

# Alfamino®

## CASE STUDY\*

**Elliot**

**DOB: April 2018**

**Birth weight: 3.35kg**

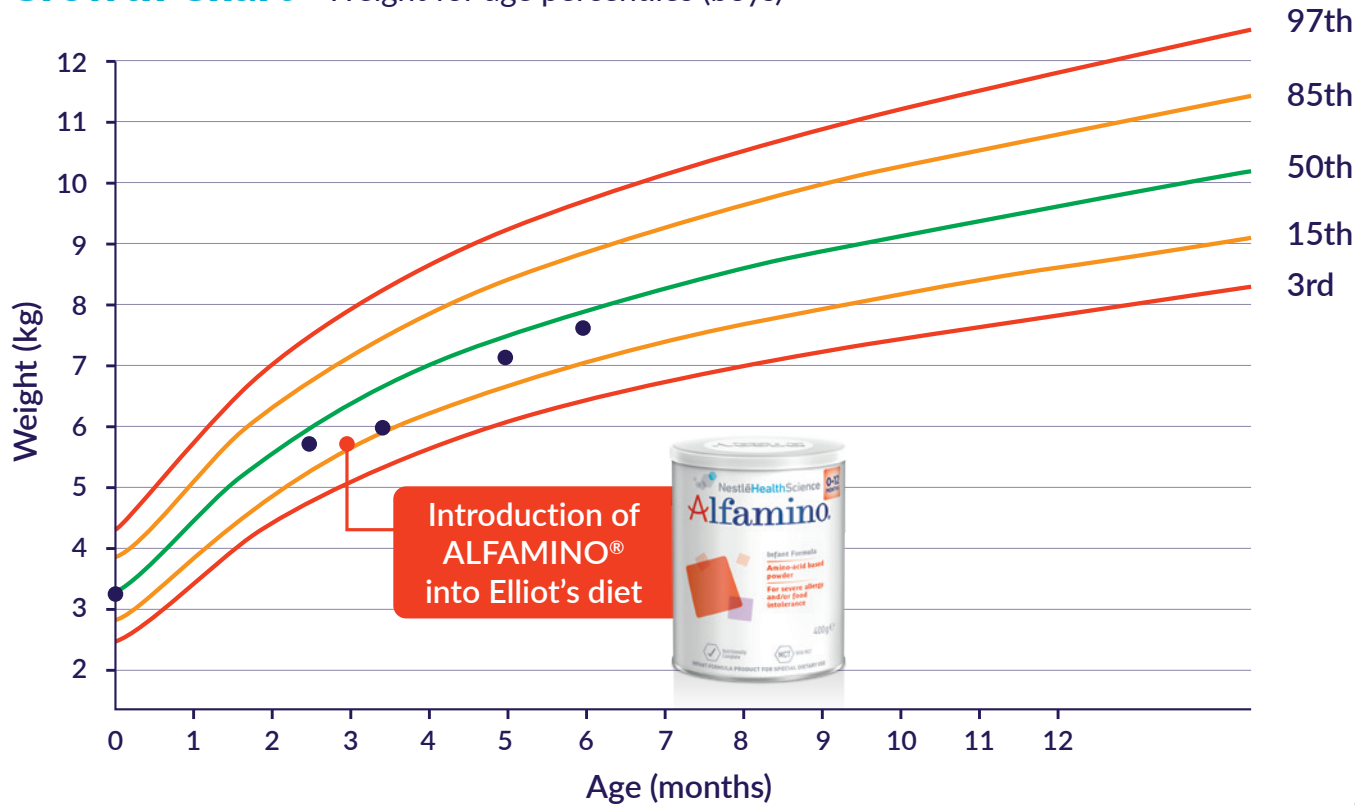
**He is irritable, experiencing poor weight gain and difficulty feeding at the breast and the bottle.  
He chokes and gags when laid supine.**

Elliot was 2.5 months old when his parents sought paediatric dietetic advice regarding the best formula to use, after several failed trials for complementary feeding. Both Elliot's mother and father have a strong family history of atopy.



# Elliot's Journey

## Growth Chart Weight-for-age percentiles (boys)



0 month

### Symptoms

- Poor latch to the breast
- Gastro-Oesophageal Reflux Disease
- Constipation
- Persistent crying
- Growth faltering

### Pre-diagnosis Management and Treatment

- Cow's milk protein-free diet for breastfeeding mother.
- Anti-reflux medication (proton pump inhibitor).
- Trial of several formulas: rice and soy formula, extensively hydrolysed.

- Parent initiated unsuccessful trial of a **rice-based formula**.
- Inadequate volumes taken.
- Parent initiated unsuccessful trial of **soy formula**.
- Instant **eczematous skin reaction** and **increased frequency and volume of vomits** after feeding.
- Pharmacist initiated unsuccessful trial of **over-the-counter eHF**.
- Improvement in irritability but inadequate volumes taken.
- Paediatrician diagnosed **GORD** (prescribed - PPI) and **suspected CMPA** (prescribed eHF - ALFARÉ®).
- Medication seemed to decrease the duration of screaming.
- eHF improved constipation.
- New symptoms presented of loose, green, mucous stools and mild, atopic eczema.

2.5 months

### Consultation and Diagnosis

- Non-IgE mediated cow's milk allergy.
- ALFAMINO® (scripted by allergist).

