Do you suspect your child has COW'S MILK PROTEIN ALLERGY?



Information geared towards parents

References: ¹Koletzko S, et al. JPGN 2012;55(2):221-9. ²Lifschitz C, et al. Eur J Pediatr 2015;174:141-50. ³Høst A. Pediatr Allergy Immunol 1994;5(5 Suppl):1-36



"Could it be cow's milk protein allergy?"

That is a question that is not always easy to answer. But, if you can find an answer, it can often calm many of the worries that you and your child are going through.

In this brochure, we have collected information about cow's milk protein allergy – what it is, common symptoms, and what you as a parent can benefit from knowing.

We hope to answer some of the questions you might have. For more specific questions regarding your child's health, please turn to your doctor, pediatrician or dietitian.

If you have any questions about any Nestlé Health Science product, you are welcome to contact us.

We wish you good luck as your child continues on their journey into the world of food!

The Pediatric team Nestlé Health Science



What is cow's milk protein allergy?

Cow's milk protein allergy occurs in approximately 3 % of all children under the age of one.¹ This makes it one of the most common food allergies in infants. Thankfully, most children grow out of it before reaching school age.

What causes food allergies?

Anyone can develop food allergies, even though, for example, infants with food allergy in the family run an increased risk. Cow's milk protein allergy occurs when the child's immune system reacts negatively to the protein in cow's milk.

A child who is breastfeeding can react to the cow's milk protein that could be passed through by the mothers diet into breast milk. If the child is receiving formula instead, they will react to the milk protein in the formula.

In both cases, the child's immune system recognizes the cow's milk protein as something foreign that it needs to defend the body against. It then releases protection mechanisms in the form of natural substances such as histamine. It is these substances that cause the allergy symptoms the child may experience.

How quickly do the symptoms appear?

Depending on the type of reaction, the allergy symptoms can appear immediately, in other words within minutes of the child taking in the cow's milk protein. It is also possible for the symptoms to appear after a delay of several hours or even days.

COW'S MILK PROTEIN ALLERGY IS NOT THE SAME AS LACTOSE INTOLERANCE!

Although milk protein allergy and lactose intolerance may have some similar symptoms, the causes of the symptoms are completely different. Lactose intolerance occurs due to the intestine's inability to break down the natural milk sugar (lactose) found in both cow's milk and breast milk. The symptoms of cow's milk protein allergy, on the other hand, occurs when the immune system reacts to certain proteins found in cow's milk. In addition, lactose intolerance is very rare in children younger than age 3, even in children with cow's milk protein allergy.

What symptoms SHOULD YOU LOOK FOR?

As a parent, you will notice immediately if your child is distressed to some degree, or if they are in pain. Since the symptoms of cow's milk protein allergy can vary greatly in terms of both how it presents itself and its severity, it may be hard to find the cause of your child's distress. In addition, each child with cow's milk protein allergy has their own specific way of behaving. It is therefore important for you to know all the different symptoms that can be associated with cow's milk protein allergy so you can keep a lookout for them.

The symptoms of cow's milk protein allergy are generally divided into four areas.* Many children with cow's milk protein allergy have multiple symptoms, usually from more than one symptom area.²⁻³

RESPIRATORY

- Wheezing or noisy breathing, or difficulty breathing
- Runny nose
- Persistent cough (does not go away)

SKIN

- Urticaria, hives (rash with raised red bumps)
- Angio-oedema (swelling of lips or eyelids)
- Eczema (dry, scaly or itchy red skin)

Cow's mil allergy diagnosed b care pro

*Adapted from the European Society of Paediatric Gastroenterology, Hepatology and Nutrition (ESPGHAN) guidelines 2012. ** Infantile colic is generally associated with episodes of crying for a regular period of time during the day and generally occurs during the infant's first months of life.

DIGESTIVE

- Vomiting
- Frequent regurgitation
- Reflux

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- Refusal to feed
 - Colic (coupled with inconsolable crying**)
 - Diarrhoea
 - Blood in the stool
 - Constipation
 - Dysphagia (difficulty swallowing)
 - Stomach pain

GENERAL

- Tiredness, lethargy
- Restlessness
- Distress
- Sleeping problems
- Anaphylaxis (occurs only in serious cases; a rapid reaction with swelling and itchy rash)

In case of acute symptoms and shortness of breath SEEK MEDICAL ATTENTION

My child's SYMPTOM DIARY



Please fill in the form below before your child's next healthcare visit.

By monitoring your child and their symptoms over a few days leading up to the visit, you can help facilitate diagnosis.

