

- Parents must be centrally involved in all feeding related interventions. It is best to work within the family's comfort level and style. Make minimal changes in daily routines as you work toward collaboratively agreed upon goals..
- Respect culturally-based feeding practices (e.g., prolonged breast feeding, cradling during feeding)-

□ NOTES:



***Interacting with Young Children  
Who Have Sensory Based  
Feeding- Disorders***

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- Recognize that not all feeding disorders have a sensory basis. Some feeding problems may be due to medical factors, motor deficits, or emotional disorders.
- Identify when sensory based feeding disorder began. This information can provide insight into the problem. For example, many children have difficulty changing from pureed to junior foods, others have had longer standing problems with food temperature..
- Consult with the child's healthcare provider before initiating feeding intervention (e.g., physician therapist, nutritionist, nurse)..
- Consider the complexity of sensory input during feeding. Feeding time should be as distraction free as possible. Schedule feedings when the adult is relaxed, the child is alert and responsive , and the environment is as calm as possible..
- Try to have a predictable routine associated with the beginning and ending of meal times..
- Use calming techniques prior to feeding if the child is hypersensitive. Sensory-based feeding disorders are frequently only one aspect of a more global sensory problem (e.g., hyper- or hypo-reactivity)..
- Remember that the face is the most sensitive area of the body, so touching in or around the mouth can be very threatening to the child. Minimize nonessential touch.
- Avoid frequent wiping of the mouth during feeding. When you must wipe the face, use a firm pat instead of a light swipe across the mouth, or let the child wipe the face independently
- Give the child time to close the mouth on the spoon and remove food rather than scraping food off of the upper lip or teeth.
- Introduce changes in food texture slowly..
- Position the child in a stable supportive chair during feeding to provide postural stability and to minimize extraneous sensory stimulation (e.g., use a high chair or a Tripp Trapp chair)..
- Recognize that during feeding the rules are different. You may want to work initially on sensory processing problems during non-feeding times since nutritional concerns must take precedence during the actual feeding..
- Introduce toothbrushing slowly and playfully. Toothbrushing provides a natural opportunity to work on oral tactile sensitivity. Try infa-dent (i.e. a soft finger cot with short bristles available from Nu-tec, 1-800-868-8338), or the Nuk Toothcare System (i.e., a graded sequence of textured, chewable rubber brushes) rather than a traditional toothbrush..