2.5 months old – 5.7kg

- The persistent crying, feeding difficulties, immediate and delayed GI symptoms suggest a food allergy.
- Referral made to paediatric allergist.
- Diagnosis of Non-IgE cow's milk protein allergy based on multiple negative skin prick testing.
- ALFAMINO® (AAF) was prescribed with consideration of failed trials of rice, soy and eHF formulas.
- Ongoing **dietetic support** was recommended for **nutritional management of the maternal diet, growth faltering** and **complementary feeding advice** as per **ASCA** guidelines.

6 months

### Post-diagnosis Management

- Cow's milk plus soy protein-free diet for breastfeeding mother (guided by symptom response).
- Introduction of solids.



3 months old – 5.69kg

- Increased fussing and crying with all feeds (expressed breast milk (EBM) or ALFAMINO®).
- Projectile vomited most recent bottle, with his mother becoming increasingly concerned.
- Feeds that contained 50% EBM and 50% full strength ALFAMINO® was recommended due to:
  - Concerns around mother's milk supply decreasing;
  - The frozen EBM that was being used may be contaminated with soy;
  - Mum needed more time to express a greater volume of uncontaminated EBM;
- Elliot was not accepting more than 50mL of ALFAMINO® bottle.
- It was then recommended that the ratio of ALFAMINO® increase by 20mL every 3 days until each bottle contained 100% ALFAMINO®.
- Nutritious soy and cow's milk-free meals were designed with Elliot's mother to ensure that her EBM was allergen free.

3.5 months old – 6.02kg

- Gastroenterologist recommended PPI medication to be weaned to assess efficacy of AAF and maternal elimination diet.
- Lactation consultant provided support to re-engage breastfeeding unsuccessfully.
- After unsuccessful attempt to resume breastfeeding the dietitian recommended to persist with ALFAMINO®, as the preferred complement to breast milk, i.e. **structured lipid profile** similar to the most abundant fatty acid in breast milk, with ongoing review and support from dietitian.

5 months old – 7.13kg

- Accepting bottle of EBM and ALFAMINO®.
- Regular soft formed stools without mucous and normal colour.
- Weaned off PPI medication.
- Enjoying 3 meals per day of custard made with ALFAMINO®.
- Well moisturised and soft skin.
- Continues with mixed feeding of ALFAMINO® and EBM.
- To start food trials with bland foods such as potato, homemade baby rice cereal and pear.

6 months old – 7.6kg

- At 6 months of age Elliot had gained additional weight (7.60kg) and was now tracking the 38th percentile weight for age. He was predominantly accepting ALFAMINO® as his mother had started to decrease her expressing schedule, feeling comfortable to wean as Elliot now had formula he tolerated and drank in adequate volume.
- Elliot had not experienced any gastrointestinal problems, was accepting approximately two new foods per week and continued to reach all expected developmental milestones.

**ALFAMINO® also has a palatable taste profile which may increase acceptance and tolerance.**



- 100% free amino acid
- Neutral taste
- Contains specially designed Structured Lipids
- MCT 25% of total fat



### ALFAMINO®

**An amino acid based formula specifically formulated for the dietary management of formula-fed infants with severe allergy and/or food intolerance.**

- PBS listed for CMP enteropathy (up to the age of 24 months), cow's milk anaphylaxis (up to the age of 24 months), eosinophilic oesophagitis (EoE) ( $\leq 18$  years of age) and severe intestinal malabsorption.

#### ORDERING INFORMATION

Units/Case	6 x 400g
Product Code	12265868
PBS Code	2900P 2928D



### ALFAMINO® JUNIOR

**A hypoallergenic amino acid based formula specifically formulated for the dietary management of children (above 1 year of age) with multiple food allergies and malabsorptive conditions.**

- PBS listed for CMP enteropathy (up to the age of 24 months), cow's milk anaphylaxis (up to the age of 24 months), eosinophilic oesophagitis (EoE) ( $\leq 18$  years of age) and severe intestinal malabsorption.

#### ORDERING INFORMATION

Units/Case	6 x 400g
Product Code	12285239
PBS Code	10522T 10527C

\*Elliot's case study has been used with the kind permission of Elliot's parents.

Case study written and approved by Allergy Dietitian, Emma Blank.

**IMPORTANT NOTICE:** Breast milk is best for babies and provides ideal nutrition. Good maternal nutrition is important for the preparation and maintenance of breastfeeding. Introducing partial bottle feeding could negatively affect breastfeeding and reversing a decision not to breastfeed is difficult. Professional advice should be followed on infant feeding. Infant formula should be prepared and used exactly as directed or it could pose a health hazard. The preparation requirements and weekly cost of providing infant formula until 12 months of age should be considered before making a decision to formula feed.

Mothers should be encouraged to continue breastfeeding even when their infants have cow's milk protein allergy. If a decision to use an infant formula for special dietary use is taken, it must be used under medical supervision.

ALFAMINO® and ALFARÉ® are infant formula products for special dietary use and must be used under medical supervision. They are not suitable for general use.

ALFAMINO® Junior is a food for special medical purposes specifically formulated for the dietary management of children with multiple food allergies (including cow's milk allergy) and malabsorptive conditions. Must be used under medical supervision.

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