**Specialist Infant Formulae – Formulary**

**This formulary covers five specific conditions:**

**Cow’s Milk Protein Allergy (CMA)**

**Gastro-Oesophageal Reflux Disease (GORD)**

**Secondary Lactose Intolerance**

**Faltering Growth**

**Pre-Term Infants**

*This Formulary, whilst complete for the above five conditions, is not complete with regard to all specialist infant formulae - the very specialist feeds that may be required for other more complex medical conditions are not included here.*

**Quantities of formulae to prescribe**

The information below is intended as a general guide to cater for most infants/children. If overfeeding is suspected, refer to the family Health Visitor for a feeding assessment. *If the paediatrician/paediatric consultant/dietitian has requested different quantities, please follow their recommendation rather than the quantities stated below. The rationale will be included within their feed request.*

For **powdered** **formula**:

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| **Age of child** | **Initial Trial**  **(Acute Prescription)** | **No tins required per month** |
| Up to 3 months | 8 x 400-450g tins  **Or** 4 x 800-900g tins | 8-10 x 400-450g tins  **Or** 4-5x 800-900g tins |
| 3-6 months | 10 x 400-450g tins  **Or** 5 x 800-900g tins | 10-12 x 400-450g tins  **Or** 5-6 x 800-900g tins |
| 6-9 months | 10 x 400-450g tins  **Or** 5 x 800-900g tins | 10 x 400-450g tins  **Or** 5x 800-900g tins |
| 9-12 months | 7 x 400-450g tins  **Or** 3 x 800-900g tins | 7 x 400-450g tins  **Or** 3-4 x 800-900g tins |
| 1-2 years | 7 x 400-450g tins  **Or** 3 x 800-900g tins | 7 x 400-450g tins  **Or** 3-4 x 800-900g tins |

For **liquid formula** *(specialist advice needed from secondary/tertiary care):*

* Liquid formula preparations consist of either *high energy formulae* or *pre-term infant formulae*.
* For any liquid formula preparations, please follow the recommendations made by the dietitian/paediatrician/consultant.
* These should *not* be initiated in primary care in the absence of specific guidance from secondary/tertiary care particular to the patient. Please contact the dietitian in the first instance in the absence of such guidance.

