

# FACTSHEET

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## Cow's milk (dairy) allergy and milk free diet

### How common is cow's milk allergy?

Cow's milk allergy is one of the most common food allergies in childhood affecting about 1-2% of preschool children. Cow's milk allergy is much less common in school age children (less than 0.1%). It is often due to allergy (IgE) antibodies against milk proteins. These antibodies can be detected with an allergy test such as a skin prick test. Not all children with a positive milk allergy antibody test develop reactions on having milk or foods containing milk. If your child has a positive allergy test but has never had milk, your doctor will discuss with you the chance of developing a reaction if there is exposure to milk.

### What are the symptoms of cow's milk allergy?

Reactions can range from mild to severe. Mild to moderate reactions consist of any one or more of the following:

- Hives or welts
- Swelling of the lips/face/eyes
- Tingling of the mouth
- Abdominal pain or vomiting.

Severe reactions (anaphylaxis) include one or more of the following:

- Difficulty/noisy breathing
- Swelling of the tongue
- Swelling or tightness in the throat
- Difficulty talking and or hoarse voice
- Wheeze or persistent cough

- Persistent dizziness or collapse, pale and floppy (in young children)

It is rare (but possible) for these symptoms to occur alone without hives and/or vomiting. Very rarely, very sensitive individuals have died from a severe allergic reaction to milk.

Milk can also cause delayed reactions which are not due to IgE allergy antibodies. These delayed reactions can have symptoms such as worsening of eczema, diarrhoea and vomiting.

### How is cow's milk allergy diagnosed?

In most cases the clue to cow's milk allergy is the start of symptoms soon after drinking milk or eating milk containing foods (a few minutes to 1-2 hours). Another common clue is the occurrence of redness and hives soon after milk or containing foods such as ice cream or yoghurt touch the skin. The presence of allergy IgE antibodies to milk can be confirmed by an allergy skin prick test or a blood test (called a RAST test). Not every child with a positive allergy test will develop symptoms on exposure to milk and the test should be discussed with your doctor.

Allergy skin tests and blood tests are not helpful in diagnosing delayed reactions to milk. These delayed reactions can only be definitely diagnosed by a process of removal of milk containing foods from the diet and rechallenge if the symptoms resolve. Milk based foods should not be removed from your child's diet without the advice of your doctor and the assistance of a dietician.

## Is lactose intolerance the same as milk allergy?

No. Lactose intolerance occurs because the sugar in milk (lactose) cannot be completely digested (broken down) in the bowel. The usual symptom is diarrhoea. A formula without any lactose (e.g. lactose-free infant formula) used to treat lactose intolerance can still cause milk allergy.

## Can my child grow out of milk allergy?

Most infants and young children will grow out of their milk allergy. Children with the delayed reactions (not caused by IgE antibodies) are more likely to outgrow their milk allergy at an earlier age than children with milk allergy due to IgE allergy antibodies. Approximately 90% of children with delayed and 50% with immediate reactions will grow out of their allergy by 3-5 years of age. Those children who have had more severe immediate reactions with breathing problems may be less likely to outgrow their allergy than children with milder reactions. Your doctor can determine whether your child has outgrown immediate milk allergy by monitoring the allergy tests every 12 months or so.

## Is my child likely to have a severe reaction from casual contact with milk product on benches, other children's hands or by smelling milk?

No. Severe reactions from casual contact are extremely rare.

## Can I prevent milk allergy in my future children?

There are no steps which can guarantee a child will not develop milk allergy. There is no evidence that avoiding cow's milk in pregnancy prevents milk allergy in the baby. The evidence is unclear whether avoidance of cows milk by the mother while breastfeeding will alter the chances of milk allergy in the baby.

## What is an Epipen or Anapen?

Epipens and Anapens are emergency devices called adrenaline autoinjectors that inject a dose of adrenaline into the muscle. They are used to treat severe reactions to nuts (anaphylaxis). The drug adrenaline reverses the severe allergic reaction and can be lifesaving.

