**Preventing Baby Allergies: Tips from Pregnancy to Weaning S5|141**

Today's episode is an incredible episode on how to prevent allergies for your baby. I just wish I had heard this episode with Claudia Gray before I had my own children. I asked Claudia questions on how to prevent allergies and what allergens really parents should be watching out for and she went into a really deep dive all the way from pregnancy through to weaning your baby and then how to manage allergies.

If you are thinking about having a baby, weaning a baby, feeding a baby and exposing them to allergens in the environment, this is an episode that you absolutely must not miss. Welcome to Sense by Meg Fora, the podcast that's brought to you by ParentSense, the app that takes guesswork out of parenting. If you're a new parent then you are in good company.

Your host Meg Fora is a well-known OT, infant specialist and the author of eight parenting books. Each week we're going to spend time with new mums and dads just like you to chat about the week's wins, the challenges and the questions of the moment. Subscribe to the podcast, download the ParentSense app and catch Meg here every week to make the most of that first year of your little one's life and now meet your host.

Welcome back mums and dads to Sense by Meg Fora. This week the Sense is not coming from Meg Fora, the Sense is coming from one of my special guests and as you know we have different episodes on this podcast and sometimes we chat to real mums who are at the rock face with newborn babies and sometimes we speak to people who know a lot more than I do about a specific topic and the topic for today is allergies, allergy prevention, how do we know if our baby has an allergy and what can we do about it and so there's nobody who I would rather be speaking to about this than Dr. Claudia Gray. Claudia is a pediatrician based in Cape Town, South Africa and she runs an exceptionally busy practice and allergy has been one of her passion areas so Claudia, very warm welcome to you today.

Thank you Meg, thanks for inviting me to the podcast. Yeah well it's wonderful to chat and it's such a topical theme and in fact almost every time I speak to mums about weaning the question of allergy comes up because people are wanting to prevent that allergy march or prevent those allergies from developing but they're wanting to wean their babies and Claudia back in the day when my first born was born there was this theory that you had to keep all allergens away from babies completely even in pregnancy, avoid peanuts in pregnancy and don't introduce wheat until nine months. It was all these guidelines that we followed fastidiously and of course that theory's really changed so I'd love to kick off and talk about weaning and the role of weaning in allergy prevention.

Okay thanks Meg. Yeah so ironically all that advice about delayed introduction and avoidance has almost backfired and has run in parallel with what we call the allergy epidemic so to say but let me start by just telling your listeners what an allergy actually is just to set the scene. So an allergy is a response by your immune system or your baby's immune system to something that really should be harmless.

Okay so the immune system is getting it a little bit wrong and you can imagine how complex the immune system is. It's not just one aspect, it's not just when you introduce solids, it's also genetics, it's epigenetic factors, it's factors such as does the child have eczema so it's a complex story so we can give the best advice we can but not necessarily prevent all allergies. So we shouldn't be having allergies, it's our immune systems getting it wrong and misinterpreting things that should be safe and seeing them as a distress signal so a parasite and then setting up a fight against them so that's the background.

Now initially when allergies started increasing we saw a massive increase in respiratory allergies like asthma and allergic noses or allergic rhinitis and then following shortly on its heels came the food allergy epidemic and suddenly all over the world we're seeing a substantial amount and prevalence of food allergies. In Australia 10% in the UK probably five to eight percent of children have a true at least one true food allergy so it's actually becoming a public health issue and of course treatment of food allergies is so very difficult so the best approach would be prevention. Now prevention doesn't just start with weaning, can I divert a little bit Meg and just give them after so during pregnancy the first thing to say is don't cut out any food groups for the sake of allergy prevention it doesn't work so if you ate a peanut butter sandwich every day before you felt pregnant continue to eat a peanut butter sandwich every day so don't decrease and don't increase dramatically.

In terms of sort of supplements it's still a bit of a messy business but two or more portions of oily fish or omegas per week seem to be protective and maybe probiotics but the jury is largely still out especially in your last trimester of pregnancy in the last three months especially if there's a strong family history of allergies. Now when that little bubba is born I know we're going to talk about breastfeeding a little bit more so I'll package that for later but breast is always best if possible. It's got some allergy protective properties but not complete so it's not only about the breastfeeding but certainly if you're still breastfeeding while you're introducing solids it's incredibly helpful.

