

Complementary Feeding & FPIES



Your baby has been diagnosed with Food Protein Induced Enterocolitis Syndrome (FPIES), which is a non-IgE mediated food allergy, and you have been advised that your baby needs to avoid the allergen that caused the reaction.

The introduction of solid foods should not be delayed beyond 6 months of age in FPIES, as babies need to be exposed to a variety of tastes and textures to prevent nutritional deficiencies, poor growth and fussy eating. However, this may feel daunting for you as there are no tests that can predict if your baby will react to any other food/s.

The most common foods that cause FPIES are cow's milk, egg, fish, soya, oats and rice. But almost any food can trigger a reaction, including foods considered to be early weaning foods such as fruits and vegetables. However, it is important to remember that the majority of babies will react to only one food. It is much less common to react to two, and extremely rare to react to three or more.

If your baby has an FPIES reaction, they should be referred to an allergy service and be under the care of a specialist dietitian.

Breastfeeding

There is no need to stop breastfeeding or to exclude foods from your diet unless your baby reacted to a food through your breastmilk; this is very rare.

If you wish to stop breastfeeding before your baby is 1 year of age, and they have cow's milk FPIES, speak to your doctor or dietitian about a suitable milk-free formula.

Soya formula is not recommended for babies under 6 months of age and should only be given to babies over 6 months once soya tolerance has been established.

Introducing solids: practical tips

- Ensure your baby is ready for solids
- Solids should be introduced around 6 months but not before 4 months of age. Do not delay beyond 6 months of age.
- Look out for signs that your baby is ready to accept solids:
 - Can hold head upright
 - Can sit with support
 - Is showing interest in food
- Your baby should be calm, not full from a milk feed, but not too hungry that they are restless and upset.



How to start?

- Strictly avoid any food/s that your baby has reacted to, or any food/s that you have been advised by your doctor or dietitian to avoid.
- Do not stop giving foods that your baby has been eating and are known to be tolerated.
- New foods can be introduced, one at a time, alongside foods your baby is already eating.
- Give each new food by midday so any reaction will be within daytime hours.
- Start with a teaspoon of food and increase the amount daily, increasing to an age appropriate portion over a period of 3 days. Keep that food in your babies' menu and introduce the next new food. Any shortening or lengthening of introduction should be discussed with your healthcare professional.
- There is no need to avoid foods with 'may contain' labelling. If you think your baby has reacted to trace ingredients, it is important to discuss this with your healthcare professional.
- You might find it reassuring to keep a record of foods you have trialled e.g.

Date	Meal	Food Given	Amount Given
21st Nov	Lunch	Apple puree	2 tsp
		Parsnip puree	3 tsp

What should you do if your baby reacts?

- If your baby has an FPIES reaction within 1-4 hours of eating i.e. repeated vomiting, goes pale or limp, seek medical help. It will help if you can present your emergency FPIES letter. Speak to your doctor if you have not been given a letter.
- If your baby has any other type of reaction to food within 2 hours of eating i.e. lip swelling, hives, vomit, stop giving the food and contact your doctor. If there is difficulty in breathing or reduced conscious level, seek immediate medical help.

What foods?

The table below gives a suggestion of how to progress weaning based on current data of trigger foods for FPIES. Start with the foods listed as uncommon trigger foods. Introduce foods one by one in each column moving from uncommon trigger foods to more common trigger foods.

If your baby reacts to a food in a particular food group, discuss next steps with your doctor or dietitian, before moving on with that food group.

Ages and stages of weaning		Uncommon Trigger Foods	➔	More Common Trigger Foods
6m exclusive breastfeeding (Dept. of Health)	Milk / Formula			Cow's milk & dairy Soya*
4 months+ Purees / well mashed foods of lower risk veg, fruits and grains. Then move on to iron rich proteins.	Vegetable	Parsnip, spinach cauliflower, broccoli, turnip, swede, courgette		Sweet potato, green pea
	Fruit	Plum, blueberries, apricot, peach, strawberries, watermelon		Banana, avocado
7-9 months Mashed foods with soft lumps and soft finger foods e.g. cooked vegetables, soft fruits	Grains	Quinoa, millet, amaranth		Rice, oat
	Iron rich protein	Lamb, pork		Fish, egg, soya, poultry e.g. chicken, turkey, duck
9-12 months Mashed, chopped and minced family meals and finger foods	Nuts & seeds**	Smooth tree nut (i.e. almond, hazelnut, cashew, walnut) & seed butters		Smooth peanut butter
	Other	Coconut based yoghurt/cheese		

*If your baby has cow's milk FPIES do not introduce soya and discuss it with your doctor / dietitian

** Nut and seed butters can be stirred into your baby's food or mixed with a little of your baby's usual milk. Introduce each nut butter or seed butter separately starting with ¼ teaspoon then ½ teaspoon, then 1 teaspoon. Once introduced, leave in the diet and introduce the next nut or seed. Aim for 1-2 teaspoon of each nut or seed butter/ground nut or seed a week.

If your baby has difficult to manage eczema, and/or immediate/IgE allergy to egg or other foods, seek advice from your doctor about when it would be appropriate to introduce nuts and seeds.