"I just want to find the right formula for my baby"

Discussions around infant feeding among formula-feeding parents
“I just want to find the right formula for my baby”: Discussions around infant feeding among formula-feeding parents
Jessica Mitchell and Helen Crawley


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# Glossary

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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</thead>
<tbody>
<tr>
<td>BF</td>
<td>Breastfeeding</td>
</tr>
<tr>
<td>BTW</td>
<td>By the way</td>
</tr>
<tr>
<td>CMPA</td>
<td>Cow’s milk protein allergy</td>
</tr>
<tr>
<td>CMPI</td>
<td>Cow’s milk protein intolerance</td>
</tr>
<tr>
<td>DD</td>
<td>Dear daughter</td>
</tr>
<tr>
<td>DH</td>
<td>Dear husband</td>
</tr>
<tr>
<td>DS</td>
<td>Dear son</td>
</tr>
<tr>
<td>EBF</td>
<td>Exclusively breastfed</td>
</tr>
<tr>
<td>EBM</td>
<td>Exclusive breast milk</td>
</tr>
<tr>
<td>EMCS</td>
<td>Emergency Caesarean section</td>
</tr>
<tr>
<td>ER</td>
<td>Emergency room</td>
</tr>
<tr>
<td>FF</td>
<td>Formula-fed</td>
</tr>
<tr>
<td>GP</td>
<td>General practitioner</td>
</tr>
<tr>
<td>HV</td>
<td>Health visitor</td>
</tr>
<tr>
<td>IME</td>
<td>In my estimation</td>
</tr>
<tr>
<td>IMHO</td>
<td>In my humble opinion</td>
</tr>
<tr>
<td>IMO</td>
<td>In my opinion</td>
</tr>
<tr>
<td>IYKWIM</td>
<td>If you know what I mean</td>
</tr>
<tr>
<td>LB</td>
<td>Little boy</td>
</tr>
<tr>
<td>LG</td>
<td>Little girl</td>
</tr>
<tr>
<td>LIL</td>
<td>Little</td>
</tr>
<tr>
<td>LO</td>
<td>Little one</td>
</tr>
<tr>
<td>LOL</td>
<td>Laugh out loud</td>
</tr>
<tr>
<td>M</td>
<td>months</td>
</tr>
<tr>
<td>MIL</td>
<td>Mother-in-law</td>
</tr>
<tr>
<td>MW</td>
<td>Midwife</td>
</tr>
<tr>
<td>OFC</td>
<td>Of course</td>
</tr>
<tr>
<td>OH</td>
<td>Other half</td>
</tr>
<tr>
<td>OJ</td>
<td>Orange juice</td>
</tr>
<tr>
<td>OP</td>
<td>Original poster</td>
</tr>
<tr>
<td>PM</td>
<td>Post me</td>
</tr>
<tr>
<td>PND</td>
<td>Post-natal depression</td>
</tr>
<tr>
<td>PP</td>
<td>Previous poster</td>
</tr>
<tr>
<td>PUPD</td>
<td>Pick up, put down</td>
</tr>
<tr>
<td>RTF</td>
<td>Ready-to-feed</td>
</tr>
<tr>
<td>SCBU</td>
<td>Special care baby unit</td>
</tr>
<tr>
<td>STTN</td>
<td>Sleep through the night</td>
</tr>
<tr>
<td>TBH</td>
<td>To be honest</td>
</tr>
<tr>
<td>WO</td>
<td>Weeks old</td>
</tr>
</tbody>
</table>
Summary

In 2009 a review of parental website conversations about infant formula and other infant milks was published by The Caroline Walker Trust (Mitchell, 2009). That report – ‘I hear it’s the closest to breast milk’ – considered some of the thoughts and discussions about infant formula and infant feeding among parents, families and potentially health professionals and others at that time. This report updates that work by re-visiting parental web-based chat rooms in May 2014 to see if there is anything new to learn about how and why families use different infant formula.

This is a short, subjective review, which looks qualitatively at text copied from hundreds of conversational threads and considers key themes that appear within these conversations. Those who use web-based chat sites are not representative of the population as a whole and this is acknowledged, but the discussion provide some much needed context for considering how best to support families and health professionals in the UK with useful information on infant feeding.

