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Could it be a food allergy? Identification and diagnosis in infants

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1. How early in an infant's life can cow's milk protein allergy (CMPA) present?

- A certain degree of gut maturity is required for sensitisation to allergens to occur.
- For this reason, CMPA is generally not a major problem in pre-term infants and is more likely in infants of term gestation.
- Symptoms do not generally occur within the first 3-4 weeks of life as the immune system has not yet become fully sensitised to allergens.
- It is often from 1-month of age onwards that symptoms of CMPA begin to present.
- This also depends on the allergen load as breastfed babies have a lower incidence of food allergy compared to those starting on formula early.

2. How can healthcare providers differentiate between CMPA and reflux, and is there a role for anti-reflux medication in infants with feeding difficulties?

- There is no conclusive way to differentiate; these two common conditions can co-exist in the same infant.
- In the case of infants of term gestation, where there are symptoms related to feeding symptoms (such as fussiness, refusal, long-feeding times or arching the back), in general CMPA is more likely to be the cause of these symptoms rather than reflux. The healthcare provider would need to consider all symptoms to provide a definitive diagnosis.
- If the infant has already been started on anti-reflux treatment (feed thickener and anti-reflux medication), it is reasonable to monitor them for 2 weeks for improvement.
 - If no improvement in symptoms, then the best course of action is to stop the reflux medication and start an elimination diet or hypoallergenic formula to see whether CMPA is the underlying factor.
- Signs of IgE-mediated reactions (symptoms within 2 hours after consuming dairy) or delayed non-IgE mediated reactions (often GI symptoms presenting 2-72 hours after consuming dairy) or other atopic conditions (e.g. eczema) in infants with feeding difficulties suggest an allergic cause and support a possible CMPA diagnosis.
- The preference is to start the infant on a extensively hydrolysed hypoallergenic formula as first-line treatment.
 - After 3-4 weeks, reassess and then consider adding anti-reflux treatment if appropriate and symptoms persist.

3. Once CMPA has been confirmed, how long should be left between unsuccessful milk challenges using the milk ladder?

- Baked milk-containing foods can be introduced gradually from the age of 10-12 months (see milk ladder)¹⁻³
- If symptoms reoccur at a particular step on the milk ladder:
 - If symptoms are not severe
 - Wait 6-8 weeks before reattempting that step on the ladder.
 - In the interim, move one step down the ladder and maintain intake of baked milk at whatever level was tolerated in the diet.^{1,3}
 - If symptoms are significant or severe
 - Refer to dietitian for reassessment.¹
 - A small minority of children may become resensitised by the process of reintroducing cow's milk and would benefit from reassessment.¹

This content solely reflects the views of the author with arrangements made in accordance with the BSNA Infant Nutrition Industry Code of Practice. Mead Johnson Pediatric Nutrition Institute has funded and supported the development of this series of meetings.

IMPORTANT NOTICE: Breastfeeding is the best nutrition for babies.

References

1. *The Milk Allergy in Primary Care (MAP) Guideline 2019.* Available at: <https://gpifn.org.uk/imap/> (accessed December 2020)
2. Leonard SA, et al. Baked Milk and Egg Diets for Milk and Egg Allergy Management. *Immunol Allergy Clin North Am.* 2016;36(1):147-59.
3. *The iMAP Milk Ladder.* Available at: https://www.allergyuk.org/assets/000/001/297/iMAP_Final_Ladder-May_2017_original.pdf?1502804928 (accessed December 2020)