

Allergy and Immunology



COWS MILK ALLERGY

Cows milk is one of the most common causes of food allergic reactions in children. Fortunately most children will outgrow their cows milk allergy.

HOW CAN YOU TELL WHEN MY CHILD HAS OUTGROWN THEIR COWS MILK ALLERGY?

The doctors will determine whether your child has grown out of their allergy by a combination of allergy testing and food challenge with milk. If your child has a type of allergy that can be diagnosed with allergy testing this may be used to monitor your child's allergies. A positive allergy test does not always mean your child will have symptoms when they have milk or milk products, therefore a challenge may be the only way to determine if your child has grown out of their allergy. Challenges may need to be done in a hospital by experienced medical staff. Do not do challenges at home unless instructed to do so by your doctor.

HOW DO YOU TREAT COWS MILK ALLERGY?

There is currently no treatment for food allergy. If your child has a confirmed cows milk allergy avoiding milk and all milk containing foods is the only way to prevent symptoms.

HOW IS COWS MILK ALLERGY DIFFERENT TO LACTOSE INTOLERANCE?

Lactose intolerance is when the body has difficulty digesting lactose, the natural SUGAR found in milk. Cows milk allergy is when the immune system reacts to the PROTEIN in milk. Lactose free products still contain cows milk protein and are not suitable for people with cows milk allergy.

HOW CAN MY CHILD AVOID COWS MILK?

Cows milk is found widely in the foods we eat therefore it is important to read and understand food labels to be able to choose foods that are safe for your child. Other animal milks (goat and sheep) contain similar proteins to cows milk and should also be avoided. Heating and processing can change the proteins in foods making them less allergenic. Your child may be able to tolerate baked or processed forms of milk without reactions. Your doctor will advise you what forms of milk can be included.

The following foods and ingredients DO NOT contain cows milk protein and can be eaten:

- Cocoa butter
- Cream of tartar
- Lactic acid- some lactic acid starter culture may however contain milk, so check labels carefully.
- Lactose in medications- Lactose is the sugar contained in cows milk. The pure sugar form is used in medications. The chance of a person with milk allergy reacting to pure lactose in medications is very low.

<p>Foods and ingredients <u>that contain</u> cows milk protein</p>	<ul style="list-style-type: none"> • A2 milk • Butter • Buttermilk • Casein and caseinates • Cheese • Cheese powder • Cheesybite spread • Cheese spreads • Condensed milk • Cottage cheese • Cream • Cream cheese • Curds • Custard • Dairy solids • Evaporated milk • Ghee, butter oil or butter fat • Goat and sheep's milk • Feta cheese • Hydrolysates (casein, milk protein, whey) 	<ul style="list-style-type: none"> • Ice cream • Infant formula (cows milk based including HA) • Lactalbumin • Lactoglobulin • Lactose free milk • Milk – low fat, skim, A2, UHT • Milk derivative • Milk protein • Milk solids • Nonfat dairy or milk solids • Probiotic drinks • Ricotta cheese • Skim milk solids • Sustagen, Pediasure and other high protein drink powders • Sour cream • Whey • Yoghurt
<p>Foods and ingredients <u>likely to contain</u> cows milk protein</p>	<ul style="list-style-type: none"> • Baked goods –biscuits, cakes, pastries • Breads • Breakfast cereals • Canned spaghetti • Caramel, fudge, butterscotch • Chocolate • Commercial baby foods • Confectionary • Crumbed and battered products • Dips • Gravy powders • Fruit Juice drinks- high protein • Infant feeding rusks • Instant mashed potato 	<ul style="list-style-type: none"> • Margarine • Milk drink flavouring such as Milo and malted milk powder. • Nougat • Pasta sauces • Potato products – mash, salads and instant potato • Processed meats-sausages, sandwich meats, hamburgers • Sorbet and Gelati • Salad dressings • Soups • Soy cheese • Snack foods – crisps, crackers

LABEL READING

Ingredients List

All packaged foods must have an ingredients list. You must check this ingredients list for any ingredients that may contain milk. It is law that all common food allergens (peanut, tree nut, seafood, fish, milk, eggs, soybeans and wheat) be clearly identified, however small the amount.

Example: Instead of simply casein the ingredients list should read casein (milk) or milk casein.

ALWAYS Check the ingredients list every time you buy the food as the ingredients of the product may change.

“May contain traces of milk” statements

These statements are used by manufacturers to indicate that the product may be contaminated with milk through processing and packaging. At present these statements are voluntary and there are no clear guidelines for companies regarding how and when to use them. The wording of the statements makes it very difficult to determine the level of risk and a product that does not contain the statement may be no safer than a product that does. The chances of having a significant allergic reaction through contamination during processing is extremely unlikely. For children at risk of severe allergic reactions companies can be contacted directly to explore food processing, packaging and cleaning procedures.

