaching

him how to eat better foods."

Dr. Briana Sinatra: And it's giving him ownership, and a sense of responsibility, and contributing to

the family. And I think all of that's really important, especially if you can be there supervising — let them be a part of it. Pull a stool up for your younger child, or have them sit on the counter in a safe way and really watch you making

the food, have them be a part of it.

Dr. Drew Sinatra: Now, when we go out to dinner, which we do around once or twice a week —

and we'll go to Indian food, for example, I love that place. What we'll do is, we will never ask for the children's menu. And I'm just 100% on that, because I find that the children's menu, the kids' menu, has a bunch of junk food on it. And it's I think unfortunate that we as a culture, we tend to just separate out, "Well, this is children's food. You're going to have your mac and cheese, and your hot dogs, and whatever it is else in there, your chicken nuggets" — and then there's going to be the adult food. So when we go out and they asked me, "Do you want the children's menu?" I say, "No, thank you. I want my child to choose off the adult

menu."

Dr. Briana Sinatra: Yeah, it's a lot of high carbs, it's a lot of wheat and dairy. I think because we did

delay wheat and dairy, it often wasn't an option for us. But some things that I found really helpful was for us to choose what we were going to have, and then give the child pieces of that. So if we're getting a chicken breast, cut some



pieces of chicken for the child. If we're getting veggies on the side, beans or anything like that, the child can easily eat that. And another thing is looking at the soups, and choosing a soup for your child.

Dr. Drew Sinatra: Right. And also, let's say...my older son, Kai, loves hamburgers. So we'll get him

a hamburger with no bun, or a gluten-free bun if it's available, or a lettuce wrap. And if they ask for fries, well — before they even ask for fries, I'll say, "I'll have the salad option, please. The salad side." So in front of him he's got this salad.

Dr. Briana Sinatra: Oops buddy, sorry. They don't have fries here.

Dr. Drew Sinatra: They don't have fries today, bud, I'm sorry.

Dr. Drew Sinatra: Okay. Well, what about supplementation with different vitamins and minerals

and such? What is your take on that? Because obviously, we try our best as parents to feed our children nutrient-dense foods. We know that the soils these days are not as rich as they were 30, 40, 50 years ago, in terms of nutrient intake. So what do we do? What do you recommend to our listeners about

supplementation?

Dr. Briana Sinatra: Yeah, I think that there's different periods where kids might be more picky,

more fussy, their appetite might change — and parents might be concerned, "Is my child getting enough nutrients?" I think always if we can get it from the diet by eating the colors of the rainbow, that's ideal. But if that isn't happening and that's a struggle in your house, a way to ease that anxiety, probably mostly for the parents, is to know that there are some helpful supplementation options that can be used. So, something like a good quality kid's multivitamin — I would try to stay away from the gummy multivitamins, or any multivitamin that

contains sugar, it's just not great for the teeth. And anything that has any dyes, of course, we wouldn't want to do — but there's some great options out there.

Dr. Briana Sinatra: Another thing that we love are probiotics, supports their gut health. Of course,

all the veggies and everything also supports their gut health. But probiotics are amazing for immune support, all of that. So that's definitely something that we've included for our kids. Cod liver oil or fish oil, has those good omega oils, really great for the brain and nervous system development. The cod liver oil has that good vitamin D, vitamin A. Also giving additional vitamin D by itself,

depending on how much sun exposure your family gets, and where you might

live. And, what else?

Dr. Drew Sinatra: Those are main ones.

Dr. Briana Sinatra: Yeah.



Dr. Drew Sinatra: And I mentioned earlier colostrum, just because I find that during the fall and

winter months when the cold and flu season is at its peak, it's good to support

their immune system by using colostrum.

Dr. Briana Sinatra: Yeah, and colostrum as a reminder, is that first milk that mom produces after

the baby is born. It's super-high in immunoglobulins, which is really great for the immune system, and it also helps to heal the leaky, more permeable gut of a newborn. So it's really supportive for the whole digestive system, and you can also get it from grass-fed cows. And so that is the form that we've been using.

Dr. Drew Sinatra: Well, I want to make sure we talk a little bit about sugar, and hidden sugars in

foods. Now, I think our listeners are aware of soda being one drink that I would certainly not recommend that your children drink. There's other foods, like ketchup, for example, that's our kids love that does have a high amount of sugar in it. And there's other foods that, too, are just hidden with sugar. So let's talk a

little bit about sugar, and how to avoid that.