Okay we can talk about formula milks etc later but you asked specifically about solids so as you know the recommendations pretty much worldwide are that any time from 17 completed weeks after birth you can start introducing solids if you have a safe environment and you can prepare it hygienically and if your child is showing signs of readiness. Now there's no longer any evidence that delaying solids prevents allergies at all and delaying specific specific solids. So we now advocate starting with your relatively like bland foods you know whatever is appropriate for the family your apple puree or pear or butternut or sweet potato but once the kid has got the hang of it there's no problem in early on even before six months or around six months giving allergens such as peanut butter mixed into your oats or egg blended into some veggies or wheat you know also blended into into the puree that the little little babies initially need.

The only exception would be if the child is already showing potential signs of allergy such as a child riddled with eczema then rather see your healthcare practitioner and get advice but in the majority of cases we've now found that earlier introduction is actually better and we can go into that a little bit deeper if you want to. Yeah so quite interestingly you said there that there was a warning sign in terms of if your child's riddled with eczema early on so maybe let's talk about those babies who are showing some sort of or let's talk about the babies where you would say to the mom let's let's really do a deep dive into this. I mean you've mentioned if they've got eczema what are the other flags red flags that the mom should know about in terms of being more cautious with introduction of solids? Eczema is by far the greatest egg and then the only other one really would be say you've introduced egg and your child's already reacted to egg then you're obviously going to be more cautious with the other allergens and rather have them tested and then the third situation would be if there's a strong strong family history so if a sibling has a peanut allergy you might want to say look bring your bubba at five months we'll quickly test for peanuts because the quicker we can get it in the better as long as a child isn't already showing signs of the allergy.

Okay excellent so what I've heard you say is don't cut out any allergens in pregnancy if you've eaten them before, do breastfeed, introduce solids and allergens somewhere between four and six months or 17 weeks and six months if there's none of those red flags so that's super super helpful. Going a little deeper into eczema because eczema obviously is something that well first of all why would a baby get eczema before solids are introduced what what is what's that about? Okay so the most eczema is a very very misunderstood disease and it's one of my passions I actually did my PhD on eczema and food allergies. Eczema is essentially a skin barrier issue so your skin barrier the top layer of your skin which which protects you from the environment and infections and allergens and keeps your water in and keeps your nutrients in that skin barrier is faulty.

Now the most common cause is genetics so you've just got genes encoding slightly faulty proteins so they're not as tight tightly woven and the skin barrier is not as good so genetics and then nowadays we also know that these genetics drive the immune system in the skin so the local immune system in the skin is faulty and a lot of this also has to do with what we call the microbiome of the skin so the layer of of bacteria and viruses and all sorts of bugs that live on many surfaces of our body that actually have a huge role to play in the development of our immune system so genetic skin barrier issues and microbiome and then there is a small percentage of kids who get eczema because of a food allergy but I just want to reiterate that it's usually the other way around so there are those babies who have what we call a delayed type cow's milk allergy who if they're exposed to cow's milk through formula or through mom's breast milk develop eczema as a reaction so not their typical eyes and swelling and breathing difficulties they develop sort of colic and eczema so that's a possibility but it's quite rare so more common is the genetic factor and much more common is that the eczema then leads to other allergies and the reason for this is very very interesting it's because our broken skin allows the allergens to come in that shouldn't be coming in through the skin our skin is pretty stupid when it comes to deciding what's a goodie and our bad and or a baddie our gut is very clever so our gut is designed to meet foods for the first time and realize this is a goodie our skin is not designed for that so if peanut butter from daddy's sandwich goes through a baby's broken skin that skin immune system could make the wrong decision and react against it so some eczema is caused by food allergies but usually genetic factors and skin barrier factors and microbiome but a lot of food allergy is caused because the child has eczema if you can understand that sort of difference in direction. Yeah absolutely and you know it's such so interesting this is a very extreme case that I came across she might have even been in your practice but there was a little girl who was born in London and there was very faulty advice given to the mom when the baby was very little she had a she was tiny and she had a nappy rash and the mom was told to put egg white on the nappy rash for a reason that totally escapes me mom's bad advice don't do it but she was having this egg white put on her on her nappy on a broken skin area and the first time she had eggs literally the first time she ended up with an anaphylactic reaction so exactly case in point. Absolutely and you know 20 years ago 30 years ago when this phenomenon first came to light that actually maybe we're meeting our allergens through the skin it was actually first of all studied by a very famous allergist called Gideon Lack because he he found that kids using nappy creams or moisturizers with arachis oil which is peanut oil were actually getting more peanut allergies so that's where that first of all that concept came from and on the other hand he noticed that ah there's a there's a in in Israel the kids are exposed to peanut in the form of the bumble snack very early on in life by a mouth but those kids showed a very low percentage of peanut allergy so that just that just explains or illustrates the fact that we want to meet things through our guts and not through our skin.