		Formula Name:
IUMBER OF FEEINGS A	ND ESTIMATED VOLUME	(ML)/FEEDING
	SYMPTOMS*	
IGESTIVE	RESPIRATORY	GENERAL
Vomiting	Wheezing or noisy	Tiredness, lethargy
Frequent regurgitation	breathing, or difficulty breathing	Restlessness
Reflux	Runny nose	Distress
Refusal to feed	Chronic cough (does	Sleeping problems
Colic (coupled with inconsolable crying**)	not go away)	
Diarrhoea	Urticaria, hives	
Blood in the stool	Angio-oedema	
Constipation	Eczema	
Dysphagia (difficulty swallowing)		
Stomach pain		
APPY CHANGES		
umber of changes		

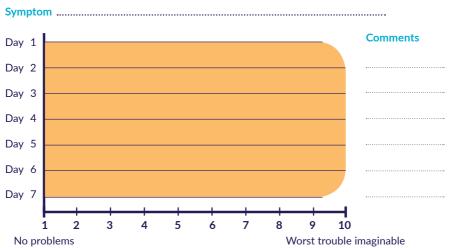
*Adapted from the European Society of Paediatric Gastroenterology, Hepatology and Nutrition (ESPGHAN) guidelines 2012.

** Infantile colic is generally associated with episodes of crying for a regular period of time during the day and generally occurs during the infant's first months of life.

Symptom diary WEEKLY

Do you want to monitor select symptoms in your child for a longer period of time?

Put an X on the line to indicate how you perceive your child's symptoms – from no problems to worst trouble imaginable. Make the estimate daily for 1–2 weeks, preferably at about the same time. **Decide which symptoms you want to monitor in consultation with, for example, your child's doctor.**



WEEK 1

VECKA 2





Tips and advice for AVOIDING COW'S MILK PROTEIN

DO NOT USE products that include the following in the list of ingredients:

- Lactose/milk sugar*
- Crème fraiche, soured milk, sour cream
- Margarine, edible fat or edible fat blend
- Milk, milk powder, buttermilk powder, skimmed milk powder, powdered milk
- Cream, powdered creamer, yoghurt, ice cream

- Milk protein, milk albumin, caseinate
- Cheese (all types), soft whey cheese/whey cheese
- Casein/caseinate/sodium caseinate, calcium caseinate
- Butter, butter fat
- Cottage cheese, curd cheese, quark
- Whey, whey powder, whey protein

* Except for Althera®, which contains lactose prepared in pure form that is free of milk protein

NOTE that the following products • Cocoa powder **may contain milk protein:**

- Bread baked with milk or margarine that contains milk. The bread may also have been glazed with milk. The same applies for pastries, cakes and biscuits
- Stock cubes, liquid stocks and seasoning mixtures
- Meat products such as sausages and liver paté

- Sweets and chocolate (including dark chocolate)
- Processed and semi-processed products such as powdered sauces or fish cakes
- Meringues may be baked with milk protein instead of egg
- Muesli, cereals, breadcrumbs and batters
- Sorbet

ALWAYS READ THE LIST OF INGREDIENTS THOROUGHLY AND FREQUENTLY

Do not make major changes to your child's diet without first consulting a healthcare professional.

If you child is under 6 months of age AND CANNOT THRIVE ON BREAST MILK ALONE

Nestlé Health Science supports breastfeeding and believes that breast milk is the best nutrition option a young child can get to grow and develop.

For children with cow's milk allergy who cannot thrive on breast milk alone or who for some reason cannot breastfeed, there are special food products free of cow's milk protein.

When it's TIME FOR TASTE PORTIONS

Some children become interested in food early. At the earliest from the age of four months, you can let your child test small samples of regular food, as long as it does not compete with breastfeeding. Even if you give small taste samples, it is also important to continue breastfeeding fully or to give formula as usual until the child is six months of age. At about 6 months, it's time to start getting your child used to eating solid food. Continue to breastfeed or give special formula during this period. (Read more at www.livsmedelsverket.se)

In recipes containing milk or milk products, you can instead use premixed special formula in the same quantities. It's also a good idea to add a little neutral oil to the food in order to increase its energy content.

The following is an example of a day's menu that meets nutritional requirements, including calcium, for children aged 1-3 years:

EXAMPLE OF A DAY'S MENU:

Morning: 2 dl premixed special formula.

Breakfast: 1 serving oat porridge with 1 dl premixed special formula and stewed fruit, or 1 serving fruit porridge.

Snack: 1 banana

Lunch: 1 serving turkey stew with rice and vegetables. 1 dl enriched oat drink

Snack: 1 sandwich with milk-free margarine and ham. 1% dl special formula.

Dinner: 1 serving fish stew with potato. 1 dl enriched oat drink

Evening meal: 1 serving milk-free porridge with fruit purée



(Jould you like tips about RECIPES OR DO YOU HAVE QUESTIONS ABOUT ANY OF OUR PRODUCTS?

Please contact our Consumer Contact Centre:



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