

Prescribing Specialist Infant Formula in Primary Care – Quick Reference Guide

Coventry & Warwickshire Area
Prescribing Committee

Clinical Guideline – CG016b



Non ACBS infant formulas are blacklisted and should be purchased

Whilst these guidelines are for specialist formula, breast milk is the optimal milk for infants. Breastfeeding should be promoted and encouraged where possible

All patients started on specialist infant formulae should be referred to dietetics except for those with secondary lactose intolerance, who should be referred if symptoms do not resolve once standard formula is recommended (usually within 8 weeks).

All Conditions:	Under 6 Months	6 – 12 Months	Over 12 months
Monthly quantity to prescribe	13 x 400g, 12 x 450g or 6 x 900g tins	7 - 13 x 400g/450g or 3 - 6 900g tins	7 x 400g, 6 x 450g or 3 x 900g tins

Quantities may vary depending on quantity of solid foods being eaten. It is advisable to prescribe only 2 – 4 tins initially for all formula to assess tolerance and palatability

Refer infants with anaphylaxis or faltering growth to secondary care without delay

<p>Cow's milk protein allergy (CMPA)</p> <p><i>Breast milk is the best choice for most infants with CMPA</i></p>	<p>Symptoms differ if the allergy is IgE-mediated or non-IgE mediated and can include: timing of onset, skin conditions (pruritis, erythema, urticaria, atopic dermatitis, acute angioedema), GI (diarrhoea, bloody stools, nausea and vomiting, abdominal distention and/or colicky pain, constipation, GOR), respiratory (wheeze or cough, nasal itching, sneezing, rhinorrhoea or congestion), anaphylaxis or faltering growth.</p> <p>Most infants with CMPA develop symptoms within one week of introduction.</p> <p>First line formula options – Similac Alimentum® (birth-12 months), Nutramigen 1 with LGG® (birth to 6 months), Nutramigen 2 with LGG® (6-12 months)</p> <ul style="list-style-type: none"> Breastfeeding mothers may require a milk free diet and calcium supplementation. Refer to paediatric dietitians before weaning and refer to latest correspondence before issuing prescriptions. Amino acid formulae (AAF) should normally be started in secondary or specialist care There is no evidence to suggest that changing the brand of infant formula causes any harm <p>Review the need for prescribing if:</p> <ul style="list-style-type: none"> Patient can tolerate any dairy foods Patient is over two years of age Formula been prescribed for more than one year Quantity prescribed is more than the recommended amount
<p>Gastro-oesophageal Reflux (GOR)</p>	<p>GOR presents with a history of effortless vomiting after feeding (up to two hours), usually in the first six months of life:</p> <ul style="list-style-type: none"> Over feeding should be ruled out by establishing the volume and frequency of feeds Give reassurance and advice on positioning post-feed Infant Gaviscon can be given up to a maximum of six times per day Review after one month; if no improvement consider referral to paediatrician <p>DO NOT use formula that thickens in the stomach with separate thickeners or in conjunction with medication such as antacids, ranitidine or proton pump inhibitors, as the formula needs stomach acids to thicken.</p> <p>Initially recommend to purchase anti-reflux formula from community pharmacies: Enfamil AR® (thicken in stomach); Aptamil® anti-reflux, Cow and Gate anti-reflux or SMA PRO Anti-reflux® (pre-thickened)</p>

Do not prescribe soya or lactose-free formula

Refer infants with anaphylaxis or faltering growth to secondary care without delay

<p>Lactose Intolerance</p>	<ul style="list-style-type: none"> Secondary lactose intolerance usually occurs following an infectious GI illness (but can occur alongside new or undiagnosed coeliac disease) Symptoms include abdominal bloating, increased explosive wind and loose green stools <p>DO NOT recommend or prescribe for longer than eight weeks without review. Symptoms usually resolve within this time but can take up to three months</p> <p>DO NOT prescribe for children over one year – lactose-free supermarket products are suitable</p> <ul style="list-style-type: none"> Primary lactase deficiency usually occurs after two years of age and may not fully manifest until adulthood. Resolution of symptoms within 48 hours of withdrawal of lactose from the diet confirms diagnosis Congenital lactase deficiency requires specialist management <p>Lactose free infant formula (e.g. SMA LF®) can be purchased from community pharmacies at a similar cost to standard infant formula and prescribers should consider the need to prescribe. Most pharmacies and many supermarkets can obtain stock in a few days. Parents should be advised on the use of dairy free solids.</p>
<p>Faltering Growth</p>	<ul style="list-style-type: none"> Faltering growth cannot be detected without using a growth chart. Diagnosis is usually made when an infant falls below the 0.4th centile or crosses 2 centiles downwards on a growth chart or is 2 centiles below length centile. Before commencing a high energy formula ensure parents/carers are offered food first advice on suitable high calorie foods if the infant is weaned. All infants on a high energy formula will need growth (weight and length/height) monitoring to ensure catch up growth and appropriate discontinuation of formula to minimise excessive weight gain. <p>First line formula option - SMA PRO High Energy</p>
<p>Pre-term formula</p>	<p>These infants will have had their pre-term formula commenced on discharge from the neonatal unit and will be under regular review by the paediatricians.</p> <p>These formulae should not be started in primary care and should be discontinued by six months corrected age or if there is excessive weight gain.</p> <p>DO NOT prescribe liquid formula unless clinically indicated by secondary care</p> <p>Start in Secondary Care with SMA PRO Gold Prem 2® powder or or Nutriprem 2® powder</p>

Adapted with permission from PrescQIPP document B146 www.prescqipp.info

Further information is available in the full APC Guideline on Specialist Infant Formulae and in the APC Milk Intolerance Guidance

Dietetic Teams:

Coventry 02476 966161
 Nuneaton 02476 865098
 Warwick 01926 495321 (Ext 4258)