Very interesting so I mean because the skin is so important in this um how would you I mean if a mom came to you and her little one did have um eczema how would you be telling her to treat the eczema I mean you don't want to put something with peanut oil or egg in it and what sort of preparations should we be putting on our baby's eczema how do we manage it? Yeah so to to an extent it depends on the degree of the eczema and the children who are at highest risk of developing food allergies are those with moderate to severe eczema so don't panic or stress if the kid just has a few little patches but that's why in in my practice as a pediatric allergist I call eczema an allergy emergency not because it's life threatening but it's because it's quality of life threatening you can actually develop lifelong conditions if we're not looking after the skin properly because of this chance of developing allergies etc via the broken skin so any rough broken itchy especially itchy skin in babies is an emergency because it's a portal of entry of baddies so first of all it's moisturized moisturized moisturized but not beautifully fragranced pink colorful moisturizers it needs to be a bland emollient you know with occlusive factors I give my patients sort of a whole list of criteria but it's an eczema friendly emollient that you can just go to your pharmacy and ask what is a good emollient for dry skin and most of them are incredibly safe even for babies so studies have had varied results but I still advocate moisturizing from the word go with a bland moisturizer once or twice a day make sure you don't contaminate the container by putting dirty hands that have just changed a nappy into the tub so wash your hands first or use a moisturizer that comes out of a tube so that you reduce the rates of infection because that is a possible side effect so moisturize moisturize moisturize and then if the skin is already showing signs of inflammation so red angry itchy it needs an anti-inflammatory there's a whole lot of taboo about topical cortisosteroids etc yeah there should be taboo about oral steroids which people seem to be happy but topical steroids are safe if given at the right concentration for the right amount of time in the right areas so we need to jump on our eczema skin with early treatment so certainly see your healthcare practitioner for that because the earlier we can get the skin right the less will be our progression to other allergic conditions very very interesting okay excellent so now let's turn our attention because you've mentioned a couple of times this microbiome and you've spoken about the skin microbiome but there's obviously and you've alluded to the fact that the gut microbiome is even more powerful and and fabulous than the skin microbiome for dealing with with new with new substances and so on how do we protect our gut microbiome and how do we set our baby's gut microbiome up to be successful at dealing with allergens this episode is brought to us by parent sense the all-in-one baby and parenting app that help you make the most of your baby's first year don't you wish someone would just tell you everything you need to know about caring for your baby when to feed them how to wean them and why they won't sleep parent sense app is like having a baby expert on your phone guiding you to parent with confidence get a flexible routine daily tips and advice personalized for you and your little one download parent sense app null from your app store and take the guesswork out of parenting how do we set our baby's gut microbiome up to be successful at dealing with allergens yeah so make this this thing called the microbiome has really become the it girl of of medicine in the last 10 years or so i would say and and it's it's absolutely fascinating and rather difficult to understand but i think for the purpose of the of the of the listeners we must know that i say we are actually more bug than being we've got more bugs than genes so the genome of of the microbiome which is all the bugs that we carry in our guts and skins and chest are far more than the genes we carry so why is this and actually we have found it's because the microbiome actually does a lot of work for us so these bacteria produce products that help protect the lining of the gut they produce enzymes they produce vitamins so they are actually doing a lot of our functions so we can be jolly grateful for the microbiome but of course like everything else if you if you look at it like a population of people you'll have goodies you'll have baddies and you'll have neutral people or political parties for that matter or countries and we want the good bugs to be