



## Perinatal Visit

By: Marshall J. Benbow, M.D.

Congratulations on the arrival of your new child and welcome to pediatric health care at Southwest Children's Center. You'll soon discover, or perhaps already have, that feeding and caring for a young infant can be a compelling enterprise for one or more adults. Don't be too ambitious. Get the essentials done and work on the rest a bit later. The baby's needs and schedule will tend to define your schedule. Sleep deprivation needs to be guarded against. Especially for the mother, when the baby is sleeping you should be napping/sleeping. A better-rested parent is so much more effective in all that you try to do for the baby. Receiving guests and relatives, sending thank you notes, travelling to family out of town and the myriad other inessential activities can wait for a later time. Those of us who've had babies will all understand the energy constraints of a family with a young baby. Those who don't understand will get an education soon enough and for the moment they can be discounted as too ignorant to be relevant.

As part of your early work with this young baby, I'd like to add just a bit of parent education. Current recommendations from the American Academy of Pediatrics include vitamin D supplementation for all breast-fed babies and formula-fed babies if the daily intake of formula is less than 25 ounces. There are several potential options to provide this supplement. One of the newer forms of vitamin D is D-Vi-Sol. One milliliter per day provides the recommended dose of 400 international units (IU). The newest form is Baby D Drops where one drop provides the recommended dose of 400 international units (IU). Either form will work well. This is a daily recommendation and though conventional wisdom would think of this as a vitamin/hormone to be used for bone mineralization, evolving science would suggest that immune function; protection from autoimmune disease and the performance of nearly every organ system is impacted by



this vitamin/hormone. It's a good vitamin insurance policy throughout childhood and into adult life. In some situations, if dietary iron supplements were also needed; I'd recommend using one of the older products- Poly-Vi-Sol with iron. This is a multivitamin plus iron and though it doesn't taste great, it can be given directly or concealed in formula or breast milk in a bottle or training cup. The usual daily dose would also be one milliliter.

Now I'd like to recommend some reading from the American Academy of Pediatrics. You should get accustomed to using this website as a source of reliable information regarding your child on virtually any subject. In this immediate newborn period, I have a few subjects I'd like you to visit. Go to [www.aap.org](http://www.aap.org), visit the menu bar at the bottom of the web page and *click* on the AAP policy link. Once there, search "Positional Skull Deformities in Infants" and you'll get a list of scientific references. Read the article titled, "Prevention and Management of Positional Skull Deformities in Infants", published in 2011, by clicking on "full text" and you'll be aware of the current recommendations about prevention and management of the "flat-head" syndromes that can result in those "shaping" helmets that you occasionally see on other peoples' babies. Next, I'd like you to search "SIDS and Other Sleep-Related Infant Deaths". Read the article titled, "SIDS and Other Sleep-Related Infant Deaths: Updated 2016 Recommendations for a Safe Infant Sleeping Environment", published in 2016. This article will give you a current and comprehensive discussion of this important subject. Though the "back to sleep" campaign has been a robust success in reducing the incidence of sudden death, this syndrome remains the leading cause of death of an otherwise healthy baby in the first year of life. It may be more than you want to know, however, it's good information.

That's my agenda for this early period, so get just the essentials done and enjoy the newest addition to your family!