

Impacts on growth, reflux and constipation after transitioning to Amino Acid-based formula with Synbiotics

Jenelle Fernandez, MD
Pediatric Gastroenterologist
USA Health



Disclosures



Honorarium provided by Nutricia for this presentation

The opinions reflected in this presentation are those of the speaker and independent of Nutricia North America

Meet Baby Tina



Baby Tina is a 3month-old female, born full-term via vaginal delivery without complication



Case Study: Baby Tina





History

- · Switched from Standard infant formula to eHF due to constipation
- Constipation continued with emesis after each feed
- · Transitioned to AAF and milk of magnesia
- Still with increased fussiness and started to refuse bottles
- Transitioned to AAF with Synbiotics
- PCP started famotidine daily, dc'd MoM, and started Miralax[®]
- Referred to Pediatric GI



Case Study: Baby Tina





- Switched from Standard infant formula to eHF due to constipation
- Constipation continued with emesis after each feed
- · Transitioned to AAF and milk of magnesia
- Still with increased fussiness and started to refuse bottles
- Transitioned to AAF with Synbiotics
- PCP started famotidine daily, dc'd MoM, and started Miralax[®]
- · Referred to Pediatric GI



Miralax is a trademark of Bayer HealthCare LLC and not affiliated with Nutricia North America.

Case Study: Baby Tina Initial visit to Peds GI





4 months of age:

- 1) Dx with moderate malnutrition
- 2) Patient sleeping 13 hours overnight
- Concentrated AAF with Synbiotics to 27kcal/oz for eight feeds per day minimum
- 4) Famotidine was transitioned to 0.5 mg/kg 2x day



Anthropometric Data:

Weight 4.26kg

Weight Z-Score -2.78

Weight-for-length Z-score -2.29



Case Study: Baby Tina





Two weeks later

Feeds transitioned to 6 times per day

Minimal spit up



Anthropometric changes:

- 1) Weight gain 77g/day
- 2) Weight 4.8kg
- 3) Z-score -2.02
- 4) Weight-for-length Z score -2.85



Case Study: Baby Tina





A 5 months of age:

- Mild Malnutrition Dx
- · Miralax no longer needed
- · Eczema had improved
- Reflux is now minimum
- AAF with Synbiotics continued but decreased to 24kcal/oz



Anthropometric changes:

- Weight gain 41g/day
- Weight 5.38
- Weight Z- Score -1.44
- Weight-for-length -1.51



Case Study: Baby Tina





A 6 months of age:

- Mild Malnutrition Dx, but improving
- Continued improvement of her constipation and reflux
- Eczema resolved
- AAF with Synbiotics continued but decreased to 20kcal/oz



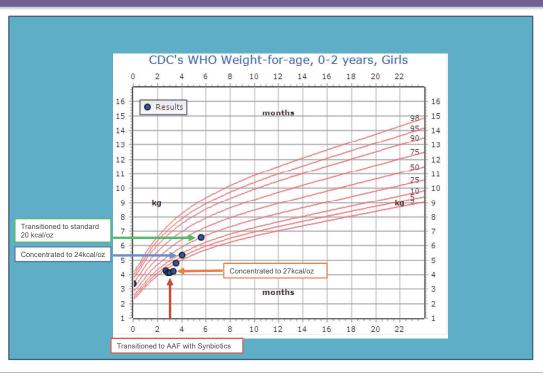
Anthropometric changes:

- Weight gain 24 g/day
- Weight 6.59
- Weight Z- Score -0.67
- Weight-for-length -1.19



Case Study: Baby Tina





Case Study Summary



- 1 Improved oral acceptance and fussiness compared to previous AAF
- 2 Malnutrition severity decreased by concentrating feeds and optimizing calories
- Relief of CMA Symptoms: reflux, constipation, and eczema