

ARFID IS NOT PICKY EATING

Vitamin and mineral supplementation

Vitamin and mineral supplementation can be really tricky in children with ARFID as most supplements have a strong taste and smell. It is therefore common that they will refuse vitamin/mineral supplements that have been recommended by the healthcare professional.

Firstly, it's important to highlight that the vast majority of vitamin and mineral supplements are not prescribable on the NHS. There are drops for babies that are available on the NHS (including Healthy Start drops), specialist vitamin and mineral powders (usually reserved for metabolic disease, gastrointestinal disorders/food allergies) then some adult supplements for calcium, zinc and vitamin D deficiency, but others have to be bought.



What should be considered?

- 1 Age of the child (this provides an indication for the recommended intake for each vitamin and mineral).
- 2 Current vitamin and mineral intake to predict deficient intake.
- 3 Known deficiencies – these are established through blood levels.
- 4 Texture and taste preferences.
- 5 Oral motor skills (to establish if chewable supplements may be suitable).
- 6 Medical diagnosis (to establish whether there are ingredients that are not tolerated in a supplement).
- 7 Intake of fruit puree/fruit juices and porridge (useful “vehicles” for supplements).

What supplement options are available?

Supplement type?	Positive	Negative	Suggestion
Vitamin/mineral drops	Small volume. No excipients that could cause an allergy/intolerance reaction.	Dosage of vitamins are often not age appropriate. Not tasteless. Strong smell.	Adjust the dose to account for age. Mix with fruit puree/fruit juice.
Vitamin/mineral syrup	Tastes better. Smell of the flavour of the syrup.	Bigger volume. May contain excipients that may cause allergy/intolerance reactions. May have a flavour disliked by the child.	Mix with fruit puree, fruit juice and add to jams (if these are consumed).
Chewable vitamin/minerals (chalky)	Contain vitamins and minerals.	Chalky texture that may be difficult to tolerate by some children. Variations in levels of vitamins and minerals between brands. Suitability depends on oral motor skills.	Sucking instead of chewing the supplement. Grinding into a powder and mixing in fruit puree (these do not go into fruit juice).
Chewable vitamin/minerals (jelly)	Often preferred by children as they taste like sweets.	Most jelly type vitamin supplement do not contain minerals (i.e. iron, zinc selenium). Suitability depends on oral motor skills.	Combine with mineral supplement. Cut up in to smaller pieces for young children that like the taste but can not manage the whole supplement.
Vitamin/mineral powders	Can be mixed into food. Some brands contain coated vitamins, so that taste is not that strong. Dosage can be adjusted to what a child needs.	Need foods tolerated to be mixed into. Content of vitamins and minerals may vary.	Consider powder brand and taste of each (there are differences in taste in brands). Consider whether the child may be eligible to have an NHS prescribable vitamin powder.
Vitamin patches	Suitable for children that refuse all oral supplements. Patches are placed on overnight and do not impact on day-to-day life.	Not all vitamins/minerals have proven skin absorption data and absorption may vary between children. Absorption may be hindered by body cream (i.e. children with eczema). Only 1 brand available in the UK.	Use when all other vitamin/mineral supplements are refused.

Dr Rosan Meyer Last updated: 21.6.19