Important Notice:
Breastfeeding is best for your baby as it is perfectly suited to nourish infants and protect them from illnesses such as ear infections, stomach upsets, diabetes, eczema and obesity. It is important that, in preparation for and during breastfeeding, you eat a healthy, balanced diet. Combined breast and bottle feeding in the first weeks of life may reduce the supply of your own breastmilk, and reversing the decision not to breastfeed is difficult. The social and financial implications of using an infant milk should be considered. Improper use of an infant milk or inappropriate foods or feeding methods may present a health hazard. If you use an infant milk, you should follow manufacturer’s instructions for use carefully – failure to follow the instructions may make your baby ill. Always consult your doctor, midwife or public health nurse for advice about feeding your baby.

Aptamil Pepti 2 is a food for special medical purposes for the dietary management of cows’ milk protein allergy from 6 months. It should only be used under medical supervision, after full consideration of the feeding options available including breastfeeding. This product is not suitable for use as the sole source of nutrition for infants from birth, but as part of a balanced diet for babies from 6 months onwards. For enteral use only.
Symptoms of cows’ milk protein allergy (CMPA)?

Symptoms can vary considerably among babies and toddlers. They can appear immediately after consuming dairy (within 2 hours) or may be delayed, taking several hours or days after exposure to appear. Typical symptoms affect the skin (eczema) and gut (colic, vomiting, diarrhoea or constipation) (See Table 1).

It is important to mention any family history of allergy to your doctor when asked about the medical history of your baby.

Table 1. Typical symptoms of mild to moderate CMPA

<table>
<thead>
<tr>
<th>(Immediate reaction)</th>
<th>(Delayed reaction)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Swollen face, lips or tongue</td>
<td>• Reflux</td>
</tr>
<tr>
<td>• Hives, rash, redness or itching</td>
<td>• Eczema, itching or redness</td>
</tr>
<tr>
<td>• Eczema</td>
<td>• Constipation</td>
</tr>
<tr>
<td>• Diarrhoea</td>
<td>• Constipation</td>
</tr>
<tr>
<td>• Vomiting</td>
<td>• Diarrhoea</td>
</tr>
<tr>
<td>• Breathing difficulties</td>
<td>• Blood or mucus in stools</td>
</tr>
</tbody>
</table>

Babies and toddlers with CMPA can develop one or more of the listed symptoms which can range from mild to a severe reaction.

Allergy NOT Intolerance

It is important to note, CMPA and lactose intolerance are not the same condition. The main difference is that CMPA is a food allergy, which causes the immune system to overreact to one or more proteins present in cows’ milk. To avoid an allergic reaction, eliminate cows’ milk protein from the diet. Lactose intolerance is the inability to digest milk sugar, which is called lactose. It is a food intolerance; the immune system is not involved. Symptoms of lactose intolerance include diarrhoea, abdominal pain, bloating and flatulence. The skin and respiratory tract are not usually affected. Lactose free formula is not always effective for the treatment of CMPA. Talk to your healthcare professional.

About this booklet

This booklet has been developed for parents and carers of babies diagnosed with cows’ milk protein allergy (CMPA), who have been recommended Aptamil Pepti 2 follow on milk by their healthcare professional. CMPA can be effectively managed with the correct diagnosis and advice.

The content was written by a qualified dietitian and paediatric specialist manager for the Aptamil team, with the aim of providing a useful resource to simplify CMPA and its dietary treatment with Aptamil Pepti 2.

What is cows’ milk protein allergy?

CMPA is the most common food allergy among babies. It affects between 2 and 7.5% of babies. Symptoms of CMPA usually develop in babies when cows’ milk is first introduced via formula or on weaning if breastfed. CMPA in exclusively breastfed babies is much lower.

It is caused when proteins found in milk and other dairy products (e.g. yoghurt, cheese, butter) cause an abnormal immune response.

Some babies are at a higher risk of developing a food allergy, especially if there is a family history of allergy, asthma, hives, hay fever, or eczema in either parents or siblings.