As in the previous review, the majority of those posting comments were mothers, rather than fathers or other family members. Also as previously seen, it was clear that discussions relating to formula were not open to debates about the ‘rights and wrongs’ of infant feeding choices, and parents were clear that these ‘infant formula threads’ were not to be used for discussion of breastfeeding, or its superiority. Parents discussing formula felt it was important that their choice was not judged, and even when people who had breastfed successfully had difficulties after switching to formula, no-one expressed the idea that a return to breastfeeding could be attempted or that breastfeeding might alleviate some of the problems parents were having. Some of those posting had not yet had their babies but were ‘pre-empting’ problems that might arise with breastfeeding by being ready with the right formula, and with knowledge on how to use it.

Since the publication of the previous report in 2009 there appear to be considerably more concern and discussion around ‘reflux’, allergy, colic and unsettled behaviours and ways to manage and tackle these conditions with medicines, and with different types of infant formula. Concerns over ‘normal’ behaviour and whether infants could be allergic to components of first milks, as well as the need for specialist formula, dominated many discussions. Many infant behaviours which are not related to reflux or allergy – such as crying after a feed, back-arching, vomiting or other behaviours that are frequent and normal in many infants – were being ‘diagnosed’ as in need of treatment. Parents were concerned about reflux even when weight gain was normal among infants, and many complained that health professionals
showed little concern as long as infants were gaining weight, despite parents being convinced that their infant was in need of specialist support.

The desire to have infants sleeping for long periods as soon as possible was also a common conversational thread, with many parents seeing long night-time sleeps as meaning that they had found the right infant formula and feeding regime. 'Dream feeding' was a new conversational thread compared to five years ago and threads also discussed at length how feeds could be prepared simply for night-time feeds when new guidance suggests bottles should be made up freshly, and using new equipment such as milk machines.

Compared to five years ago there appeared to be less support for ‘hungry baby milk’, ‘follow-on milk’ and ‘goodnight milk’ and this may reflect greater clarity among health professionals and policy makers that these milks offer no advantage. Brands of milk are frequently discussed, with many families believing that the right milk for their baby is out there, either in powdered or ready-to-feed form, and it is a matter of finding one that their baby likes and tolerates. Concerns about volume of milk to use and how to make milks up safely were also frequently discussed, and there was a clear divide between the parents who ignored advice and took the lead from their infant on volume and timings of feeds, and those who followed advice on formula packaging or from elsewhere, but felt unhappy with this advice.

Many websites link directly to formula company websites within discussions and many also have heavy advertising around the chatroom site from companies that produce formula milk. The brand mentioned most frequently by site users, Aptamil, is part of the Danone group which spends over £14 million on promoting follow-on milks just in the UK and which has over 70% of the infant milk market (Mintel, 2014). Discussions among parents often mirrored the marketing approach taken by Danone that Cow & Gate milks are cheap and cheerful for easy, happy babies and Aptamil milks benefit from ‘30 years of scientific analysis’ and are more ‘tailored to individual babies’. Negative opinions were mostly related to SMA brand milks. Little discussion was found relating to growing-up milks, but this may reflect the fact that the key users of chat forums around infant formula are more likely to be expectant and new mums.

In terms of where families obtain their information about which formula to use, there was less emphasis on ‘family’ than in the previous review. The advice that health professionals gave received similar negative feedback from parents to the feedback reported five years ago. Marketing data suggest that friends and family are the dominant source of information on infant feeding for most parents, and it may be that those who use internet chat sites may be those less likely to seek advice in this way, or may be those more isolated from family and friends for whatever reason.
More references were made to social media and finding out information directly from websites, and there was a sense from some parents that they could find the information they needed and make up their own minds about what is best for their baby. Other parents exhibited high levels of anxiety over infant feeding choices and were highly supported by other parents to take care of their own mental and physical health, to persevere with asking for help and to follow their instincts to do the right thing for their baby.

