INTRODUCTION: Infant feeding practices partially explain postnatal weight gain of HIV-exposed, uninfected (HEU) infants. Excessive added sugars intake increases the risk of obesity and cardiometabolic problems. We determined the proportion of a sample of HEU US infants/toddlers who consumed added sugars in excess and food groups that contributed to it.

METHODS: Dietary intake of HEU infant/toddlers was cross-sectionally assessed by 24h recall. Food items consumed (n=286) were converted into energy and classified into four groups from the NOVA System according to degree of industrial processing. The contributions of each NOVA food group to total energy and to energy from added sugars were evaluated.

RESULTS: Forty-eight HEU infant/toddlers, median age 12.3 months [IQR:11.85-13.69 months], were studied. 40% of children were overweight and 10.6% obese. 50% of the sample consumed a high added sugar diet. Ultraprocessed products (UPP) comprised 66% of energy intake and 100% of the energy intake from added sugars. Infants/toddlers with high added sugar intake consumed more calories from UPP (835 vs. 559 kcal, P=0.009) and less calories from fresh foods (197 vs. 430 kcal, P=0.010) than those with adequate intake.

CONCLUSIONS: Excess added dietary sugar, with more than half of total dietary energy from UPP, are common dietary constituents among HEU, rates comparable to the general US population (60%). UPP contributes to the entire amount of added sugars consumed by this young population. Increasing the consumption of whole foods, while
decreasing UPP, could be an effective way of reducing added sugars in the diet of this vulnerable population.