prevalent so we don't want the bad bugs to take over and certain situations allow the bad bugs to take over because we're killing our good bugs so eczema itself is a reason for the skin microbiome to be faulty the whole inflammatory process allows baddies such as staph aureus the bug that causes boils to overgrow and our good bacteria are then kind of squashed by the staph so that's an example where disharmony has come into play and that disharmony actually aggravates the eczema so talking about the gut how can we get the microbiome rights in the gut oh it's a long and interesting story so the first thing to think about is the mode of delivery Meg I will put my hand up and say I needed cesarean sections because I had a small pelvis and my kids wouldn't descend so I'm not saying that I'm perfect but if you can deliver by normal vaginal delivery it is much healthier for the baby's microbiome because the passage through the vaginal canal already seeds their guts so that's number one if you have a choice some people don't have a choice like I didn't and for some people cesareans are life-saving but for those who are able to deliver naturally it's already seeding the gut's microbiome beautifully secondly the big the best catch-up is breastfeeding so I call breastfeeding a soup of microbiota it's absolute gold Meg's wearing a beautiful golden mustard top and it reminds me of the gold of breast milk and then the same as the golden poo that the baby then produces so breast milk is absolute gold we we cannot get better it is the most magnificent nutrition and it's full of prebiotics which are sort of fiber like substances which allow healthy bugs to grow and it's full of probiotics which are the bugs themselves the healthy bugs like bifidobacteria so you're in a little plate you're giving the child the bugs and the precursors it needs to create a healthy microbiome so that's breast milk um if you can't breastfeed so say you've had breast cancer or you on an uh on chemotherapy or on certain medications or if you have a delay in establishing breastfeeding we always punt breast milk but there are some specific formula milks coming out for cesarean section babies that help with the pre and the probiotics so just be aware of that next thing skin to skin skin to skin everybody must kiss and cuddle that baby except the siblings with snotty noses including the family dog so it's good to have a varied microbiome around you cuddling kissing playing skin to skin the dog muzzling the baby all of those are generally healthy bacteria that then help to seed the baby's microbiome next in line preventing early antibiotics if you can so it's not always possible but if a baby's got a snotty nose and your doctor thinks it's a virus don't push for antibiotics because they can kill off your good bugs for six months or more that it takes to regenerate those good bugs in your in your gut so that's why things like early antibiotics are associated with later asthma because it's destroying the microbiome which is part of our immune system um anti-acids meg wow um when you were in south africa you would have seen this i'm hoping that in the uk the the use is a bit more judicious but anti-acid medications are handed out to babies as if they're just part of the normal baby schedule um and actually what does it do it changes the acidity in your gut and what does that do it changes your microbiome so ironically the allergy epidemic has paralleled the epidemic and anti-acid use okay so all these things to think about antibiotics anti-acid lots of skin to skin breast feed vaginal delivery if possible and then once the kid is eating a wide variety of foods foods with fiber foods with prebiotics yogurt with probiotics etc etc so the wider the variety the better your microbiome can flourish brilliant absolutely fabulous advice and you know i mean i certainly my third little one had very very severe reflux and actually she still is lactose intolerant she has been her whole life and i was actually weirdly i was already a published author and i really was feeling like this whole reflux lactose intolerance story that was happening at the time was was overkill and then emily comes along and really really was quite ill and she still to this day gets very sick if she has anything with with any lactose in it um but i put her on nexium and to this day, you know, it's really been something that I've thought, oh, was there any other way I could have handled it? Because I do think in the moment of having a niggly baby, a baby who's unsettled, a baby who we can't get to the bottom of why they're crying. It's just becomes easy to go for the quick fix, which is the medication.

