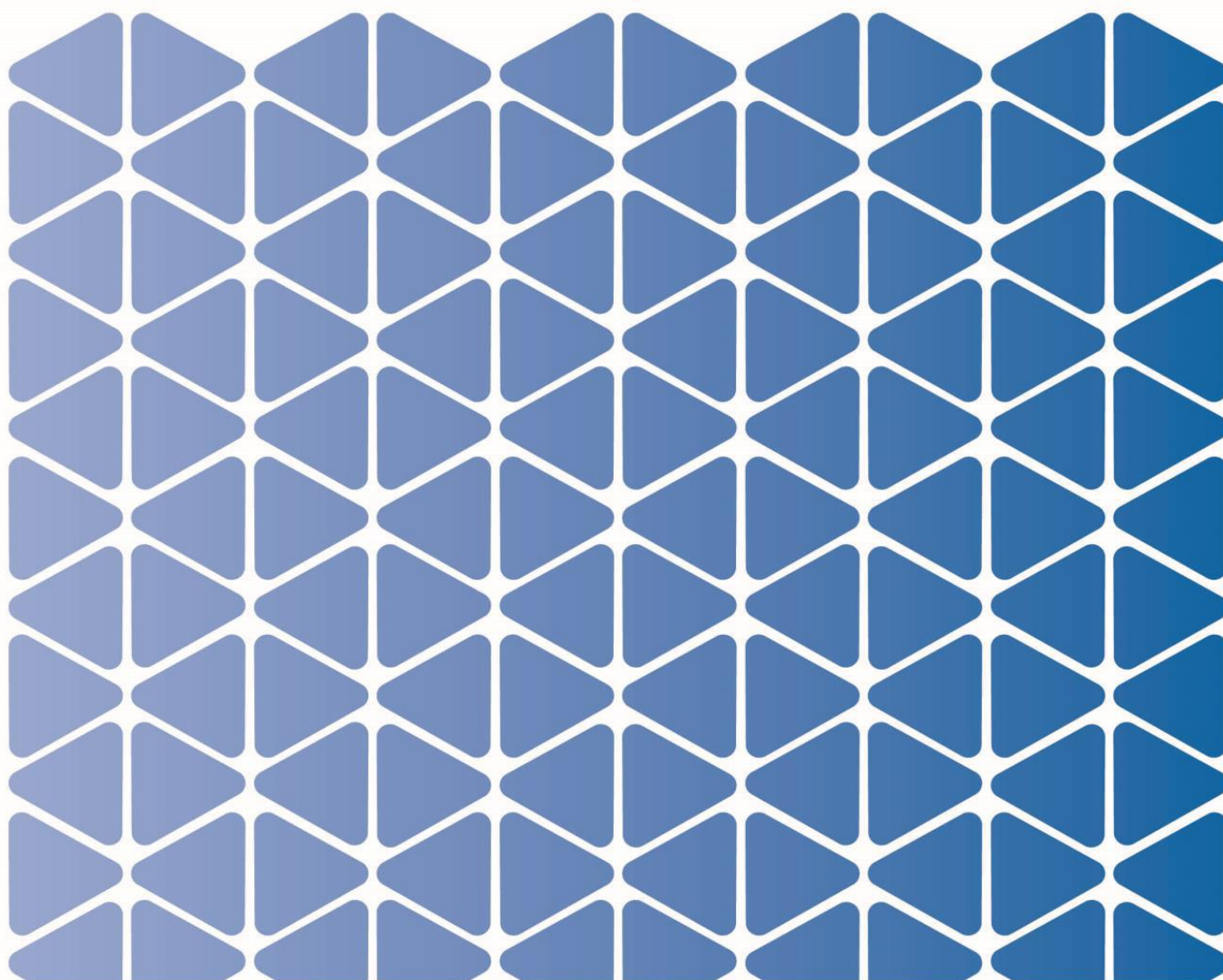




PATIENT INFORMATION

Home Introduction of Cow's Milk



This leaflet will be given following discussion with your allergy team and is NOT suitable for sharing with other families.

Given to

.....
By.....as discussed on.....

Background

Most children will grow out of their cow's milk allergy. The following plan explains how to start introducing small amounts of cow's milk into your child's diet in a safe way, at home.

The first stage is to give small amounts of milk protein in a biscuit. This is because cow's milk protein is less likely to cause an allergic reaction when mixed with flour and cooked at high temperatures.