Dr. Briana Sinatra: Yeah, I mean, when you talk about soda...! think another drink that is often in

many people's fridges that they don't think about, and even serve for breakfast,

is juice. Like orange juice, with...

Dr. Drew Sinatra: Loaded with sugar.

Dr. Briana Sinatra: Yeah, and well-intentioned and it has vitamin C in it — but I would much rather

a child eat the whole orange, because then you get the fiber, too, that's

moderating that glucose spike. That juice by itself is a huge hit of sugar, which you really want to make sure they're having some good protein to help balance that. I think there's a lot of marketing done to kids that includes sugar. And so even health foods that are out there, you really want to read the ingredients and make sure there's not added sugar there. For example, I was sitting with a mom, and she was in a rush. She was grabbing her coffee in the morning and wanting to grab something for her son, and grabbed one of those Odwalla fruit smoothie drinks. Great. There's some veggies in there, there's some fruit in there, that's a healthy option. She turned it around and saw that there was 47

grams of sugar in there.

Dr. Drew Sinatra: 47 grams of sugar.

Dr. Briana Sinatra: And it wasn't just from the fruit, there's actually cane sugar added. And so you

wouldn't think, "Oh, I'm getting a healthy juice."

Dr. Drew Sinatra: What a healthy juice!



Dr. Briana Sinatra: Right, I'm getting a healthy smoothie. But you always got to take a look because

you'll be surprised, so many hidden things are in there.

Dr. Drew Sinatra: Well, with our boys, we do buy gluten-free bread sometimes. We try to buy a

locally-produced bread, for that matter, because a lot of these store-bought gluten-free breads contain sugar in them. You have to look on the ingredients, you may find some sugar in there. And a lot of the gluten-free pastries and cookies and all that kind of stuff, those things are loaded with sugar. So we tend

to stay away from those, of course.

Dr. Briana Sinatra: Cereals, too.

Dr. Drew Sinatra: Cereals, too.

Dr. Briana Sinatra: Trying to find a cereal that's sweetened with fruit juice or a maple syrup, versus

a cane sugar. We don't need all that cane sugar.

Dr. Drew Sinatra: Yeah, exactly. And I should share the experience that we had with our home

dehydrator. We had that Excalibur, massive dehydrator. And we went through this phase where we were putting bananas in there, slicing them up really thinly, adding some cinnamon on top and dehydrating them for about a day.

And we were eating these things like crazy because...

Dr. Briana Sinatra: They were so good.

Dr. Drew Sinatra: We thought to ourselves, "Well this is fruit, it's going to be good for us." And

low and behold within, I think it was around six to nine months later, we all had cavities. And if you're going to do dried fruit out there — which we sometimes do, in like a trail mix or something like that, I'd recommend just brushing your teeth after, or flossing your teeth to make sure you get that dried fruit out of

there, because that can just lead to cavity production.

Dr. Briana Sinatra: I think it's really easy, especially when you're on the go with kids, you want

something that is dry. Because it's easy to pass to them, you're already changing their clothes so many times a day, you don't want them to get messy on their clothes and have a whole another thing to deal with. But so many of the dried fruit options...dried food options, crackers, dried fruit. Even the crackers, they stick to your teeth. Definitely the dried fruit sticks to your teeth and it can precipitate cavities, which we don't want. So honestly, with the baby-led weaning, we would just strip our kids down. Our youngest ate naked until he

was at least three.

Dr. Drew Sinatra: Sometimes he still eats naked.



Dr. Briana Sinatra: It's true.

Dr. Drew Sinatra: One more thing I want to mention about sugar is that when we make a drink

with Pellegrino, and we put some lemon juice in there. I might add some flavored stevia, like a vanilla stevia, and the kids love it. And then they're not

getting any sugar in there.

Dr. Briana Sinatra: Yeah, absolutely.

Dr. Drew Sinatra: And there's stevia sodas out there that actually taste pretty good, too. And so

sometimes as a treat, we'll give our kids one of those.

Dr. Briana Sinatra: Or even just sparkly water with a splash of juice. If you want a little bit of that

flavoring, like a little splash of orange juice with sparkling water, a little splash of pomegranate juice or something like that. So you're getting the flavor but you're

not getting that high amount.

Dr. Drew Sinatra: That's a great point. Well, what's your take on dairy and children?