Overall over the past five years the discussions on parental websites seem to have become dominated by those seeking advice for what are considered abnormal infant behaviours around feeding. Many parents exhibit high levels of anxiety over crying and vomiting behaviours, as well as 'sleeplessness', and may use medicines and specialist formula to solve what they see as medical rather than parenting or more practical issues. While the authors recognise that the conversations between parents on website chat sites are highly subjective, and only reflect the views of a small proportion of parents, they do provide some insight into how parents and health professionals can be supported around formula feeding in the UK.
1 Introduction

Market research reports suggest that about 13% of mothers regularly use parenting websites to source information and seek support, and a further 10% use company websites and other social media (Mintel, 2014). Users of parental websites are spread across all ages and locations and, while there is a trend to users being from higher income families, users are found across all social groups. Samples of conversations taken from parental talk boards will not therefore represent the population as a whole as they are self-selected and represent parents who may be more economically active and more computer-literate. Although collecting data from parenting websites cannot therefore provide representative information about current concerns among parents who choose formula feeding, it provides an insight into some of the issues currently under discussion.

The aim of the work carried out in 2014 was to re-visit data collected in 2009, to see how conversations may have changed over that time, and to provide some insights into what information related to infant milks may be useful to parents and health professionals.
2 Methodology

2.1 Website chat forums visited

Registration was taken on websites hosting parenting discussion forums. Registration on a site allows a member to visit site chat forums, and to post entries to chats, although registration is not always required to view forum discussions.

The websites were chosen by following up sites visited for the report ‘I hear it’s the closest to breast milk’ (Mitchell, 2009) and uncovered via web searches for parenting forums. None of the sites were directly linked to baby food or formula companies, but the sites represent the key chat forums currently in use in the UK.

Registration was taken on 18 sites hosting discussion forums:

- The Answer Bank
- Ask Baby
- Baby and Bump
- The Baby Centre
- Baby Expert
- The Baby Website
- Dad Talk
- Emma’s Diary (a site of the Royal College of General Practitioners)
- Gurgule
- Home Dad
- Made for Mums
- Mothers 35 Plus
- Mumsnet
- Mumszone
- Netmums
- Pregnancy Forum
- Small Steps
- Think Baby.

Since the 2009 report, most of the sites now offer members the opportunity to post comments on a range of other social media including Facebook, Instagram and Twitter. These social media were not examined for this report. Members are now also able to post comments to the chat forums via mobile devices and it was clear that many were doing so.

There was considerable variation in the amount of conversational activity related to infant formulas and formula feeding, with 10 websites having no activity at all relevant to this research. Table 1 broadly ranks the sites showing, in descending order, the number of pages of discussion collected from each site relevant to the topics analysed. The busiest three sites were: Netmums; Mumsnet; and Baby and Bump. The sites with no relevant activity were: The Answer Bank, Ask Baby, The Baby Website, Dad Talk, Gurgule, Home Dad, Mothers 35 Plus, Mumszone, Small Steps and Think Baby. The busiest three sites recorded dozens of conversational strands started each week on formula feeding. In some cases, conversations
had been viewed thousands of times by members, the vast majority of whom do not post comments. The majority of comments in this report were gathered from these three sites.

It is not possible to do a direct comparison around the level of activity of chat discussion around formula feeding between this report and previous research in ‘I hear it’s the closest to breast milk’ (Mitchell, 2009). Detailed information was not collected about the number of users on sites or the number of conversations for either report, and the time period for collection of information varies between the reports. The same three sites – Baby and Bump, Mumsnet and Netmums – remained the busiest sites. While direct comparison over time periods is not possible, the considerably greater number of recorded pages of conversation in 2014 does suggest greater use of these forums for discussions around formula feeding and this may reflect ability to use a wider range of devices to access and comment on social media.

Table 1
Websites ranked in descending order of pages of saved conversations

<table>
<thead>
<tr>
<th>Website chat forums</th>
<th>Pages of saved conversations on formula feeding related topics over data collection period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Netmums</td>
<td>265</td>
</tr>
<tr>
<td>Baby and Bump</td>
<td>72</td>
</tr>
<tr>
<td>Mumsnet</td>
<td>60</td>
</tr>
<tr>
<td>Pregnancy Forum</td>
<td>48</td>
</tr>
<tr>
<td>Emma’s Diary</td>
<td>9</td>
</tr>
<tr>
<td>Baby Expert</td>
<td>7</td>
</tr>
<tr>
<td>Made for Mums</td>
<td>2</td>
</tr>
<tr>
<td>Baby Centre</td>
<td>1</td>
</tr>
</tbody>
</table>

2.2 Advertising policies

All websites with forums that contained member posts relevant to formula and formula feeding were asked about their advertising policies including in regard to the International Code of Marketing of Breast-Milk Substitutes (World Health Organization, 1981) and The Infant Formula and Follow-On Formula Regulations (2007). These regulations ban the advertising of infant formula but allow advertising for follow-on formula (suitable from 6 months of age) and other milks for babies aged 6 months or older. Websites were written to under a pseudonym and it was not specified that information was being gathered for a report about infant formula. Websites were also asked about their advertising policy in regard to tobacco and alcohol.