Being able to tolerate foods with milk as an ingredient not only makes dietary choices less restrictive, but also helps to speed up the body's ability to tolerate larger amounts of lightly cooked milk and fresh milk.

Some children remain severely allergic to milk and need to continue a strict milk free diet or have a supervised challenge in hospital. However, if your doctor, allergy dietitian or nurse, has assessed your child to be ready to introduce small amounts of milk at home, you should follow the plan below.

In this leaflet, the following terms are used:

'Milk' refers to all mammalian milk except human milk.

'Baked Milk' refers to milk that has been added to a food and cooked in the oven at a high temperature for >12minutes.

‘Tolerated’ means that your child has eaten the food and not shown any symptoms of an immediate allergic reaction.

Before starting make sure:

- ✓ You have some antihistamine available, and you know the dose recommended for your child.
- ✓ You have read and understood your Allergy Action Plan which outlines how to recognise and manage an allergic reaction.
- ✓ Ensure your child is well (i.e. does not have a cold or fever) before starting **each new step** and you are able to give them your full attention.
- ✓ If your child has other allergies (e.g. wheat or egg) please continue to check ingredients on packaging.
- ✓ You can stay at each stage for longer than stated if you want, but please do not move up to the next stage more quickly than advised.
- ✓ If you have needed to give antihistamines then please wait 3-5 days before starting this process.

Stage 1

This stage involves giving manufactured or highly processed foods containing milk, cooked at high temperatures, also known as ‘Baked Milk’.

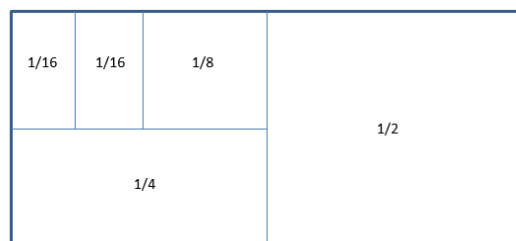
Week 1:

- Small crumb of biscuit containing whole milk e.g. malted milk biscuit to be eaten every day for 1 week.

Week 2:

- Large crumb to be eaten (2 days)
- 1/16 biscuit to be eaten (2 days)
- 1/8 biscuit to be eaten (3 days)

Measuring a biscuit



Week 3:

- 1/4 biscuit to be eaten daily for 1 week

Week 4:

- 1/2 biscuit to be eaten daily for 1 week

Week 5:

- 1 whole biscuit to be eaten daily for 2 weeks

Notes:

- You may stay at each stage for longer, but do not increase to the next stage quicker unless you have been told to do so.
- Try to give the dose every day. If you miss several days (e.g. your child is unwell) give a smaller dose when you restart.
- Do not increase to higher dose if your child is unwell.
- For immediate allergic reactions (within 30 minutes), follow the Allergy Action Plan given to you by your allergy team (e.g. giving a dose of antihistamine). Wait a few days until your child has fully recovered and then reintroduce the previous dose that they tolerated with no reaction.
- If your child begins to show delayed symptoms (e.g. a rash, eczema flare, tummy ache, vomiting, diarrhoea/loose stool, loss of appetite, throat tingle) reduce the dose to a lower level that is tolerated and contact the allergy team.

Stage 2

Once your child is tolerating a whole biscuit, eaten daily for 2-3 weeks, we will advise you when you can begin to offer other foods that contain milk that is mixed with flour and cooked at high temperatures (e.g. cakes, other biscuits, scotch pancakes, croissants), and also products that contain small quantities of less well-cooked milk (e.g. flavourings on crisps). There are more ideas given on the 'milk introduction' examples list.

Notes:

- ✓ For each new food tried, give a small amount first, e.g. 1/8 of a small portion and then slowly increase over a 2-3 weeks until an age appropriate portion is tolerated.
- ✓ Once tolerated, ensure your child eats at least one food containing baked milk every day.
- ✓ If a particular food causes symptoms, leave it out or try a smaller quantity (but retry in two months).

- ✓ If allergic symptoms are frequent with stage 2, return to stage 1 (1 biscuit per day) for longer.
- ✓ **Do not** increase the volume of milk if the child is unwell or you are concerned they are showing allergic symptoms.

