

REVIEWER'S REPORT

Manuscript No.: IJAR-54250

Date: 8/10/2025

Title: Feeding and Autism: Understanding and Overcoming Nutritional Barriers

Recommendation:

Accept as it is

Accept after minor revision.....

Accept after major revision

Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality	✓			
Techn. Quality		✓		
Clarity		✓		
Significance	✓			

Reviewer Name: Mrs. Shreya Vaz

Date: 8/10/2025

Reviewer's Comment for Publication.

The article presents a brief, and some of the contents of Autism Spectrum Disorder and its relationship with nutritional and behavioral management

One of the article's key strengths lies in feeding challenges experienced by children with Autism Spectrum Disorder

While the article would benefit Autism Spectrum Disorder children to overcome nutritional and behavioral

Detailed Reviewer's Report

This article is based on the in feeding challenges experienced by children with Autism Spectrum Disorder

Abstract : The start of the article having a brief of Autism Spectrum Disorder (ASD) and the glimpse of integrated review of literature

Introduction: it is clear, précised content about Autism Spectrum Disorder (ASD). It is marked by impairments in communication, social interaction, and the presence of restricted interests and repetitive behaviors. Atypical sensory responses—such as aversions to specific tastes, textures, and

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smells—often lead to feeding challenges that impact growth, metabolic health, and quality of life for both children and their families.

Methodology

An integrative literature review was conducted across SciELO, PubMed, BVS, Web of Science, and Google Scholar databases, using descriptors related to autism, feeding, nutrition, food selectivity, and dysbiosis. Studies published from 2019 to 2024 and two key books were included. Ten sources—eight articles and two books—were critically analyzed to synthesize current evidence on feeding difficulties and nutritional interventions in ASD.

Main Findings and Discussion

1. Feeding Challenges in ASD

- High Prevalence of Food Selectivity: While about 25% of typically developing children exhibit selective eating, rates among autistic children reach 60–80%, with some limited to as few as five preferred foods.
- Gastrointestinal Problems: Dysbiosis, oral-motor dysfunction, and GI disorders exacerbate feeding difficulties and may influence behavior via the gut–brain axis.

2. Sensory and Behavioral Factors

- Sensory Hypersensitivity: Aversion to textures, temperatures, or colors leads to rigid food preferences and refusal of novel items.
- Emotional and Environmental Influences: Family mealtime routines, parental modeling, and emotional climate significantly shape eating behaviors. Structured, predictable environments foster increased acceptance of new foods.

3. Physiological and Microbiota Considerations

- ❖ Gut–Brain–Microbiota Axis: Imbalances in intestinal microbiota can alter neurotransmitter production (e.g., serotonin, dopamine, GABA), affecting mood, anxiety, and appetite, thereby reinforcing food selectivity.
- ❖ Nutrient Deficiencies: Restrictive diets often result in insufficient intake of iron, calcium, vitamin D, fiber, B-complex vitamins, and essential fatty acids, elevating risks of malnutrition or obesity.

4. Nutritional Intervention Strategies

Individualized nutritional plans should include:

- Supplementation: Vitamin D, omega-3 fatty acids, zinc, magnesium, and B-complex vitamins to support metabolic and emotional stability.
- Prebiotics and Probiotics: To restore microbiota balance and improve both GI and behavioral symptoms.

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- Dietary Modifications: Elimination of ultra-processed foods, artificial additives, and refined sugars. Consider gluten-free and casein-free diets to reduce opioid-like peptide effects in susceptible individuals.

5. Multidisciplinary and Family-Centered Approaches

- Occupational and Behavioral Therapies: Sensory integration techniques and Applied Behavior Analysis (ABA) facilitate gradual exposure to varied foods.
- Family Engagement: Active involvement of caregivers in meal planning, preparation, and positive reinforcement creates supportive mealtime experiences
- Interdisciplinary Collaboration: Coordination among physicians, nutritionists, speech therapists, psychologists, and occupational therapists ensures holistic care that addresses biological, behavioral, and emotional domains.

Conclusion

Feeding difficulties in ASD emerge from a complex interplay of sensory sensitivities, physiological factors, and environmental influences. Addressing these challenges demands a comprehensive, individualized strategy that integrates nutritional therapy, sensory and behavioral interventions, and family support. Viewing feeding as both a biological necessity and a social-emotional activity fosters improved dietary variety, growth, and quality of life for children on the spectrum and their families.

References; All the references are provided