

Your Baby at 6 Months

Medications: Acetaminophen or Ibuprofen can be given as needed for discomfort or fever. No other medications are recommended for this age unless directed by your doctor. Please see our dosing chart for the right dose based on your baby's weight today.

Next Visit: 9 months of age unless there are other concerns

Immunizations

You should receive a specific handout for each vaccine given, and if you don't, please let us know. Side-effects are uncommon but can include:

- Discomfort at the injection site
- Fatigue; they often sleep a lot the first day
- Low grade fever for up to 24-36 hours
- Redness and warmth at the injection site for a few days; this is not an infection
- A small lump where the vaccine was given, which may last several weeks
- You can help your baby feel better after vaccines by giving lots of tender loving care, allowing for extra rest, and giving Acetaminophen or Ibuprofen as needed for significant discomfort or fever. We recommend that you only give it as needed, rather than around the clock. Recent studies indicate that Acetaminophen or Ibuprofen, given too frequently, may blunt the immune system's response to the vaccines, making them less effective.

See immunization schedule

<http://www.cdc.gov/vaccines/schedules/downloads/child/0-18yrs-pocket-pr.pdf>

What Your Baby Can Do

Parents often look back at this age as a golden period when their baby's personality emerges and parenting is really fun. Babies are much more aware of their world and recognize familiar places and people. They reach to be picked up and give a lot of great feedback (laughter, sense of humor). They become really great with their hands – and getting everything into their mouths – and explore objects with great curiosity. They are getting more comfortable in a sitting position, though usually aren't very trustworthy sitting until about 7 months of age. They should be able to get themselves into a sitting position by about 9 months of age, but for now are happy to be in a sitting position. Some babies will do some "combat" crawling – dragging themselves on their belly, and some are getting up on their knees. Verbally, they really start to make lots of noise, imitating you and other things they hear. You may hear repetitive babbling (ba-ba-ba and da-da-

da) and sometimes their voices rise/fall in a singsong manner. Real words are expected by their first birthday.

Feeding & Solid Foods

Breast milk or infant formula is still the primary source of nutrition at this age. Breastfed babies may feed on demand. For comparison's sake, babies generally take 28-36 oz per day of expressed breast milk or formula (varying with genetics, appetite). Every baby is different, so it might be less or slightly more. Vitamin D drops (400 IU/day) are still recommended for babies who receive primarily breast milk.

Solid foods are now an important part of their diet, with all babies needing an extra source of iron in the diet, usually in the form of infant cereal. Please check out our handout for what's new at 6-9 months of age. Typically we see a pattern emerge of solids about twice a day – typically cereal/fruit in the am and cereal/veggie in the evening, but there is no hard or fast rule that you must follow. Babies can also do “hand foods” such as biter biscuits and zwieback toast, mummum crackers at this age – food they can hold in their hands. Please note: your baby needs to be with a caregiver any time they are eating, especially as they start solid foods, just in case they choke. As the biscuit softens or falls apart, please take it from them. As they approach 9 months of age, you can move to smaller foods such as “puffs,” as their pincer grasp develops to pick up one small object at a time.

Safety

It's time to make sure your house is as safe as you can make it for your little explorer. As their skills increase, you will need to make sure that you continue to “baby proof” for things that can hurt them. Commercial services are available to “baby proof” your home, but parents are completely capable of doing this with some time and effort. Although we use the term, “baby-proof,” it is important to remember that no environment is 100% safe despite our best efforts. Child safety latches and other devices are no substitute for appropriate parental supervision. The link below is a good reference to get you thinking about what to tackle in your home to keep your baby as safe as possible.

<http://www.healthychildren.org/English/safety-prevention/at-home/Pages/Home-Safety-Heres-How.aspx>

Teething & Tooth Care

The average 1st tooth erupts at about 6 months of age. Some babies have teeth as young as 3 months, while many don't get their first tooth until 12 months or later. Teething symptoms vary to misery/sleeplessness/drooling and chewing on their fingers, to children who just seem to pop a tooth in place, surprising their parents. Many parents note loose stools, low grade fever and clear nasal discharge – but we aren't really sure if these are related to teething. Chewing and drooling are a part of normal sensory developmental too, and may not be related to teething at all.

