

Living with allergy – cow's milk

An allergy to cow's milk involves the immune system and affects about 2 children in 100. Happily, about half the affected children will outgrow it by the age of one and by three years most children will have outgrown it. Only a small minority of children will be affected for life.

Symptoms

As the immune system is affected, the symptoms are not just related to the stomach and could seem unconnected to food.

In early infancy, typical symptoms include tummy pain and vomiting. A small number may have rash or hives, difficulty breathing, wheeze or cough as well as eczema.

As the child gets older the symptoms include rash, hives and redness around the mouth which may spread all over the body, coughing, choking, gagging, trouble breathing, abdominal cramps, vomiting and diarrhoea.

Reactions can stop at any time or develop into a serious anaphylactic reaction.

Treatment

Antihistamines are usually able to control symptoms. However, if you have experienced breathing difficulties or anaphylaxis has been diagnosed, you should always carry an adrenaline auto-injector.

Very mild allergy

Small amounts of dairy products such as yoghurt or cheese can be eaten. Children with this level of allergy are likely to outgrow their allergy.

Mild to moderate allergy

Small traces of milk products in cooked foods can be eaten.

Lactose or milk sugar is usually tolerated but *milk*, *cream*, *cheese*, *yoghurt* and *ice cream* should be avoided.

Severe allergy

The only way to deal with a severe allergy is strict avoidance of all traces of milk and all dairy products. Emergency adrenaline should be kept nearby at all times.

Touch and smell

Patients may experience some symptoms on smelling the food, for example the smell of *cheese on a pizza* can cause symptoms in some.

Avoiding milk

While a full listing of ingredients, including milk, must be provided on foods, recipes change and it is always worth checking the labels.

Watch out for the terms '*natural flavouring*' and '*natural seasoning*' as these can sometimes contain milk proteins. While eating a food causes the most severe reaction, symptoms can also arise in some very sensitive people when the food is in contact with the skin or through a cut.

Severely affected children may be affected when, for example, they come into contact with an *ice cream* melted into the sand of a sand pit or dropped into a paddling pool.

Many *medicines* contain the milk sugar *lactose*, while this is not a protein that causes the allergy, it may be contaminated with traces of milk protein. A number of *dry powder asthma inhalers* contain lactose but the aerosol inhalers appear to be without lactose. There are no antihistamine tablets available in the UK that are free from lactose, however, the antihistamine syrups

offer an alternative presentation.

Milk alternatives

The feed of choice is a fully hydrolysed infant formula. Only in rare cases will a child require an elemental formula. Goat's milk and sheep's milk are similar to cow's milk and should be avoided.

Soya milk may be an alternative although some children who are allergic to cow's milk may also be allergic to soya milk.

Further information on allergy is available from www.allergyai.com

These lists are guides – always check the individual labels.

If it's not labeled, it is safer to avoid the food.