

**Guidance for the prescribing of
 Specialist Infant Formulae (infant milks) in primary care**

1. Purpose of the guidance

To assist GPs and Health Visitors in ensuring appropriate prescribing of infant formulae in primary care, for infants aged 0-12 months (with age exceptions as stated), where breast milk or standard infant milk products routinely available to purchase are not suitable due to allergy, having used [MAP guideline interactive tool](#) to determine appropriate treatment option/s.

[NICE CG116](#) gives background on food allergy in under 19s but not specifically in cow's milk protein allergy (CPMA) which is the main remit of the [MAP guideline](#). The latter gives background diagnostic information [here](#). **Please note that lactose free milks, suitable in cases of lactose intolerance, can be bought at a similar cost to standard infant formulae and should not routinely be prescribed.**

2. Prescribing advice for formula feed

Prescribers are directed to the [MAP guideline](#) to determine when to treat and how. Table 1 below can then be used to determine which formula milk product to select, based on various clinical scenarios – prescribers are directed to use [interactive MAP algorithm](#) to make the initial assessment before referring to the table below.

Quantities to prescribe

All new items - prescribe only the required quantity for a two week trial.

Age of child	Number of tins of powder for 28 days
Under 6 months	13 x 400g tins or 6 x 900g tins
6-12 months	7-13 x 400g tins or 3-6 x 900g tins
Over 12 months	7 x 400g tins or 3 x 900g tins

Table 1: Prescribing of specialist formula feeds that cannot be purchased over the counter, where indicated [as per the MAP guideline](#)

Extensively hydrolysed formula, lactose free	Age	Product / unit size	Additional information
	Birth – 6 months	Nutramigen 1 [®] with LGG (Mead Johnson) – 400g tin (£11.21) Similac Alimentum (Abbott) – 400g tin (£9.10)	Lactose free May need to mix with standard formula and gradually increase
If above formula refused due to taste consider			
	Birth – 6 months	Aptamil Pepti 1 [®] (Aptamil) – 800g tin (£19.73) SMA Althera [®] (Vitaflo) – 450g tin (£10.68)	Both contain lactose
	6 – 12 months	Nutramigen 2 with LGG (Mead Johnson) – 400g tin (£11.21) Similac Alimentum (Abbott) – 400g tin (£9.10) Aptamil Pepti 2 [®] (Aptamil) – 800g tin (£18.82) SMA Althera [®] (Vitaflo) – 450g tin (£10.68)	Lactose free Lactose free Contains lactose Contains lactose
Amino Acid Formula			
	Birth – 12 months	Neocate LCP [®] – 400g tin (£29.56) Nutramigen Puramino (previously Nutramigen AA) – 400g tin (£27.63) Alfamino (SMA's) -400g tin (£23.81)	Both lactose free May need to mix with standard formula and gradually increase
	1-2 years	Neocate Active [®] – 15 x 63g sachets (£67.75)	<i>Note- there is no follow on formula from Nutramigen Puramino</i>

This list is correct as at March 2018

3. Review and discontinuation of formulae on prescription

The need for specialist milk formulas on prescription should be regularly reviewed by GP, health visitor, paediatrician or dietitian.

See [MAP guideline](#) for detail on how to review and reintroduce cow's milk.

Key points:

- Children with non IgE mediated CMPA should be challenged with milk at or around 12 months, depending on age of diagnosis.
- Children should generally be free of symptoms for 6 months symptom prior to a milk challenge.
- Milk challenges should be repeated approximately every 3-6 months.
- Advice on appropriate foods with which to challenge should be provided by a specialist dietitian.
- Children should be exposed to low levels of milk initially (e.g. in baked goods, bread/biscuits/cakes) and gradually increased.
- Cooked milk has a lower allergic risk as the protein is broken down and therefore should be introduced before uncooked milk products.
- Milk ladder provides a stepwise guidance regarding introduction of milk into diet.
- **All specialist formula should be discontinued by 2 years** and changed to appropriate over the counter milks e.g. calcium enriched oat milk or calcium enriched soya milk.

The Paediatrician or Specialist Dietitian may on occasion request continuing with a specialist formula beyond 2 years in exceptional circumstances e.g. faltering growth alongside evidence of continued milk intolerance or multiple food allergies.

4. References

<https://www.nice.org.uk/guidance/cg116/chapter/1-Guidance#ige-mediated-food-allergy> accessed 7th March 2018.

Food Hypersensitivity- diagnosing and managing food allergies and intolerances (2009), Skypala I, Venter C. Wiley-Blackwell 978-1-4051-7039-9

Clinical Paediatric Dietetics (2007), Shaw V, Lawson M. Blackwell Publishing 978-14051-3493-4

Venter C, Brown T, Shah N, Walsh J, Fox AT. Diagnosis and management of non-IgE-mediated cow's milk allergy in infancy – a UK primary care practical guide [Online]. Clin Transl Allergy 2013;3(1):23. Available at: <http://www.ctajournal.com/content/3/1/23>

The MAP Guidelines- Milk Allergy in Primary Care February 2014 UK Version.
<http://cowsmilkallergyguidelines.co.uk/home/> accessed 6th March 2018