Soya based Formulas

- These formulas are based on the individual building blocks (amino acids) that make up a protein and are highly unlikely to cause an allergic reaction.

Hydrolysed Formulas

- These formulas contain proteins that have been broken down (hydrolysed) into smaller segments that are less likely to cause an allergic reaction.

- They can be based on whey (a protein in cows’ milk) e.g. PEPTI - Aptamil (this formula contains lactose) or casein (a protein in cows’ milk) e.g. NUTRAMIGEN 1 and 2 (suitable over 6 months old) - Mead Johnson.

- Non-milk based extensively hydrolysed formulas are also available although they are not very palatable and may not be suitable for certain religions, cultures or vegetarians as they are based on meat derivatives e.g. PEPTIDE - SHS.

Amino Acid Formula

(NECOCATE LCP – SHS Nutricia, NUTRAMIGEN AA - Mead Johnson)

- These formulas are based on the individual building blocks (amino acids) that make up a protein and are highly unlikely to cause an allergic reaction.

Soya based Formulas

(INFASOY - Cow & Gate, NURTURE SOYA - Heinz, ISOMIL - Abbott, PROSOBEE LIPIL – Mead Johnson, SMA WYSOY - SMA Nutrition)

- Infant formulas based on soya milk are not recommended as a first line alternative, especially in infants under 6 months old.

- It is known that those infants allergic to cows’ milk protein are at an increased risk of also being allergic to soya protein. There is also ongoing research into the safety of infants taking large quantities of soya protein due to the unclear effects of certain chemicals (phyto-oestrogens) in soya products on hormone balance and the risks of developing other food allergies. Soya formulas should only be used in children under 6 months if all other alternatives have proved unsuccessful or if the family want a formula suitable for vegans after discussion with a Registered Dietitian.

- Other mammalian milks (goats’ milk formula, sheep’s milk etc) are not suitable because children who are unable to tolerate cows’ milk are at high risk of reacting to other mammalian milks.

- Ready-made soya, pea and oat milks should not be given as a main drink until children are 2 years old. This is because these milks are not an adequate main source of nutrition for young children. However, under special circumstances a Registered Dietitian may recommend these milks to children over 1 year of age if other milks have been refused.

Children over 2 years old

- Ready-made soya, pea and oat or other milks may be used as a main drink.

- Rice milk is not suggested for use below 4½ years of age.

- Try to use a brand that is fortified with calcium. If the product is not fortified with calcium, or your child will only take a small amount of the fortified milk, it is likely that they may need a calcium supplement. Please discuss this with a Registered Dietitian.

- You may also find it helpful to request a review from a Registered Dietitian so that they can check that your child is enjoying a balanced diet as they may benefit from additional vitamin and mineral supplements.

Top tips

- Many milk substitutes have a very different taste and smell compared to breast milk or cows’ milk. Some children can take time to get used to this when they are first started on a new product. A Registered Dietitian will be able to give you advice about how to encourage your child to take these milk substitutes.

- If you are unable to get your child to take any of the above milk substitutes it is important to seek advice from a Registered Dietitian as it may be necessary to start a vitamin or mineral supplement.

Lactose intolerance

- Lactose intolerance is an intolerance to the sugar in cows’ milk.

- There are a number of lactose free formulas that are available to buy over the counter or on prescription. (ENFAMIL O-LAC – Mead Johnson, SMA LF – SMA Nutrition). It is also possible to buy ready-made low lactose milks that are suitable for use in children over 1 year old.

- These formulas are based on whole cows’ milk protein and are not suitable for children with cows’ milk protein allergy or intolerance.

This fact sheet is intended as a basic guide to the cows’ milk substitutes that are available.

If you require any further information please ask to be referred to a Registered Dietitian by your child’s GP or Health Visitor.

Breast-feeding is best for babies and provides many benefits. It is important that, in preparation for and during breast-feeding, you eat a healthy, balanced diet. Combined breast and bottle feeding in the first weeks of life may reduce the supply of your own breastmilk, and reversing the decision not to breast-feed is difficult. The social and financial implications of using an infant milk should be considered. Improper use of an infant milk or inappropriate food or feeding methods may present a health hazard. If you use an infant milk, you should follow manufacturer’s instructions for use carefully - failure to follow the instructions may make your baby ill. Always consult your Doctor, Midwife or Health Visitor for advice about feeding your baby.