The outlook is positive, between 75 - 90% of children outgrow CMPA before 5 or 6 years of age.

The immune response is how the body recognises and defends itself against bacteria, viruses, and substances that appear foreign and harmful.
Treatment of CMPA – Questions and Answers

Effective treatment of CMPA requires complete avoidance of cows’ milk and cows’ milk products (dairy).

What should I feed my baby?
If your baby has been diagnosed with CMPA, breastfeeding is the best source of nutrition. Breastmilk contains the ideal nutrient composition for babies. It contains antibodies that boost the immune system which helps to reduce illness and infection in babies.

If my baby has CMPA do I have to stop breastfeeding?
While breastfeeding is best for all babies, it is possible that if some babies are very sensitive they can have allergic reactions. This does not mean that they are allergic to breastmilk.

In this situation, babies are experiencing an allergic reaction to small amounts of cows’ milk proteins (from milk or dairy products the mother has eaten) that pass from your milk to your baby. Should this happen, you may be advised to reduce or eliminate cows’ milk, dairy products, and all products containing cows’ milk from your diet.

Dietary elimination of milk and other dairy foods should only be considered on the advice of your doctor and should be monitored strictly by a dietitian to ensure you and your baby are getting all the vital nutrients to stay healthy.

If you are breastfeeding and have been advised to follow a milk free diet, it is important to speak to your healthcare professional as you may need to take a calcium supplement.

What should I feed my baby if I am not breastfeeding?
If CMPA symptoms persist, you should talk to your healthcare professional who will recommend a hypoallergenic formula. There are two types available: amino acid based formula and extensively hydrolysed formula. Over 90% of babies with CMPA will tolerate an extensively hydrolysed formula.

Important Note:
The use of goats’ milk (including goats’ infant milk formula) and ewes’ milk are not recommended in the management of CMPA. 90% of babies allergic to cows’ milk will react to goats’ and ewes’ milk also.

Soya infant formula and milks are not recommended for the treatment of CMPA for babies under 6 months of age due to cross reactivity. Soya can be used after 6 months if there is no soya allergy.
I have started using Aptamil Pepti 2 and I noticed that it smells different to my baby’s usual milk. Is this normal?
Yes, this is completely normal. Aptamil Pepti 2 is an extensively hydrolysed follow on formula; the protein has been broken down into much smaller pieces to make it suitable for babies who are allergic to whole milk protein. This will affect both the smell and taste of this follow on formula as it is the case for all formulas that are recommended for the treatment of CMPA. However, research has demonstrated that the whey hydrolysate in Aptamil Pepti 2 is the best tasting extensively hydrolysed follow on formula and therefore is more likely to be accepted and tolerated by your baby with CMPA.

My baby’s stools have changed colour and are looser since I changed to Aptamil Pepti 2?
It is perfectly normal that your baby’s stools change in colour and consistency when you start to use Aptamil Pepti 2. You may notice that they appear greenish in colour and looser in consistency. This is because the hydrolysed cows’ milk has been extensively broken down, making it easier for your baby to digest. This hydrolysed protein can make the stool colour to be greener in appearance. It is nothing to worry about. If you are concerned, talk to your healthcare professional.

What are prebiotic oligosaccharides?
Aptamil Pepti 2 contains a unique blend of GOS/FOS prebiotic oligosaccharides. Prebiotic oligosaccharides are special carbohydrates that are naturally present in breastmilk. They are not digested in your baby’s tummy and as a result, they move through the digestive tract to the gut where they help to feed your baby’s “good” bacteria.

Can Aptamil Pepti 2 be used in my baby’s weaning diet?
Yes, Aptamil Pepti 2 is perfectly suitable as a substitute to your baby’s usual milk and can be used to make up meals during weaning. It is also suitable for cooking and baking. However, Aptamil Pepti 2 is not a breastmilk substitute; it is a follow on milk suitable from 6 months and should be used in combination with a mixed diet.