All eight of the websites contained advertising of some type, often as adverts around the pages or at the top and tail of web pages. The Baby and Bump chat forum was the most advertising-
heavy as individual member posts have advertising links inserted into them by the site. Individual words are highlighted within member posts and if these are clicked or even hovered over for a second, advertisements appear. No member posts in 2009 contained advertising links in this way, and this represents greater sophistication in marketing to link users to external information and websites through their own dialogue.

Only three of the websites replied to requests for information about their advertising policies. Immediate Media (Made for Mums and Baby Expert) allows formula milk advertising in line with current UK-wide regulations. Netmums and Mumsnet have stricter guidelines in place and allow no formula advertising of any type including for follow-on formula or other milks for babies aged 6 months or older, but do allow brand-related marketing for infant foods.

2.3 Site users

The overall impression from the chat forum conversations detailed in this report is that it was mothers who were discussing formula-feeding issues. Mothers sometimes referred to the opinions or ideas of fathers within posts but it was rare to find a father making a post himself. Neither of the sites directed at fathers (Home Dad or Dad Talk) had any posts relevant to the research question during the period searched. The greatest level of conversational activity about formula feeding was among those who were caring for infants of approximately 6 months of age or younger. The dominance of mothers with infants aged 6 months old or younger is similar to the situation in 2009.

2.4 Gathering information from conversations on chat forums

All of the websites’ chat forums were visited in the first three weeks of May 2014. On each site’s forum, members can read or make posts within particular topic areas, with each post identified by topic/question, date and poster pseudonym. Typically, a member initiates with a question and other members then contribute answers. Searches were made in topic areas where there were likely to be discussions about formula and formula feeding. On some of the websites there were separate strands which were devoted to breastfeeding; chats on these were not specifically searched. The research focused on discussions where questions and comments originated between 1 April 2014 and mid-May 2014. However, some discussions were viewed where the original question was posted at a date earlier than 1 April 2014 but where the most recent member reply was between 1 April and mid-May 2014.

Posts in some cases include more detailed information from the member’s biography including location, age, gender, number of posts, occupation, and baby’s age and gender. Information about the member was not gathered, except in instances where the poster noted a specific role as an official moderator for the chat forum, or a role as an infant feeding professional. Information on the age of the infants under discussion was gathered where this was available. Posts where it was clear that members were from outside the UK were not gathered as it was
the intention of this research to gather information to inform UK policy and practice. No information was verifiable in that members post their own details without the need for formal verification. Some posts list the number of times a question has been viewed by members and this information was gathered in a few instances where the viewing figures seemed particularly high, as this was seen to reflect interest in the topic area.

Posts relevant to formula and formula-feeding practices were copied and saved. Not all relevant conversations were copied, nor were all answers to each posted question copied where subject matter was repetitive of other conversations, but effort was made to note in a research notebook that a subject had arisen in order to enable comment on the level of discussion on topics. No posts to chats were made by this report’s authors, and visits were made anonymously under a pseudonym.

The website chat forums have codes of conduct, and discussions can be pulled or blocked if discussions breach these. Direct advertising or promotion of a formula could breach these guidelines and be pulled. The website forums are places where members post information freely and they are not examined to ensure that information is ‘correct’. However, most sites have moderators and some have moderators with specific responsibility for topic areas such as infant feeding. Some of these moderators have qualifications relating to infant feeding and may contribute to discussions. Some sites also have ‘expert’ users who have no official connection to the site, but who are also pulled into discussions.

