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Applying health economics to cow's milk allergy

Answers provided by Matt Cressey (Founder, Optimed Healthcare) during the Q&A session of the webinar held on 23rd July 2020.

- 1. What is it that drives the health economic benefit to using LGG[®] in infants with cow's milk protein allergy (CMPA)?
- Patients achieve better tolerance and therefore have fewer allergic manifestations (including not only food allergy symptoms but also eczema, asthma and allergic rhinitis).
- This better control of their allergic condition leads to a reduction in healthcare resource use (e.g. fewer appointments with healthcare professionals).
- There may be an associated reduction to societal costs in terms of not having time off school, or parents taking time off work to care for their child.
- 2. How can healthcare professionals balance the demonstrated efficacy of extensively hydrolysed formula (EHF) containing a probiotic, against the increased monetary cost of this formula?
- It is important to consider the cost-effectiveness of treatment in the longer term as well as the short term.
- The immediate cost of formula (cost per tin) must be balanced against the long-term costs of treating CMPA and its complications.
- Prescribing an EHF containing a probiotic is more expensive per tin than prescribing an EHF formula without a probiotic; however, the cost to gain one successful outcome in an infant with CMPA is lower with the EHF + probiotic.
- It is important to use an EHF containing a probiotic that has been clinically proven to be beneficial, such as LGG[®].

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.