Getting Good Supplements into Bad Eaters

by Kelly Dorfman, L.D.N., Nutritionist and Cofounder DDR

Parents are justifiably alarmed when children eat poorly. Inadequate and improper nutrient intake can decrease intelligence and affect brain functioning, especially during the first few years of life. Unfortunately, these indisputable facts are not enough to convince many children to eat their whole grains and vegetables!

The best most parents can do is offer consistently good choices and eliminate the worst of the heavily processed, artificially colored and flavored foods. What often remains are foods like cereals and meal bars, because many parents fear that children will eat nothing if the menu is adjusted any further.

One mother does not even keep vegetables in the house because the child reacts so negatively to the sight of them. “He reminds me of me,” she confessed sheepishly. She is not alone; fewer than one in four Americans eat five servings of fruits and vegetables per day.

Why Use Supplements?
Children who are distractible, have behavioral issues and developmental delays need more nutrients than non-affected youngsters. Their higher nutritional needs may be due to:

- Poor absorption of nutrients due to gastro-intestinal issues;
- Self restricted diets due to sensory processing issues or poor oral motor skills;
- Restricted diets because of food reactions or allergies;
- Genetic anomalies affecting their ability to detoxify environmental toxins; and
- High exposure to environmental chemicals and pollutants.

One logical step is to close the nutritional gaps with the therapeutic use of nutritional supplements. Discuss your dietary supplement program with a doctor or other knowledgeable health professional. The right person can help you develop a good balance of nutrients for your child’s situation.

Mixed messages in the media, and from doctors themselves about which and how much supplement to take, can be extremely confusing to parents. They often receive one set of instructions on nutrients and dosages from their DAN! doctors, and dire warnings concerning toxicity of the same program from their pediatricians.

These conflicting messages reflect pervasive confusion and misinformation regarding supplements more than any real danger of toxicity. Nutrient supplements are regulated by the Food and Drug Administration (FDA) under the Dietary Supplement and Health Education Act (DSHEA). While nutrients are generally well tolerated, and have a long history of safe and efficacious use, side effects and individual differences occur.

If you are uncomfortable with any supplement program, get a second opinion from a knowledgeable professional. When a supplement program is too aggressive, a total program can be out of balance. A good rule of thumb to follow is: “When in doubt, take it out,” and then get further input.

Basic Supplements
A good place to start is with a multiple vitamin containing at least two to three times the recommended daily allowance (RDA) of B vitamins, with added trace minerals. Consider a calcium magnesium combination, also, especially if a child is on a dairy-free diet. Avoid brands that contain artificial colors and aspartame.

Getting Supplements In: Pills or Liquids?
Once a practitioner develops a supplement program for a child, the biggest challenge for most parents is getting it in. Most children under the age of nine cannot swallow pills. Furthermore, pulled apart capsules can contain foul tasting, gritty powder. If your supplement program involves pulling apart capsules, ask your health care provider for better tasting alternatives.

Some children will take liquid supplements better if they are squirted in with a dropper or given in a small medicine cup that they can chase with straight juice. Better a small amount of weird flavored juice than an entire nasty cup. For children on sugar restricted diets, consider tea or lemonade sweetened with agave or stevia. Agave is a sweet cactus extract that does not disrupt blood sugar metabolism as badly as sugar or honey.

A mother called me complaining that her son refused to take the magnesium citrate recommended by her doctor. Magnesium citrate is sour; many forms of magnesium have a sweeter taste. I recommended two alternatives: magnesium glycinate, which is milder, and a magnesium product called Natural Calm, which can be mixed into water or juice. Her child now happily consumes Natural Calm.

Hide Supplements in Food
Some supplements just taste yucky. A supplement that is fat based or gritty needs a thick, strong carrier. For children eating dairy or soy products, yogurt does the trick, as an excellent base. Fish oils and vitamin E are both well tolerated in yogurt. Peanut and other nut butters (with or without jelly) are also good for hiding oily products. Maple syrup (poured on pancakes) and honey are excellent carrying agents for heavier substances. For a particularly strong flavored oil, one creative mother melted chocolate, incorporated the supplement, and made chocolate candy drops.

Custom Compounding
For the most resistant cases, water based supplements can be combined, custom flavored, and mixed by a compounding pharmacy. Custom formulations require a written order from a health professional familiar with compounding. If you find yourself emptying out 10 capsules and are starting to feel like an amateur pharmacist, ask your health care professional if this alternative is available.

Treat Supplements as Essential Medicine
Supplements should not be optional; treat them as you would insulin for a diabetic. Children are much more agreeable when they sense the parents are serious. Try “when:then.” “When you are done with your supplements, then we can play outside.” With creativity and persistence, most supplement programs can be successfully delivered to even the most taste discerning child.