Dr. Briana Sinatra: Yeah, I think it depends what's going on for the family. Were they able to

breastfeed, or were they introduced to formula at a younger age and have they already been having dairy through the formula? I think dairy is one of the top allergens. So it's always something that I'm checking in on, looking at possible congestion or digestive symptoms. I know even for our kids, both of them reacted to dairy through my breast milk. One of them was much more fussy, colicky, spat up a lot every time I had dairy. And then our other child wasn't fussy at all, but every time I had dairy in my diet, he would have green poos. So for them, we delayed the introduction of dairy until they were after a year old — and then introduced it systematically to see how they reacted to it. So I think it depends if your family reacts to it, and then being extra mindful about when you introduce it. How you introduce it is important, just to make sure you're not missing a reaction and then continuing to feed your child something that they

react to.

Dr. Drew Sinatra: Well, it's also the type of dairy, too. The type of, let's say, cheese, for example. If

we do buy cheese for our kids, we'll buy a sheep's cheese or a goat's cheese,

because typically speaking there's less allergic potential with that, or

allergenicity.

Dr. Briana Sinatra: Yeah, absolutely. Most kids...cow dairy can be quite irritating to the infant gut.

Sometimes kids grow out of that at around three to four months, but

sometimes the goat and the sheep can be better tolerated, and has less of the casein and the whey, if that's what they're, those two proteins, if that's what



they're reacting to. So yeah, I think playing around with different types of dairy to see what is more easily tolerated is a great idea. I think another thing to think of is, dairy can be wonderful — it can be a protein option, it can have calcium, other nutrients in it. It's much better as long as you tolerate it well, then juice or soda, for example. But with any fluid that's filling up a child, you want to make sure that they're not filling up on, you want to make sure that they're having enough, but they're not filling up on the formula or their milk, and not eating enough of the variety of healthy options that you're putting out on the dinner table. So it's that fine balance.

Dr. Drew Sinatra: And for our listeners that don't have any dairy in their home, whether there is

lactose intolerance, or milk allergy or something like that, what do you

recommend for alternative milks?

Dr. Briana Sinatra: So we actually never introduced an alternative milk as something that our kids

would drink out of a cup. Our primary liquid was always water. So there was no question that if it was out of their water bottle that we were taking with us, or at the dinner table — it was always water, no questions asked. But if we were cooking with something, if we were adding something to a smoothie, if we were adding it to an oatmeal or granola, then we would use an alternative milk. And we've gone through different phases of making our own almond milk, making our own cashew milk, using coconut milk, using hemp milk, using almond milk. I think being mindful of the type, there's a lot of milk alternatives that are

actually pretty highly glycemic and there's...

Dr. Drew Sinatra: Well, they add sugar to them.

Dr. Briana Sinatra: They add sugar to them. There's a lot more stabilizing gums in them, and when

you pare it down, there's actually not that much of the actual almond, for example, in there. So everything in moderation is a good way to go by.

Dr. Drew Sinatra: I agree.

Dr. Briana Sinatra: Another thing, too, is if you're really starting to introduce some new foods, and

you want more protein into your child or anything like that, I think making suggestions of dipping a salmon burger in ketchup, or a hamburger in ketchup, is not a bad idea if it's going to help get your child used to that flavor and eating it. We've definitely gone through that. So be gentle with yourself, be gentle with your child. And if you need those little tools to help get down a more varied diet

in the introductory stages, I think that's okay.

Dr. Drew Sinatra: And what we do is when we buy ketchup, we make sure it does not have high-

fructose corn syrup in it.



Dr. Briana Sinatra: Yes. Yeah, I would say go for organic, make sure...I mean, it's going to have

sugar, but yes, avoid the high-fructose corn syrup. And in our case, when our kids started eating too much ketchup, we got the ketchup that had no sugar. It was completely unsweetened, and then we slowly took it away and then there

was no ketchup. So, you can do a step-wise approach.

Dr. Briana Sinatra: One other thing I wanted to bring up was about sitting together as a family at

the same dinner table, and creating an appreciation around your meal. Maybe by giving a blessing, or a moment of thanks to the farmers, being grateful for the food. Both of our kids are in Waldorf program, and so they do that. There's no religiousness about it. If there is a religious aspect in your family, you can absolutely bring that in. But I think it's a really wonderful way to create cohesion as a family, and set the stage and preparation that, "Okay, we're grateful, we're getting into our relaxed, parasympathetic state, which will support healthy digestion." Your dad often has a blessing before we eat as a family, which I think

is really lovely.

Dr. Drew Sinatra: And do you want to share also what we've been doing, probably for the last

year or so about...we'll sit down at the dinner table and our children will ask, "What are you grateful for today?" "What was good about your day?" And also,

"What was bad about your day?"

