

IDENTIFYING COW'S MILK ALLERGY (CMA)


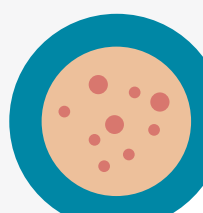


Cow's Milk Allergy is an allergic reaction to the **protein in cow's milk**, which can affect both formula-fed and breast-fed infants. CMA is the most common food allergy in infants and young children, affecting **2–5% of infants**¹⁻⁵.

Around half of CMA cases seen in the UK may present with delayed reactions⁶, frequently with gastrointestinal symptoms, making it challenging to diagnose¹.

Recognising common symptoms and following relevant CMA guidelines^{1,3,4}, can support a timely diagnosis and appropriate management.

Example CMA Symptoms

Consider **CMA** in infants who exhibit **2 or more persistent and/or severe symptoms** from the list below^{1,3,4}.

 <h3>GASTROINTESTINAL</h3> <ul style="list-style-type: none"> • diarrhoea • constipation • blood in stools • vomiting • reflux disease/GORD • abdominal pain 	 <h3>DERMATOLOGICAL</h3> <ul style="list-style-type: none"> • moderate persistent eczema • urticaria • rashes • severe atopic eczema • angioedema
 <h3>RESPIRATORY</h3> <ul style="list-style-type: none"> • wheezing • chronic coughing • acute rhinitis • respiratory distress 	 <h3>OTHER SYMPTOMS</h3> <ul style="list-style-type: none"> • unsettled • feed refusal • taking a long time to feed • inconsolable crying • anaphylaxis • faltering growth

Care should be taken in interpreting non-specific symptoms to avoid over-diagnosis of CMA.

CMA is difficult to diagnose because symptoms can easily be mistaken for other common conditions in infants.



4 MONTHS

Average time to diagnose after initial presentation to HCP⁷



18 VISITS

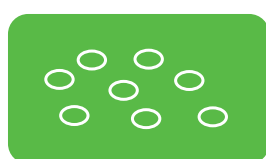
Average number of healthcare visits per patient to reach a diagnosis of CMA⁷

Earlier diagnosis is a factor indicating a good prognosis and may lead to a shorter duration of nutritional management⁸.

MANAGING CMA

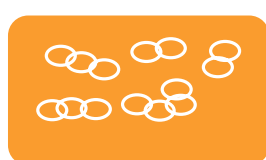
Breast milk is the best feeding option for all infants, including those with CMA. Support to continue breastfeeding and follow a cow's milk exclusion diet should be provided to mothers of symptomatic breastfed infants^{1,3,4}.

In non-breastfed infants, or those requiring a top-up formula, CMA may be managed with a hypoallergenic formula^{1,3,4}. Hypoallergenic formulas include extensively Hydrolysed Formula (eHF) and Amino Acid-based Formula (AAF).



AMINO ACID-BASED FORMULA (AAF)

No interaction with the immune system, based on 100% free amino acids.



EXTENSIVELY HYDROLYSED FORMULA (EHF)

May have some interaction with the immune system, based on extensively hydrolysed cow's milk proteins.



WHOLE PROTEIN / STANDARD INFANT FORMULA

Not suitable for CMA, based on intact cow's milk protein which interacts with the immune system.

IMPORTANT NOTICE: Breastfeeding is best. Foods for special medical purposes should only be used under medical supervision. May be suitable for use as the sole source of nutrition for infants from birth, and/or as part of a balanced diet from 6 months onwards. Refer to label for details.

1. Luyt *et al.* Clin Experimental Allergy. 2014;44:642–72.
2. Meyer *et al.* Pediatr Allergy Immunol. 2018;29:689–704.
3. Fox *et al.* Clin Transl Allergy (2019);9:40.
4. Koletzko *et al.* JPGN. 2012;2:221–229.

5. Grimshaw *et al.* Clin Transl Allergy. 2016;6:1.
6. Schoemaker *et al.* Allergy. 2015;70:963–72.
7. Sladkevicius *et al.* J Medical Economics. 2010;13(1):119–28.
8. De Boissieu *et al.* J Pediatr. 2002; 141(2):271–3.