And so, you know, when we go to our doctors, you know, we're expecting to have a pill, you know, give me a fix. And, you know, one of the things Kath and I, Kath McGaw, who's a pediatric dietitian, who I know you work closely with as well, who now often say to moms, try and be comfortable with being with being uncomfortable, with knowing that it's a stage they're moving through. They don't need to be medicated for for colicky tummies or gassiness or irritability in the early days, because I think that that's there's been a lot of pressure on pediatricians and doctors to give us a pill to sort out this this niggly baby.

Absolutely. And, you know, Meg, as you say, some babies deserve the anti reflux treatment. So there are babies with true reflux disease.

So those who are unable to to drink because their throats are nasopharous, those who are aspirating, breathing in their vomit, those who are vomiting so much that they're not gaining weight or those who are crying 24 hours a day in pain. They need the reflux treatment, but not the baby who's spitting up. I mean, spitting up is absolutely normal.

It's a big start to the baby. Babies do spit up. Not the baby who's a little bit niggly, you know, but but part of the normal physiological discomfort of a baby.

So it's all about degrees and it's all about it. And it's not just the parents, it's the doctors. Like doctors want a quick fix, too.

They want to be able to say to the parent, oh, let's try this. It's it's much harder coming from a pediatrician. It's much harder to say to the parents, I don't think we're going to do anything.

Yeah, sit it out. But often it's much wiser. Yeah, very interesting.

So you mentioned something very interesting just now, and I know this is a question that I get asked often. And you mentioned that, you know, the dog being in the vicinity and maybe even licking the baby was good for their gut microbiome. Is there any evidence or is there any research on pets and pets in homes to either contribute to more allergies or to actually decrease allergies? Yeah, so and so not all the research is overwhelmingly conclusive, but it seems that having pets, dogs, cats in the house are actually allergy protective.

It's very different, though, if there's no dog or cat in the house and the child's already developed eczema and they've got eczema. And then you decide to get pets into the house because then the child's probably going to become allergic. Because those allergens are going to go through the broken skin.

So this really only works if there's a pet in the house from birth. OK, interesting. And then the other thing is, you know, some babies, they the allergic babies say they've got eczema and a peanut allergy or whatever.

Then sometimes they do develop an allergy to the pet in their home, but they tolerate their own pet because they've lived in harmony with them for so long. But then they go out of the house to granny's house and she's got a new little terrier and suddenly they itch and sneeze and rub. So often kids are tolerant to their own pets, but then don't tolerate other people's pets.

But certainly it seems that from the word go, it's a much better idea to to have pets in the house. Very, very interesting. So if we've got a little one who has displayed some allergies, so they've maybe come up in hives after having had it for the third time.

And I mean, let's talk about those ones where there's a question mark. Is this an allergy? And I guess the ultimate question that most parents are asking is, when should I seek help and when do I see a doctor? What are the warning signs that this could be an allergy? So there are two main types of allergy. There is the immediate type allergy, which is a lot easier to recognize and to investigate.

And there's a delayed type. So let me start with the delayed type. The delayed type is more subtle.

It's not straight after eating the food that you suspect. It really usually presents as gut cramps, maybe diarrhea, maybe eczema. And that's more common in the very young babies with a possible cow's milk and soy allergy.

But now when we're talking about the kid who's weaning, we talk much more about immediate type allergies. So immediate type allergies, by definition, occur from seconds up to two hours after exposure to the allergen. And they present with symptoms such as fives, which are tiny little raised rashes.

You can have overproduction of mucus. You can have tearing eyes. You can have tummy cramps.

You can have vomiting. You can have throat clearing. You can have coughing.

You can have wheezing. You can have difficulty breathing in. So it can vary from very mild, which is normally a few rashes around the mouth, to very severe or life threatening.

Now, if you have given your child food and within two hours you see any of those symptoms, all of those children deserve to be seen because for a few reasons. Number one, food allergies are often misunderstood and they're often overdiagnosed if the parent just makes the decision. So rather have it tested properly.

They can be tested easily. Skin prick tests, blood tests, and you can even get, you know, the information by the end of your consultation. So rather have it tested, A, to confirm the allergy, B, to see if there are any associated allergies.

For example, if you're egg allergic, you're much more likely to be peanuts allergic. So that must be that must be tested as well, because remember, if you're not allergic, you want to get it in as soon as possible to prevent your body from making up its mind in a different way. So test the allergy, test associated allergies and test alternatives.

So if your kid has a cow's milk protein allergy, an immediate type, maybe they're fine with soya. And then there is something, if once they're finished breastfeeding that they can have, that's relatively affordable and palatable because some of the cow's milk protein allergy formulas are unbelievably expensive and foul tasting. And then, of course, you also need to know what to do in an emergency.

So that's super important, a super important reason to go see your health care practitioner. Was it a mild reaction that just needs a bit of quick acting antihistamine? Or was it a severe reaction that needs an adrenaline autoinjector like an EpiPen? And then follow up. Every allergy is different.

So egg and cow's milk allergy and soya and wheat are often outgrown during childhood, whereas peanuts and fish allergies and tree nut allergies and seafood are often not. So there's so many nuances to this. Take the guessing out of it and rather see someone for any suspicion of food allergies.

Very interesting. Sure. I feel like we could keep going for hours.

There were a couple of questions that came through that I don't want to miss out on. And one of them is around environmental pollutants and the air that we're breathing. And it was quite interesting.