2.5 Analysis of findings

Chat forum posts were analysed to categorise expressed thoughts, feelings and views into key themes relating to the research objectives. Chat forum conversations have then been used to illustrate aspects of each theme. The key themes were determined by the amount of conversation in chat forums, with particular attention drawn to ideas mentioned repeatedly in discussions. Key information sources employed by chat forum members in making their decisions about feeding have also been identified, and commented upon in terms of chat forum member views. The analysis includes samples of conversations that indicate the range of issues under discussion and considers the information sources used in choice-making and opinion formation, including the use of companies as an information source. Feeding practices that go against official recommendations have also been identified within each conversation.

The ideas expressed within chat forum conversations often run across more than one topic and many different strands of thought and feeling are inter-related, which means that the key themes are also inter-connected. The key themes and associated chat forum conversations which the report has identified are organised in terms of the central idea members are exploring within a conversation. Particular interest was paid in analysing conversations to highlight feeding practices that go against official recommendations (e.g. the early introduction
of follow-on milks). In addition we were interested in whether recent heavy advertising had influenced the use of toddler milks, and the role companies and health professionals play in providing advice and information. The collection of data was therefore subjective, but using one researcher across all data allowed there to be a consistency in determining themes under discussion.

Conversations in this report are provided without details of posting date, website, or user. Names and photos have been deleted where these were included within postings. The intention is not to identify specific chat forum members, even by pseudonym, nor to compare content by website.
3 Key findings

3.1 Information sources used in opinion formation

A range of information sources was mentioned by chat forum members as coming into play in terms of their decision-making around formula and formula feeding. These have been categorised as:

- health professionals
- company information
- peers and family (including other website members, site moderators, friends, partners and parents)
- independent reports and resources, and
- internet and social media.

The degree to which each information source was trusted appeared to vary considerably among members in posts on chat forums. The overall impression is that company information and family/peers were viewed relatively benignly or even positively. However, health professionals generally strongly split opinion – drawing considerable criticism along with a fair amount of praise.

None of the sources took absolute precedence over another; almost all were regularly and frequently discussed in conversations. One exception was formal, independent, written advice material and reports, which were much less frequently mentioned. Family members were also not frequently mentioned and this may reflect the fact that users of chat forums may be individuals who have moved away from core family support. Chat forum users seemed happy to consider that opinions from a range of sources could be ‘expert’ and useful. In fact, users often reacted quite angrily to interjections by anyone who suggested particular expertise. The exception to this seemed to be ‘moderators’. On the few sites where these appeared in conversations to offer advice, they seemed to be viewed positively by members. They were drawn into conversations on occasion to offer advice, to clarify or to counter certain viewpoints. Members who post advice or comments in answer to questions were almost always careful to use non-judgemental language about their peers and thus the dialogue between members is mostly supportive.

The most commonly mentioned information sources have been categorised as follows:
Health professionals

This included health visitors, midwives, infant feeding counsellors, nurses, GPs, health locations such as hospitals, and government information sites including NHS Choices.

Comments about health professionals appear in discussions on all of the viewed chat forums. The impression of health professionals projected on the sites was often a fairly negative one, which would be expected since those who were not feeling supported may be more likely to seek advice elsewhere. Chat forum members frequently reported unhelpful comments, and incorrect advice, with health visitors and GPs being the most frequently criticised professionals. According to posts on the site, health visitors, and other healthcare professionals allegedly did the following:

- Offered conflicting / contradictory information, including advice that contradicted official advice
- Did not take parental worries or questions seriously or even disbelieved parents' reports about their babies
- Worried parents about the health of their baby, including around weight gain (too much and too little), pooing and vomiting
- Advised inappropriate feeding, such as suggesting complementary foods before 6 months for reasons such as inadequate weight gain, or offering fruit juice/sugar to babies under 6 months to combat constipation
- Recommended specific brands of formula, repeating company information in doing so.

The conversations on websites most frequently dealt with problems, and requests for advice, from those who may not have felt comfortable with advice already given. It is important to remember that the comments are not verifiable in that they are secondhand; it could be that the chat forum user was misreporting or misunderstanding advice given. Also, the negative comments were not universal.

Some members reported good experiences with health professionals who offered non-judgemental advice and support. There were reports that health professionals supported mothers to keep breastfeeding (and avoid switching to or introducing formula) in difficult circumstances; were concerned about the good health of infants but did not add to the worry of parents about issues such as pooing or weight gain or vomiting; and followed government advice about the use of follow-on formula and other 'specialist' milks including milks for children over 1 year of age.
Company information

This includes company websites, helplines, advertisements, information on packaging, social media, give-aways, and printed material.

