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Dietary Approaches to Prevent or Delay Allergy for Infants at Risk

These recommendations are intended for those infants “at risk” of allergy and not for infants with a diagnosed allergic disease such as eczema, asthma or food allergies. “At risk” infants have a parent or sibling with a diagnosed allergic disease.

Approaches that are generally effective:

- Exclusive breast feeding for the first 4-6 months of life;
- If not breast feeding, or if supplementing, use an extensively hydrolyzed casein formula, instead of cow’s milk or soy formula for the first 4-6 months (partially hydrolyzed whey formula may be effective as well)
- Delay solids until 4-6 months of age.

Approaches that have been tried but remain unproven:

- Dietary allergen restriction (e.g., peanut) during pregnancy
- Dietary allergen restriction during lactation (e.g., egg, milk, peanut, nuts, seafood, etc), with the possible exception of reduction of eczema
- Avoidance of allergenic foods for prolonged periods (e.g., waiting until after age 1 year or longer for milk, egg or peanut)

When solid foods are introduced, add one new, single ingredient food at a time for a period of 3-5 days to watch for any problems.

See your doctor if you notice any of the following symptoms in your child that may indicate a food allergy:

- Chronic symptoms such as rashes (atopic dermatitis, eczema) or gut symptoms (pain, vomiting, diarrhea, poor growth)
- Symptoms occurring minutes to 1-2 hours after a food is eaten such as hives or swelling of the lip, mouth or tongue; vomiting or diarrhea; wheezing, repetitive coughing or trouble breathing.

Reference: Effects of Early Nutritional Interventions on the Development of Atopic Disease in Infants and Children: The Role of Maternal Dietary Restriction, Breastfeeding, Timing of Introduction of Complementary Foods and Hydrolyzed Formulas. Pediatrics Vol. 121 No. 1 January 2008, pp.183-191.

RESOURCES

- This program has additional information sheets that you may find helpful
- Explore additional educational materials, for example from Food Allergy Research & Education (www.foodallergy.org).
- An example of a written emergency treatment plan is available at www.foodallergy.org