Stage 3

Only begin to try foods from this stage if your child is regularly eating foods freely from stage 1 and 2 without symptoms, and your allergy team has told you to do so. These foods contain considerably more milk protein and this can vary between the different products and cooking times.

Notes:

- ✓ Give small amounts initially e.g. 1 lick of yoghurt or 1 strand of cooked cheese, and build up on the quantity, slowly.
- ✓ Each food is different so do not assume if you are eating one product, all will be tolerated. Start each new food in small quantities first, then building up to a portion size.
- ✓ If symptoms occur on small amounts of these products, stay on stage 2 for another 2 to 3 months.
- ✓ It is much better to have a daily 'dose' of a milk containing food and build up the quantity every week rather than give it only once or twice per week in larger quantities.
- ✓ Always make sure your child is well on the day of introducing a new type or quantity of milk.

Stage 4

These foods should only be tried if your child is regularly eating foods from stage 3 daily and following advice from your hospital allergy team.

- ✓ Start with small doses e.g. teaspoon ice cream, small piece of cheese.
- ✓ If trying fresh cow's milk, start by trying 1 teaspoon and increase every couple of days.
- ✓ If your child dislikes the taste of milk, try it in hot chocolate, milkshake or mixed with the child's usual milk substitute (cold or warm).

- ✓ If symptoms occur, refer to your 'allergy action plan' and continue to only allow foods from stage 3, but retry in 2 to 3 months until full tolerance is achieved.
- ✓ Contact the allergy team to discuss, if you wish.

Summary of milk introduction

Stage 1	Stage 2	Stage 3	Stage 4
Small crumb of biscuit containing whole milk as an ingredient, not only whey powder. Build up over 5 weeks as tolerated. If buying shop bought biscuits avoid chocolate and cream filled ones and check the biscuit contains less than 1g protein per biscuit.	Other baked products that contain milk as an ingredient e.g. muffins or small traces of less cooked milk e.g. butter/margarine, flavourings that contain milk e.g. crisps.	Products that contain milk or cheese as a heated ingredient. Introduce in <u>trace</u> amounts first as these foods contain a much higher amount of milk protein (e.g. cheese or are less cooked (e.g. chocolate).	Full tolerance to milk is achieved once foods in this section are taken in standard amounts. Try small quantities initially. If all products are tolerated <u>except</u> fresh cold milk, continue with the milk substitute and retry every 2 to 3 months.

Examples of foods to try (home milk introduction)

Stage 1	Stage 2	Stage 3	Stage 4
Biscuits that list milk as an ingredient, Examples include; Malted milk, (for younger children). For homemade biscuit recipes, add up to 4 teaspoons milk per biscuit (see below) 1 tbsp flour 1 tsp coco powder (<i>optional</i>) 1 ½ tsp sugar 1 tsp margarine (dairy free) 3 – 4 tsp milk Oven bake at 200°C for 12 minutes	Other biscuits, cakes and bread that contain milk as an ingredient. Please continue to check ingredients lists Sweet waffles Muffins Fruit teacakes Malt loaf Scones Scotch pancakes Flapjacks Trifle sponges Ice cream wafers Brownies Sponge and pastry Flan cases French fancies Lemon cupcakes Shortbread Shortcake Shortie biscuits Butter crunch biscuits Jaffa cakes Bread products: croissant, breads, brioche Shop bought frozen Yorkshire Puddings Crisps and snacks that contain milk or cheese powder as a flavouring	Products that contain cheese or cow's milk as a heated ingredient. Examples include; Custard, custard tart Pizza with cheese Cheese or white sauce Soup made with milk (Cream soups) Rice pudding Dishes that contain heated milk e.g. mash potato topping (cottage/shepherds/fish pie). Lasagne or other oven baked pasta dish Homemade batters e.g. pancakes, Yorkshire pudding Chocolate and chocolate covered items e.g. chocolate biscuit Chocolate as in ingredient e.g. choc chip Fermented desserts e.g. Yoghurt, Fromage Frais	Uncooked cheese Uncooked non-yoghurt desserts e.g. cheesecake, mousse, ice cream, cream cakes Fresh cow's milk, milk shakes.

Contact details for the Allergy Team

In the first instance, please use the contact numbers for the secretaries at the top of your clinic letter

Or

please contact the allergy team on:

Tel: 07564 848463

Email: wah-tr.paediatricallergy@nhs.net

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.