I was watching BBC News yesterday and there's this this crazy level of pollutants that have never been seen before over one of the cities in India, I think it is. And and it's just it's just never been seen before. And people are really worrying about children.

So there are a couple of questions around the air we breathe. One is, would it be worth getting some sort of air purifier that parents are looking at getting? And another question is, do air cons make allergies worse? So is there anything we should be doing and thinking about with regards to the air that our children breathe? Yeah, I think this is a very difficult topic, because even if you protect them in your household, they go out into the real world and there will be pollution. So there's no doubt that pollution is bad for your airways and for your airway microbiome.

And it increases your chance of developing lung diseases and it can exacerbate things like asthma. There's no doubt. But we can't avoid it altogether.

What about in our household? So generally, if a child is already known to have an environmental allergy. So the air purifiers aren't really there to take the pollution away in the house. It's more to take away the bigger particles like pollen particles.

And maybe if it's a very refined one, house dust particles. I think if your child already has an allergy, think about it. But it's not the be all and end all at all.

OK, house dust mite, for example, it's much more important to reduce fluffy toys, reduce fluffy blankets because dust mite settles. It's not really in the air that much, except if you jump on the bed and you wash your sheets at higher temperatures to use special house dust mite covers. So those are more important for allergy for pollen allergies, possibly.

But it's also not going to be your absolute answer. Certainly humidifiers, we do not advocate because a lot of allergens like mold and dust mite, they thrive on humidity. So you would actually be propagating them rather than mitigating them.

You talked about air cons. And I actually haven't seen much evidence about this, Meg. So I don't want to talk out of turn, but air cons are normally dry.

So that's good. The only thing that I find is if air cons are blowing directly onto children, I think it's quite an exacerbator because it can make your nose run. It can create extra mucus.

It can make you swallow more mucus and then maybe get coughing attacks. But I don't think it's been found to make allergies worse, except if your air con is really disgusting and full of mold, etc. So they need to be cleaned regularly and professionally.

And then the last thing is, of course, not just mold can grow there, but also bacteria. So something like Legionella, which is a bacterial infection, a lung infection can be spread through contaminated air conditioners because you're literally spitting out the bacteria from the air con. So I am very much for air conditioners because they're comfortable and they're dry, but they need to not be blowing straight onto people.

And they also need to be cleaned regularly. Very interesting. Well, you know, I wish I'd heard this podcast before I had my firstborn because I just know and I mean, you know what it's like.

You've got four children. You look back and you go, oh, I wish I hadn't done that. And I wish I hadn't done that.

My son has terrible environmental allergies. And I mean, it's interesting because we didn't have a dog and then got him a dog when he was one. And I mean, if a dog comes near him, he's so allergic.

And, you know, and we obviously used him. I used humidifiers every night, even in moist in Cape Town, you know. And so there were just so many things we did wrong.

So I hope this has been super useful for other moms. I think it has been. And yeah, I really love chatting, Claudia.

It's just amazing to just get a little bit of a, you know, kind of a smorgasbord of tips to prevent allergies. So thank you. Yeah.

Thank you so much for the invitation. And if there are any topics you want to delve in into more detail at some stage, maybe we can do that because today was much more of an overview. Yeah, no, that's really, really super.

And Claudia, I know that your practice is way too busy anyway. Is there any chance that people could look out for you on Instagram or is there any way that they can see you and come and see? Yes, I haven't been active enough on Instagram, but it's Dr. So DR underscore Claudia CLAUDIA underscore grade. You are a Y and also big.

You're a prolific author. So I just want to let your listeners know I'm also just finishing a book on pediatrics and parenting, but much more medical. Yours are much more sense and and directed, but mine's a lot more medical.

Just dispelling some of the myths and debunking and making it much easier. So I'll let you know. Wonderful.

Do you have a title yet or not yet? Called Real Parenting and Pediatrics. Oh, I love it. Oh, it's going to be I'm just finishing it.

Well, congratulations. We will definitely when that book comes out. I'd love to do an episode with you and just promote it, because I know it'll be a fabulous text.

It's so sweet. And I do reference your books in it in almost every chapter. Thank you, Claudia.

Well, thank you for your time. Thanks to everyone who joined us. We will see you the same time next week.

Until then, download Parent Sense app and take the guesswork out of parenting.