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| **Condition** | **Product** | **Product type** | **Age Range** | **Comments** |
| **Mild/Moderate Cow’s Milk Protein Allergy (CMA)**  ***IgE and Non-IgE mediated*** | **Similac Alimentum** 400g(Abbott) | Extensively Hydrolysed Formula (EHF) | Birth to 6 mths | *At age 6 months essential to switch to Nutramigen 2 with LGG* |
| **Nutramigen 2 with LGG** 400g (Mead Johnson) | Extensively Hydrolysed Formula (EHF) | 6 mths to 2 yrs |  |
| **SMA Althera (A2\*\*)** 450g (Nestle)  *(contains lactose)* | Extensively Hydrolysed Formula (EHF) | Birth to 2 yrs | 2nd Line if child won’t tolerate taste of 1st line product after 2-4 weeks trial |
| **Pregestimil Lipil (A1\*)** 400g  (Mead Johnson) | Extensively Hydrolysed Formula (EHF) | Birth to 2 yrs | ***To be started in secondary care/on advice of paediatric dietitian only***  CMA accompanied by malabsorption |
| **Aptamil Pepti-Junior (A1\*)** 450g (contains residual lactose) | Extensively Hydrolysed Formula (EHF) | Birth to 2 yrs |
| **Severe Cow’s Milk Protein Allergy (CMA)**  ***IgE and Non-IgE mediated*** | **Nutramigen Puramino (A2\*\*)** 400g (Mead Johnson) ***or***  **Neocate LCP (A2\*\*)** 400g(Nutricia) | Amino Acid Formulae (AAF) | Birth to 2 yrs | *Can be initiated in primary care for severe CMA but* ***immediate referral needed to secondary care*** |
| **Neocate Active** **(A1\*)** 15x63g (Nutricia) | Amino Acid Formula (AAF) | Over 1 yr | *Highly specialist products and should* ***only be used/initiated by secondary /tertiary care*** |
| **Neocate Advance (A1\*)** 10x100g/15x50g (Nutricia) | Amino Acid Formula (AAF) | Over 1 yr |
| **Neocate Spoon (A3\*\*\*)** 15x37g (Nutricia) | Amino Acid Formula (AAF) | Over 1 yr |
| **Gastro Oesophageal Reflux Disease (GORD)** | **Cow & Gate** **Anti-Reflux\*\*\*** 900g (C&G) ***or***  **Aptamil Anti-Reflux\*\*\*** 900g (Milupa) | Over the Counter Thickened Formulae | Birth to 1 yr | **These formulae must be purchased over the counter** – prior to considering prescribing below |
| **Enfamil AR (A2\*\*)** 400g (Mead Johnson) (contains rice starch) | Thickening Formula | Birth to 1 yr | Next step if OTC products do not improve symptoms |
| **Do *not* prescribe alginate therapy or omeprazole with above – refer to NICE Guideline – above should be trialled first before below:** | | | |
| **Gaviscon Infant Sachets** (Alginate Therapy): *STOP thickening formulae & return to standard formula*.  Each half of dual sachet = 1 dose (to avoid errors, prescribe with directions in terms of “dose”)  Alginate therapy (due to sodium content) should not be given more than 6 times in 24 hours, or where the infant has diarrhoea or a fever. | | | |
| **Secondary Lactose Intolerance**  *If previously tolerated cow’s milk, recommend purchase lactose free cow’s milk from age 1 year onwards* | **SMA LF\*\*\*** 430g (SMA) ***or***  **Enfamil O-Lac\*\*\*** 400g  (Mead Johnson) | 1st Line – Lactose Free Formulae | Birth to 2 yrs | **These formulae must be purchased over the counter – do not prescribe** |
| **SMA Wysoy\*\*\*** 430g/860g (SMA) | 2nd Line - Soya Formula – do not routinely use  Do not use at all for infants under 6 months | | **This formula must be purchased over the counter – do not prescribe** |
| **Faltering Growth** | **SMA High Energy** **(A1\*)** 250 ml (SMA) | High Energy Formula | ***Highly specialist products only*****to be started in secondary care/ on advice of paediatric dietitian** | |
| **Similac High Energy** **(A1\*)** 60/200ml (Abbott) | High Energy Formula |
| **Infatrini Peptisorb (A1\*)** 200ml (Nutricia) | High Energy EHF |
| **Pre-Term Infants** | **Nutriprem 2 Powder** **(A1\*)**900g (C&G) | Powder Pre-Term Infant Formula | Birth to maximum  *6 months corrected age* | **To be started in secondary care/ on advice of paediatric dietitian**  *After a month post discharge liquid pre-term formulae should not be routinely prescribed* |
| **SMA Gold Prem 2 Powder (A1\*)** 400g | Powder Pre-Term Infant Formula |
| **Nutriprem 2 Liquid (A1\*)** 200ml(C&G) | Liquid Pre-Term Infant Formula |
| **SMA Gold Prem 2 Liquid (A1\*)**  250ml | Liquid Pre-Term Infant Formula |

**A1\* - Amber 1 = specialist recommendation followed by GP initiation and continuation;**

**Please refer to the full guidance “*Appropriate Prescribing of Specialist Infant Formulae: A Guide for Healthcare Professionals in Primary Care*” for full guidance and supporting information.**

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**Approved by MKPAG May 2016; Last Reviewed: Sept 2018**

**A2\*\* - Amber 2 = specialist or GP initiation in line with local guidance after 1st line failure followed by GP continuation;**

**A3\*\*\* - Amber 3 = specialist initiation and stabilisation followed by GP continuation;**

**Red \*\*\* = Double Red = no prescribing in primary care.**