

Primary Care Milk Allergy Pathway in South West Essex

Daily Crying \geq 2hrs +/- Vomiting $>$ 5 episodes
 Vomiting $>$ half of volume or continuous regurgitation $>$ 30 minutes after feed
 +/- Eczema +/- type 1 or 2 or 6 or 7 in Bristol Stool Chart

- GP Review
- Out of Hours Service
- Health Visitor Review

*CMPA diagnosis can only be confirmed by an elimination diet followed by an oral food challenge

- Red Flags identified
- Hive, lip/tongue swelling within 2 hours
 - Above symptoms +/- wheeze, cough, voice change increased heart rate, colour change within 2 hours
 - Blood in stool
 - Faltering growth in-spite of adequate feeding
 - Persistent diarrhoea/vomiting

No red flags identified

CoMMiS Score

≥ 12

< 12

PAU/Hospital Referral
 (See secondary care milk allergy pathway)

*CMPA likely

Exclusively breast fed

Formula feeding

Mixed Feeding
 Formula + breast

Trial maternal dairy free diet with calcium and vitamin D supplement for 2-4 weeks

Trial extensively hydrolysed formula for 2-4 weeks

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Milk allergy unlikely – consider alternative diagnosis

Community Dietitian referral

Trial extensively hydrolysed formula + maternal dairy free diet for 2-4 weeks

If symptoms persist

Complex multiple food allergies

Unresponsive to EHF

If CoMMiS score ≥ 12

Urgent referral to local Multi-disciplinary Paediatric Allergy Service

Trial Amino Acid Formula for 4 weeks

Milk ladder at 9-12 months

Local management within community dietetics

Symptoms improved but red flags identified

Symptoms resolved no red flags

Any other red flags or acute onset symptoms identified at any appointment, then refer to multi-disciplinary paediatric allergy clinic