## Should my child carry an adrenaline autoinjector?

All allergists agree that children who have had a serious reaction with involvement of the breathing passages should have an adrenaline autoinjector. The need for

other children to have an adrenalin autoinjector depends on a number of factors which should be discussed with your doctor.

**If you have an adrenaline autoinjector it is very important that you understand how and when to use it and that you have a written anaphylaxis action plan provided by your doctor.**

## Milk free (Dairy Free) diet

- Cow's milk (dairy) is found in many foods and often in foods we don't expect e.g. margarine, bread and some soy yoghurts
- Unless the doctor says otherwise, cow's milk (dairy) needs to be strictly avoided
- Usually children who react to cow's milk will also react to goat's milk and milk from other animals.
- Children sensitive to cow's milk are not usually sensitive to beef.

## How do I avoid exposing my child to milk?

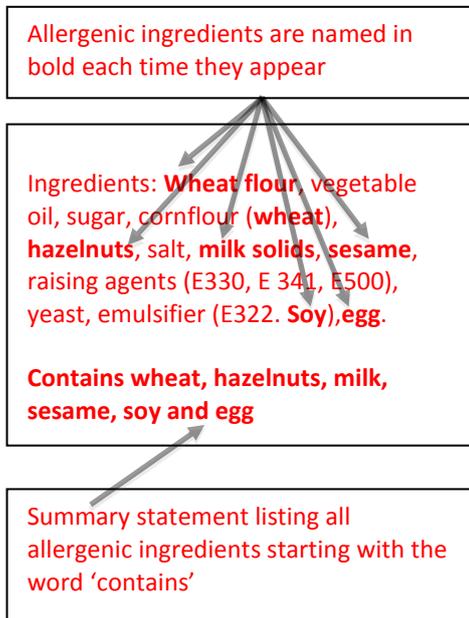
Milk or milk products may be found in foods we don't always expect them to be in. It is important to:

- Understand the different words used to describe cow's milk or dairy products e.g. butter, buttermilk, cream, curd, ghee, milk, cheese, dairy, milk solids, whey, yoghurt, casein and caseinates. The following food will contain milk:

<ul style="list-style-type: none"><li>• Butter</li><li>• Buttermilk</li><li>• Casein and caseinates</li><li>• Cheese</li><li>• Cheese powder</li><li>• Condensed milk</li><li>• Cottage cheese</li><li>• Cream</li><li>• Curds</li><li>• Custard</li><li>• Dairy solids</li><li>• Hydrolysates (casein, milk protein, whey)</li><li>• Evaporated milk</li><li>• Ghee, butter oil, butter fat</li><li>• Goat's and sheep's milk</li><li>• Ice cream</li></ul>	<ul style="list-style-type: none"><li>• Infant formula (cow's milk based)</li><li>• Low fat milk</li><li>• Malted milk</li><li>• Milk</li><li>• Milk derivative</li><li>• Milk protein</li><li>• Milk solids</li><li>• Non-fat dairy solids</li><li>• Non-fat milk solids</li><li>• Nougat</li><li>• Pro-biotic drinks</li><li>• Skim milk</li><li>• Skim milk solids</li><li>• Sour cream</li><li>• Sour milk</li><li>• Whey</li><li>• Yoghurt</li></ul>
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- learn to how to read food labels carefully- always check the food list on the label even if it says "dairy-free", or is a product you have used before. An example of the food label is given below:

Sample food label: Crunchy Hazelnut Biscuits



- avoid foods that don't have a food label or that you haven't made yourself, as there is no guarantee that the food doesn't contain milk
- plan eating out and travelling and talk to staff serving you about your child's allergy
- avoid food that is served using spoons/tongs that are also used to serve food containing milk (e.g. ice-cream shops)
- prepare safe meals at home for your child to take out
- teach your child about their allergy

### What about foods with a label that says "may contain traces of milk"?

Some foods may carry a warning on the label "may contain traces of milk". This usually indicates that the food is made in a facility that also makes a food containing milk. Discuss what to do about these foods with your doctor.