If you feel that your baby is really uncomfortable as they teeth, feel free to give them toys to chew on, chilled teethers especially. Acetaminophen and/or Ibuprofen may be given as needed for more severe discomfort, especially at night if discomfort keeps them from sleeping. We

don't find that topical ointments (Anbesol, etc) are all that helpful and some babies seem really annoyed by the tingling effect. We don't recommend homeopathic teething tablets.

Once the teeth start erupting, use a cloth or soft toothbrush to wipe them down at least once a day. You may use fluoride-free toothpaste if you wish, but this is not necessary. Dental hygiene is not really critical at this age, but we find that developing the habit of cleaning their teeth is a great way to make your job easier in the future. A good way to prevent cavities is to never give your baby a bottle in bed, especially as the primary way of falling asleep. This is a bad habit that can really cause big problems for the teeth down the road. Similarly, babies who nurse multiple times per night can have cavities as well. Babies who are asking to nurse or bottle feed frequently at this age are generally not usually hungry, but are seeking comfort or help getting back to sleep. Help them learn other ways to soothe back to sleep.

Juice is rarely needed for young infants, and frequent juice drinkers clearly have a higher risk for cavities.

Healthy Sleep Habits

Babies can be moved to their own room between 4-6 months of age. Hopefully your baby is sleeping at least one 6 hour stretch by now. If not, we may be able to adjust the schedule a little bit to try to make sure everybody gets enough rest. Sleep problems are common, frustrating and of course invite many opinions about how to fix them. Chronic sleep struggles put strain on parents, careers, marriages and relationships. Chronic sleep struggles can rob you of the joy of being a parent, so we take them seriously. We encourage you to ask for advice and read lots of available material, and then choose a strategy that fits your situation, parenting personality and infant's temperament best. Most strategies will work IF you are persistent. Check our Recommended Reading Section on our Pinterest link for more suggestions. Some basic tips:

- Establish a consistent sleep routine that both parents follow; this means roughly the same time as well as the same series of events (bath, breast, rocking, bed)
- Make sure your baby is not fully asleep when you put them down into the crib; allow them to be sleepy but not asleep so that they can develop the ability to drift off on their own. This process can be gradual if you need it to be.
- When your baby fusses in the night, wait a few minutes to see if they can settle down on their own. Check on them if they can't settle down; try to not pick up and start the routine over again, but pat and soothe with your voice. We want you to gradually allow them to do more of the work of getting back to sleep.
- Swaddling is fine until about 4 months of age. After that, we really encourage you to start weaning your baby's reliance on it, helping them learn new ways to self-soothe. They may find their thumb or a pacifier a good transition object and a way to soothe themselves. A small transition object (small stuffed animal, cuddly cloth) can be nurtured by cuddling your baby with the object while you breast or bottle feed and can be used to help them transition to sleep, but please do remove it from the crib after they fall asleep until about age 12 months.
- Don't start the habit of laying down with your baby to get to sleep. You may pay dearly for this later.

Safety

It's not too early to think about the "baby-proofing" process. No house can ever be made 100% safe, but the idea is to reduce risk of injury. It's also misleading to consider a house baby-proofed, because you will need to adjust to the increasing ability of your child. Now is a good time to start thinking about plug covers, cabinet latches; it won't be long until your baby is mobile! Start wrapping cords from appliances, window treatments to prevent entanglement. Start moving cleaning supplies high instead of under the sink. Start moving medication to locked containers.

Never allow your child in a car unless they are in an approved, rear-facing safety seat. Check weight AND height limits; many babies outgrow carrier-type seats because of their length first. Infants stay rear-facing at least until 12 months, and preferably until 2 years.

<http://www.healthychildren.org/English/safety-prevention/on-the-go/Pages/Car-Safety-Seat-Checkup.aspx>

<http://www.healthychildren.org/English/safety-prevention/at-home/Pages/Home-Safety-Heres-How.aspx>

Fever

Babies at 6 months and beyond are able to tolerate illnesses associated with fever better than they were at a younger age. Fever is not an automatic reason to be seen in the clinic or emergency department, even if at 104-105 degrees, especially if your baby seems content and comfortable when the fever comes down with Ibuprofen or Acetaminophen. However, any fever >105 warrants a phone call, even in the middle of the night if necessary. We would like you to call if there is fever (>100.4) more than 48 hrs, or if your baby is extremely fussy, has a fever with a rash, has foul-smelling urine, is listless or is not drinking well.