Dr. Briana Sinatra: Yeah, when you're eating together as a family, it's just a really wonderful time to

connect, to talk about your day, to share the highlights, to share the struggles. And so what we've been doing is going around and saying the best part of your day, the most challenging part of your day, and two or three things that you're grateful for. And I'm always amazed that it is Luca, our youngest, who just

turned four, who will say, "The best part of your day." Like, he always

remembers it, and he's really attentive in listening to what everyone's saying. So I think it's a wonderful time to just connect and spend time as a family if you can

have your meals together. And I feel like we really prioritize the family meals.

Dr. Drew Sinatra: We do.

Dr. Briana Sinatra: We've adjusted our schedules, so that when at all possible we can be eating

together as a family. And not everyone is able to do that, but even if you can prioritize one or two nights a week, it's definitely better than nothing. And then you're also modeling healthy etiquette, healthy communication, turn-taking during discussions, waiting until someone else is done, being asked when you can be excused. You're modeling healthy table etiquette, which I think is

important — and easier when you can do it earlier rather than later.



Dr. Drew Sinatra: Of course. Well, we have talked about so much today about fussy eaters, and

we want to leave our listeners with some takeaways.

Dr. Briana Sinatra: Yes. So number one, if you are listening to this and you are about to introduce

food, we recommend researching baby-led weaning and see if this feels like a

good fit for you and your family.

Dr. Drew Sinatra: When possible, we recommend prioritizing family meals and eating together.

Not only does this model healthy eating choices and habits, but it is also a

chance to model table etiquette and getting together as a family.

Dr. Briana Sinatra: If your child is older, you can still model healthy eating choices. It is never too

late to change for yourself and your family. You can clear out the foods from your house that you don't want your child to consume, because most likely it isn't a great choice for you, either. So you can make that commitment as a

family and that can start with you.

Dr. Drew Sinatra: And hidden sugar, we talked a lot about this today. So be careful of foods

marketed to kids, and make sure you read labels.

Dr. Briana Sinatra: You may want to supplement. These can include a multivitamin, vitamin D,

probiotics and fish oil, depending on your child's diet and their nutritional

needs.

Dr. Drew Sinatra: Before we wrap up this episode of **Be HEALTHistic**, it's time to share our

Wellness Wisdom for today. Since Briana is joining me on the show today — and she happens to be my parenting partner-in-crime — I'm going to allow her

to share some tips today.

Dr. Briana Sinatra: As we talked about today, sitting around the dinner table and getting a healthy

meal into your kids can be really challenging, especially if you have picky eaters. So, in keeping with our discussion, here's a few clever strategies you can use to avoid the power struggle and help the picky eater in your family eat a little more

balanced diet.

Dr. Briana Sinatra: I'm going to share with you five tips which I think are the most important.

Number one, respect your child's appetite — or lack of one. If your child isn't

hungry, don't force a meal or snack.

Dr. Briana Sinatra: Be patient with new foods. Your child might need repeat exposure to a new

food before he or she takes the first bite. Encourage your child by talking about the food's color, shape, aroma and texture, not just the taste. And be a role model...if they see you eating it, they're going to be more likely to eat it, too.



Dr. Briana Sinatra: Don't be a short order cook; preparing a separate meal for your child after he or

she rejects the original meal might promote picky eating. And it may also

promote resentment for you.

Dr. Briana Sinatra: Recruit your child's help in shopping and making the meals, so that they can also

be a part of meal production and have ownership over the meal.

Dr. Briana Sinatra: Be creative and have fun. Try hiding veggies, making smoothies, or cheers-ing. I

hope some of these suggestions I mentioned lead to greater peace and

harmony at the dinner table for you and your family.

Dr. Drew Sinatra: Remember everyone, if you liked what you heard today and you want to be an

active member of the **Be HEALTHistic** community, subscribe to our podcast on Apple podcasts or wherever you download your favorites. And subscribe to the Healthy Directions YouTube channel. You can also find more great content and information from us and the Healthy Directions team at **HealthyDirections.com**.

Dr. Drew Sinatra: Well, I'm Dr. Drew Sinatra.

Dr. Briana Sinatra: And I'm Dr. Briana Sinatra.

Dr. Drew Sinatra: And this is **Be HEALTHistic**.

Narrator: Thanks for listening to **Be HEALTHistic**, powered by our friends at Healthy

Directions, with Drs. Drew and Steve Sinatra. See you next time.