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Moving on from prescribed infant formula for children with cow's milk protein allergy

Dietetics and Nutrition

Information for Patients

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A guide for parents of children with cow's milk protein allergy over the age of 14 months

Before 14 months of age, breast milk or formula milk are important substitutes for cow's milk. They give your child most of their calories and protein. They also give them calcium and certain vitamins (mainly vitamin A, D, iron and riboflavin). These are important for growth and weight gain.

As your child gets older and eats more food and a wider range of foods, most nutrition comes from foods rather than milk (except for calcium).

After your child is **14 months old**, you should change their specialist formula milk to a different milk substitute. This may be an **alternative or plant-based milk drink**. If your child has more than one food allergy, you may need to make this change when they are older. Your dietitian will advise you if this applies.

You may already use some of these milk drinks in cooking. You can now give them to your child as a drink instead of formula milk.

If you are breastfeeding and giving your child top-up formula, you can stop the formula and continue breastfeeding.

The information below explains how to change from infant formula to an alternative or plant-based milk drink.

What is an 'alternative milk drink' (also known as plant-based milk)?

- This is the name given to cartons of milk substitute found in supermarkets. They are sold as a cow's milk replacement.
- They are called 'drinks' rather than 'milk' as they do **not** have the same nutrients as cow's milk. They will not provide enough nutrition at younger ages.
- They are made from water and a plant source such as soya, coconut, almond, hazelnut, oats or rice, so they are suitable for cow's milk allergy.
- Many are sweetened with sugar/fruit juice. **Choose** unsweetened brands.

- Try to give from a beaker rather than a bottle,
- Make sure your child's teeth are cleaned 2 times a day.
- It is also recommended to have regular dental check-ups.
- Some brands suggest they are good for young children age 1 to 3, but they may be higher in sugar.
- Goat's milk, camel's milk, sheep's milk and lactose-free milks are not suitable for children with cow's milk protein allergy.

Which alternative milk drink should I use?

If your child can tolerate soya, soya milks are the best choice nutritionally. They have more calories and protein. Despite claims that they may not be suitable for young children, these have no evidence. Soya milk is an excellent source of nutrition.

If your child cannot have soya the choice will depend on taste and availability.

Think about the following:

- Always choose an alternative milk drink **that has calcium**
- Organic and many Barista milk drinks do not have added calcium so are not suitable
- Rice milk is not suitable as a main drink for children under 4 ½ years of age due to its natural arsenic content
- Look for brands that do not have sugar and have vitamins and minerals added, such as vitamin B2(riboflavin), iodine, vitamin A. Some milk drinks for example; Mighty Pea has added protein. Others have more vitamins for example, Koko Super.
- Many supermarket own brands can be cheaper or think about buying in bulk online.

I notice that alternative milk drinks do not have much protein. Will my child still grow?

Most alternative milk drinks (apart from soya milk or drinks with added bean protein) do not contain enough protein or fat for babies under 1 year old.

Growth and weight checks may be needed, especially for children with several food allergies or who eat only a small range of foods. These children may need extra protein and calories from food so their bodies can use protein for growth.

Offer protein rich foods at 2 meals a day such as meat, fish, eggs, or pulses:

- Include peas, beans, nut spreads
- Add extra fat to meals, including dairy free spreads, oil, and avocado
- Give extra snacks if your child seems hungry or is not gaining weight. These snacks should be protein based (such as mini sausages, nut spreads, hummus or tahini dips on vegetables or breadsticks rather than biscuits)
- Some brands have added protein as above or include soya milk or desserts if tolerated

My child does not like the taste of the new ‘milk drink’, he prefers formula

Children may need to be offered a new taste many times before deciding if they like it. We recommend you change to an alternative milk drink over 4 to 8 weeks.

Start by trying the new drink on cereals or cooking. Then replace 1 ounce (30ml) of formula with the alternative milk drink every few days.

If your child continues to dislike the taste, try a different brand or type.

Your GP will not be able to continue your prescription. It is important to change to an alternative milk drink, unless there is a medical reason.

Taste dislike is not seen as a valid reason to carry on prescribing.

Can my child be allergic to the new ‘milk drink’?

Some children with milk allergy can get similar symptoms with soya, usually those with tummy problems. Most children with immediate IgE milk allergy tolerate soya. If your child continues to get symptoms with a plant-based milk drink, try another substitute (or talk to your dietitian).

Children who are allergic to nuts should not be given nut-based drinks such as almond or hazelnut. (Coconut is not a nut). A nut allergy will be diagnosed at the hospital allergy clinic.

Note some alternative milks which are higher in protein have added pea protein.

Does my child need any vitamin supplements?

All children with a food allergy who drink plant-based milk should take a vitamin D supplement. This should contain 10 micrograms (mcg) or 400 IU of vitamin D.

It is best to give your child a multivitamin that has vitamins A, C and D. Children who are fussy eaters may also benefit from vitamins and minerals such as riboflavin, iron and zinc to help make sure they get enough nutrients.

You can buy multivitamin drops and syrups for young children from supermarkets and pharmacies. Examples include Wellbaby and Wellkid. Ask a pharmacist if you need advice. Healthy Start vitamins are also available through the Healthy Start scheme.

If your child drinks less than 300ml of plant-based milk a day, or if their milk is not fortified with calcium, they should also take a calcium supplement.

Speak to your doctor or dietitian for advice or read the leaflet Calcium advice for children on a dairy-free diet (leaflet 1365)

My child has many food allergies and has limited food choices, should I continue with my allergy infant formula?

Your dietitian will advise your GP to continue prescribing your infant formula if there is a medical need. This includes having multiple food allergies, feeding problems or difficulties in achieving

nutritional adequacy from solid foods, especially if protein sources are limited.

Does my child have to drink a milk alternative? My child prefers dry cereal

If your child eats good quantities of a variety of foods from different food groups (meat/fish/pulses, cereals/bread, fruits/vegetables), an alternative to milk is not essential.

Y**our child will need a calcium supplement.** They should have multivitamins.

They should also have their weight and growth monitored every 3 months. Talk to your doctor, dietitian, or refer to leaflet 'Calcium advice for children on a dairy free diet'.

Any tail off in growth may suggest not enough protein (especially under 18 months old).

Can't I just try my child back on ordinary cow's milk rather than use an 'alternative milk drink'?

Most children grow out of a cow's milk allergy by the age of 3.

If your child has not seen a dietitian in the last 6 months, or if you would like to try cow's milk again, ask your GP to refer you to a dietitian. The dietitian will explain a safe way to reintroduce milk using a milk ladder. This starts with foods that contain a small amount of milk, such as a biscuit made with milk.

Do not try to reintroduce milk without professional advice if your child has had a reaction to cow's milk that caused:

- a rash
- coughing
- wheezing
- severe vomiting
- severe diarrhoea

If your child can already eat a full portion of yoghurt or cheese without any problems, you can try giving small amounts of fresh milk.

Contact your doctor or dietitian if you have any questions or would like to discuss further.

Contact details:

If you are under the Leicester Royal Infirmary Allergy team, please contact **0116 258 5400**.

If you are under the GP/Community Dietitians, please contact your GP or Leicestershire Nutrition and Dietetic Service at **0116 222 7141.**

Space for your notes

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.

To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

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