How do I prepare Aptamil Pepti 2?
Please refer to the manufacturer’s instructions on the Aptamil Pepti 2 follow on formula tin. These instructions are in accordance with the latest national recommendations on the safe preparation of powdered formula for bottlefed babies. Before preparing your baby’s feed, ensure all utensils are thoroughly cleaned and sterilised and follow the preparation instructions on the tin carefully. Feeds should be prepared fresh when needed and used within 2 hours. For hygiene purposes, it is important to discard any unused formula that your baby does not consume within 2 hours.

Where can I buy Aptamil Pepti 2?
Aptamil Pepti 2 is a food for special medical purposes and must be used under medical supervision. It is a pharmacy only product. Talk to your healthcare professional for more information.

Do I need a prescription to buy Aptamil Pepti 2?
No, but the recommendation for the use of Aptamil Pepti 2 should come from your healthcare professional.

Is Aptamil Pepti 2 GMS approved?
Yes, Aptamil Pepti 2 is GMS approved and therefore available to those holding an Irish medical card, with a confirmed diagnosis of CMPA.

If you would like guidance on tasty easy recipes for parents of babies or toddlers with CMPA, the Aptamil team has developed a CMPA recipe book (See page 10 for details).
Long-term follow up of CMPA

Dietitian Guidance
Following a cows' milk protein free diet is a challenge and can be confusing, especially when you start to wean your baby onto solid food.

All babies and toddlers with CMPA should be referred to a Paediatric Dietitian who will provide practical guidance and ensure that your baby’s diet is free from cows’ milk protein and is balanced with all the essential vitamins and minerals required for growth and development.

Doctor
After CMPA has been diagnosed, it is important to ask your doctor or dietitian when your baby or toddler will be reassessed and challenged with cows’ milk to check if CMPA symptoms have resolved. (A food challenge is a test used to determine if your child has outgrown CMPA).

Tips for weaning your baby onto a milk free diet

Weaning your baby onto a milk free diet can seem like a daunting task. It is important to seek guidance from a dietitian to ensure your baby is achieving a balanced diet.

Your baby can continue to eat well with a CMPA. From the age of 12 months, you can follow the toddler food pyramid as a healthy eating guide. Always check food labels as milk can be referred to as any one of the following on food labels:

**Ingredients that can contain milk:**
- Lactoglobulin
- Casein or curd
- Milk solids
- Caseinates
- Non fat milk solids
- Hydrolysed casein
- Whey
- Butter fat
- Whey solids
- Butter oil
- Whey syrup
- Hydrolysed whey protein
- Hydrolysed whey sugar/solids

Both European and Irish law states that milk and their ingredients are allergens and if present in food, must be highlighted in the ingredient list of every product label.
Common foods and drinks that can contain milk

- Sweets
- Chocolate
- Pastries
- Biscuits
- Buns
- Crisps
- Batter
- Pizza bases
- Bread
- Potato products
- Ham and other processed meats
- Sausages
- Salami
- Soups

*Remember to always check the label.

Ensuring your baby has enough calcium

Aptamil Pepti 2 is enriched with calcium and vitamin D to support your baby’s healthy bones and teeth. It can be used in conjunction with a good weaning diet.

- Give a milk free substitute with added calcium. Your dietitian will advise you on the most suitable choice for your baby.
- Choose foods and drinks with added calcium. Ensure the added calcium is not from a milk source.

Milk-Free Alternatives (only suitable from 6 months onwards)

- Butter
- Soya and dairy free spreads
- Cheese
- Soya, rice and tofu cheeses
- Cows’ milk
- Extensively hydrolysed, follow on formula (ie. Aptamil Pepti 2) calcium enriched soya milk
- Cream
- Soya cream, coconut cream
- Cream Cheese
- Soya cream cheese
- Ice cream
- Soya ice cream
- Yoghurt
- Soya yoghurt

Useful resources

Call our Freephone Careline on 1800 22 12 34 to request a copy of our Aptamil Pepti easy recipes for CMPA book, containing over 40 delicious recipes suitable for CMPA.

The recipes have been compiled from a variety of sources including Irish Dietitians, Aptamil Nutritionists and from Tanya Wright, a Specialist Registered Dietitian.