### What about baby formula?

The most commonly used formula are made from cows' milk proteins and will cause reactions in cows' milk allergic children. Hypo-allergenic formulas, e.g. the HA formulas, are not appropriate for babies with diagnosed milk allergy. Some formula are made from soy and do not contain milk. Soy based formulas are suitable for many infants who are allergic to cows' milk.

There are special formulas made for milk allergic children that can be prescribed by your doctor if your baby cannot have a soy formula.

### Is low fat, skim or A2 milk less likely to cause an allergic reaction?

No. The allergy producing part of the milk is in the protein not the fat part of the milk.

### Is goat or sheep milk a good alternative?

No. There is a lot of overlap in the allergy causing parts of goat and sheep milk and cows' milk. 90% of children will react to these milks if they are cows' milk allergic.

### Is your child getting enough calcium?

Cow's milk and dairy products are the main source of calcium in our diet. When it isn't possible to use cow's milk it is essential to make sure your child gets it from other sources such as soy milk. You need to discuss other options with your doctor and possibly a dietician to ensure your child meets their daily requirement for calcium that is so important for your child growing up

Some suitable Cow's milk replacement are listed below:

Instead of:	Use
Cow's milk infant formula for a child less than 1 year of age	Breast milk, soy formula, hydrolysed formula or amino acid formula.  Speak with a medical professional to choose the right one based on your child's diagnosis  Soy drink - choose one with more than 120mg calcium /100mls soy drink
Cow's milk - for a child over 1 year of age	Rice drink – choose one with more than 120mg calcium /100mls rice drink
Yoghurt	Soy yoghurt
Cheese, sour cream	Soy cheese, soy sour cream
Ice cream	Soy ice cream, sorbet, milk free gelato
Butter and margarine	Milk free margarine eg Becel®, Sundew®, Nuttelex®

Some soy products may contain small amounts of cow's milk protein and may need to be avoided if your child is highly allergic. Ask your doctor or dietitian.

These include:

- Soy yoghurt (a milk-based starter may be used)
- Soy cheese (may contain casein).

**Note:** Toffuti brand sour cream, cream cheese and cheese is milk free

### Milk and Nut-Free Chocolates

- **Sweet William** - milk chocolate/ tangerine milk chocolate (dairy free, gluten free, lactose free, peanut free) chocolate spread (gluten free, lactose free, dairy free, peanut free)  
Available in Woolworths, Coles (health food isle), IGA (confectionery isle), health food shops.  
[www.sweetwilliam.com.au](http://www.sweetwilliam.com.au)
- **Kinnerton** -Allergy free-chocolates: Easter Eggs, Chocolate bars & Lollipops (Dairy free, gluten free, egg free, nut free).  
Children's character chocolates (Nut safe)  
Available at selected Target, Big W, Woolworths, Coles, David Jones, Aldi & IGA stores.  
Also available online at [www.kinnerton.com.au](http://www.kinnerton.com.au)
- **Willow** - chocolate bars, Christmas, Easter and Valentine novelties, frogs  
Available 03 9587 1079 or via [www.allergyblock.com.au](http://www.allergyblock.com.au)

### Remember:

- Most children will outgrow their milk allergy by the age of 5-8 years.
- Learn to recognize the different types of food labels which indicate that the food contains cows' milk products.

### Where can I find more information on the Internet?

- The Australian Society of Clinical Immunology and Allergy (ASCI) website contains useful information on food allergy written by Australian specialists: [www.allergy.org.au](http://www.allergy.org.au).
- FSANZ - Food Standards Australia and New Zealand for information on food labelling: [www.foodstandards.gov.au](http://www.foodstandards.gov.au)