

Nutrition in Infancy



During the first 2 years of life: ...

Most infants who are genetically determined to be larger reach their **growth channel**, a curve of weight and length or height gain throughout the period of growth, at between 3 and 6 months of age. many infants born at or below the tenth percentile for length may not reach their genetically appropriate growth channel until 1 year of age; this is called catch-up growth.

Infants who are larger at birth and who are genetically determined to be smaller grow at their fetal rate for several months and often do not reach their growth channel until 13 months of age. This phenomenon during the first year of life is called lag-down growth.

Growth in infancy is monitored with the routine collection and monitoring of anthropometric data, including weight, length, head circumference, and weight-for length for age

PHYSIOLOGIC DEVELOPMENT

Infants may lose approximately 7% of their body weight (10-15% in preterm) ...

infants usually double their birth weight by 4 to 6 months of age and triple it by the age of 1 year.

Infants increase their length by 50% during the first year of life and double it by 4 years.

body fat:

body water:

stomach capacity:

Fat absorption varies in the neonate

fecal excretions of 20% to 48%

infant's lingual and gastric lipases, bile salt-stimulated lipase

enzymes responsible for the digestion of Disaccharides:

Pancreatic amylase, salivary amylase

Kidneys: ?

شیر گاو	شيرمادر	تركيبات
۲۰ کیلوکالری/اونس	۲۰ کیلوکالری/اونس	انرژی
% T+	% Y -8	پروتئين
% Y+	7.9+	وی
%.∧+	% ۴ +	كازئين
	بيشتر	تورین و سیستئین
% **	% ۴ ۲	لاكتوز
%∆+	(جذب بيشتر)۵۰٪	چربی
7.1	% \$	لينولئيک
mg/dl 1∆–1•	mg/dl ۲۰-۱۰	كلسترول
ب کافی، ث کم	بسته به دریافت مادر	ویتامین محلول در آب
کافی	كافى	ويتامين آ
	بيشتر	ويتامين E

شیر گاو	شيرمادر	تركيبات
mg/l ∙/٣	mg/l ∙/٣	آهن
<%1	7.0+	جذب آهن
	زیست دسترسی بیشتر	روی
۳ برابر		كلسيم
عبرابر		فسفر
۲ برابر		فلورايد
۳ برابر		سديم
۳ برابر		پتاسیم
بيشتر		بار محلول کلیوی و N دفعی
mosm/kg ۴۰۰	mosm/kg ٣٠٠	اسمولاليته