

**PREVENTING THE DEVELOPMENT OF FOOD ALLERGY – IMPLEMENTING NEW ASCIA GUIDELINES FOR INFANT FEEDING**

**Key issues in infant feeding**

- Inconsistent consumer and health professional information.
- Some health professionals (HPs) and parents are anxious or confused about introducing common food allergens.
- Parents of “high risk” infants may not be introducing common food allergens in the first year of life.
- Limited guidance and support for HPs and parents about introducing common food allergens.

**Infant Feeding Implementation Meeting (IFIM) March 2017**

This meeting enabled us to:

- Engage key stakeholders.
- Determine appropriate communication strategies for HPs and consumers.
- Identify education resources and tools required for health professionals.
- Determine key messages for consumers.
- Identify education materials required for consumers.

Challenges and strategies identified in relation to health professionals:

Challenges	Strategies
• Translating research into guidelines, policies and actions	• Identify key messages/information for HPs
• Inconsistent HP literature (e.g. guidelines)	• Provide HP kit containing key information/resources
• Changing practice	• Training resources, online information
• Different interest/health groups have different messages	• Communicate messages via a number of channels (e.g. journals, professional bodies)
• Reliance on a wide range of HPs to promote the message	

Outcomes identified in relation to consumer education:

- Need effective way to communicate the consensus statements:
  - When your infant is ready, at around 6 months, but not before 4 months, start to introduce a variety of solid foods, starting with iron rich foods, while continuing breastfeeding.
  - All infants should be given allergenic solid foods including peanut butter, cooked egg, dairy and wheat products in the first year of life. This includes infants at high risk of allergy.
  - Hydrolysed (partially and extensively) infant formula are not recommended for prevention of allergic disease.
- Terminology needs to be consumer friendly.

A key message for consumers, with supporting statements, was identified:

*When you introduce foods, include those which may cause an allergy. This will reduce the chance of your baby developing a food allergy.*

Supporting statements:

- Continue breastfeeding where possible.
- Start to introduce solid foods around 6 months, but not before 4 months, when your baby is ready.
- Common food allergens include cow’s milk, egg, peanut, tree nuts, soy, sesame, wheat, fish and shellfish.
- Include these foods in your baby’s diet regularly.
- This advice is based on research on high risk infants (e.g. babies with eczema and egg allergy).
- Some babies will still develop a food allergy. If your baby has an allergic reaction, stop giving that food and seek medical advice.
- If your baby has an allergic reaction, stop giving that food and seek medical advice.



**Next steps**

The following activities will be undertaken in 2018-20 (\$1 million funding):

- Communication strategy for HPs.
- Education resources and tools for HPs.
- Communication strategy for the community to raise awareness and encourage introduction of common food allergens in the first year of life.
- 1800 number to support HPs and parents regarding introduction of common allergens.
- Optimise eczema management in infants to prevent food allergy sensitisation.
- Address current myths about allergy prevention.



**ABSTRACT**

**Background:** The recently updated ASCIA guidelines for infant feeding and allergy prevention have been based on evidence from recent studies. These studies indicate that the development of food allergy can be reduced by introducing common food allergens into the infant’s diet in the first year of life. The National Allergy Strategy (NAS), a partnership between the Australasian Society of Clinical Immunology and Allergy (ASCIA) and Allergy & Anaphylaxis Australia will implement a communication strategy in 2017-2018 to increase the distribution and uptake of the ASCIA guidelines.

**Method:** The NAS has identified the need to develop a communication strategy about the key recommendations of the ASCIA guidelines. To achieve this, the NAS has invited key stakeholder organisations to discuss and identify effective strategies to implement the key recommendations from the ASCIA guidelines. These strategies will use key messages that are meaningful for health professionals and consumers.

**Results:** Two communication strategies are planned – one for health professionals which also includes an education component and another for the general community. The aim of the communication strategies are to overcome fear of introducing common food allergens to infants, particularly the introduction of peanut to high risk infants, to potentially reduce the development of peanut allergy, which tends to be lifelong.

**Discussion:** Many previous allergy prevention strategies have been ineffective, including delayed introduction of allergenic foods. However, the recent evidence supporting the introduction of common food allergens in the first year of life is encouraging. Overcoming parental anxiety, particularly for high risk infants, is the greatest challenge. However, the communication strategies developed by the National Allergy Strategy inform and educate general practitioners, paediatricians, child and maternal health nurses and dietitians, which in turn will help to inform and influence parents and potentially reduce the development of food allergy.