Products labelled as “May be present” have undergone more robust assessment (VITAL) and should be avoided by those with severe reactions to milk.

COWS MILK PRODUCT ALTERNATIVES

Cows milk and products made from cows milk such as yoghurt and cheese are important sources of energy, protein, fat, calcium and vitamin A and D. Especially for infants and young children, it is important to replace cows milk with a suitable alternative and in adequate amounts to ensure optimal nutrition and growth.

Instead of:	Use
Breastfed infants	Removing cows milk and cows milk based products from the maternal diet may sometimes be required. Check this with your doctor or dietitian. Alternative milks such as soy, rice or oat milk may be used for your baby in cooking and or on cereals. Infant formula will be required as a breast milk substitute until at least 12 months of age. Maternal calcium supplementation may be required.
Cows milk based infant formula	<p>Suitable Alternatives</p> <p>0-6mths Specialised infant formula prescribed by your doctor will be required. These include: Extensively hydrolysed: Alfare, Pepti Junior, Allerpro* and Novalac Allergy* Amino Acid based: Alfamino, Elecare and Neocate. *available without doctor prescription</p> <p>6-12mths Soy formula, if tolerated can be used from 6 months of age.</p> <p>Not suitable Lactose free formula HA formula Anti reflux (AR) formula A2 formula Comfort formula</p>

<p>Cows milk (children over 1-2yrs of age)</p>	<p>Suitable Alternatives Soy is the preferred option. Rice, oat or other plant milks are low in protein and fat and should only be used with guidance from a dietitian until after 2 years of age. Choose brands with added calcium (120mg/100ml).</p> <p>Not suitable Goat and sheep's milks contain similar proteins to cows milk and are not suitable. A2 milk is not suitable.</p>
<p>Yoghurt</p>	<p>Soy yoghurt (highly allergic children may still react due to a milk based starter used to make the yogurt)</p>
<p>Cheese and Sour Cream</p>	<p>Soy based cheese (check as some brands contain casein-milk protein)</p>
<p>Icecream</p>	<p>Soy ice cream, sorbet, milk free gelato</p>
<p>Cream and condensed milk</p>	<p>Soy cream, soy cooking milk, soy condensed milk and rice cream</p>
<p>Butter and margarine</p>	<p>Milk free margarine</p>
<p>Chocolate</p>	<p>Soy or Rice based chocolate</p>

If you are having trouble finding products in your supermarket try online allergy or vegetarian stores such as: www.crueltyfreeshop.com.au or www.veganperfection.com.au.

ALLERGEN MANAGEMENT AT HOME

Have a plan regarding storage and cooking of foods in your home as cross contamination can occur during storage, cooking and serving of foods.

ALLERGEN MANAGEMENT WHILST EATING OUT

- Parties and eating at cafes and restaurants can pose a challenge for families with a child with a food allergy.
- If your child has an EpiPen prescribed have it with them at all times.
- Plan ahead and discuss your child's allergies in advance
- If you are not sure that the food is suitable do not give it to your child to eat.

ALLERGEN MANAGEMENT AT CHILDCARE AND SCHOOL

- Ensure your child has an up to date Allergy Action Plan.
- Teach your child not to share food or drinks.
- Excursions and camps will need advanced planning and communication with the childcare centre or school.
- Remind staff about craft activities that may use old food containers and ensure they are clean.

Refer to the ASCIA (Australasian Society of Clinical Immunology and Allergy) website for further resources for Schools and Childcare www.allergy.org.au

For further information refer to:

ASCIA (The Australian Society of Clinical Immunology and Allergy) is the peak professional body of Clinical Immunologists and Allergists in Australia and New Zealand.

Their website contains a wide range of information including Guidelines for prevention of food anaphylactic reactions in schools, preschools and childcare centres and Action plans - www.allergy.org.au

Allergy & Anaphylaxis Australia: a non-profit organisation that provides information, training and support. Membership provides you with access to local support groups and seminars, quarterly newsletters and discounts on resources. Website contains outlines on each states policy on managing food allergies in schools, preschools and childcare facilities - www.allergyfacts.org.au

FSANZ (Food Standards Australia and New Zealand): for information on food labeling - www.foodstandards.gov.au

Disclaimer

The food and ingredient lists included in this resource are not exhaustive and may change, individuals with food allergy should always check food labels each time a product is purchased.

This resource is intended to accompany a medical consultation regarding the management of a diagnosed food allergy.