Comments about company information cropped up in discussions on all of the viewed chat forums. The extent of any participation in chat forums from company representatives was unclear. Overall, the impression of companies, and company information sources, on the sites was a mixed one. Some postings on the forums refer to helpful company websites, helplines and packaging. Many postings repeated what they suggested was independent information about brands but was actually from company marketing. However, there were also some site members, expert and not, who were more mistrustful of such information. For example, many members suggested that most formulas are essentially the same despite company messages that they are different. There was some awareness that follow-on milk advertising was used as a way of promoting all formula.

Peers and family

This includes other website members, site moderators, friends, partners and parents.

Comments about peers and family cropped up in discussions on all of the viewed chat forums. However, family members were not frequently mentioned in discussions. On balance, the impression of family and peers as a source of support was a positive one, although this was not universal. There was some suggestion, for example, that fathers were not always as helpful or supportive around infant feeding as their partners would have liked them to be. Family and peers were reported as giving advice that was contrary to recommended feeding practice and which repeated company marketing messages.

Other chat forum members were almost always seen as sources of supportive, non-judgemental information. Conversational guidelines on the websites encourage supportiveness, and the call to supportiveness was repeated in conversations if disagreements became too strong, with site moderators entering some conversations if tension arose. Some conversations on forums showed tension, particularly over the issue of acceptability of formula marketing and advertising, and feeding advice that was seen to be incorrect or judgemental. Some of the sites had official moderators or expert users, with varying levels of feeding expertise, who occasionally interjected into conversations. In general, users seemed broadly happy to consider advice from one another regardless of ‘expertise’, although the views of ‘experts’ seemed to be taken into account. In the vast majority of situations where users made such interventions, these seemed to be done gently with non-judgemental intentions, the exception being where such a user was contradicting feeding information that went directly against government advice and / or was seen to be potentially dangerous or misleading.
Independent reports and resources

There were very few mentions by members about the use of independent reports and resources to inform decision-making around formula or formula feeding. Some members had sought out information from NHS Choices or government websites about topics including the rules around supermarket sales of infant milk, particularly rules around special offers or loyalty points, and about recommended amounts of formulas for different weight babies. Independent reports and resources were also infrequently mentioned by website moderators or expert users. In a couple of instances, such users mentioned First Steps Nutrition Trust and The Caroline Walker Trust as charities in relation to work on the composition of infants milks.

Internet and social media

There were regular mentions of internet and social media sites as places to go to for information about infant feeding. Clearly, members using a parent web-based chat forum are already using this technology as an information resource. This report notes where recommendations were made to join social media groups or to check out information websites that were not clearly linked to government or an independent charity.

Changes to information sources used in opinion formation since the publication of ‘I hear it’s the closest to breast milk’ in 2009

In the report ‘I hear it’s the closest to breast milk’, published in 2009, a similar mix of information sources was mentioned by forum members as being influential in decision-making around formula and formula feeding. However, GPs were not mentioned as frequently in 2009 as they were in this report, nor was the internet and other social media. Family members were mentioned more frequently in 2009 as offering advice or comment. The level of activity of moderators seemed to be greater in 2009 than for this report. The opinion of the quality or usefulness of resources has not shifted substantially between 2009 and 2014.
3.2 Key themes arising about formula and formula feeding in chat forums

The following seven key themes have been identified from chat forum conversations:

- I think my baby has reflux.
- I am not sure my baby is eating the right amount / gaining the right amount of weight.
- I think my baby has an allergy / intolerance.
- I think my baby has constipation / problems with stools.
- I am not sure which brand / type of baby milk is best.
- I think something is wrong with my baby as she is upset / fussy / dissatisfied / does not want to stick to a routine.
- I am not sure if my baby needs a different milk, now that she is heading towards introduction of solids.

The level of interest identified does not correlate exactly to the number of conversations included with each theme in the report. For example, reflux and weight gain occurred as sub-topic within many of the themes, so the level of interest was higher than might be reflected in the number of conversations.
3.3 I think my baby has reflux

Key ideas arising in conversations within this theme

Along with concerns around allergy, feeding amounts and weight gain, this was the most commonly discussed issue within the parenting forums. On one of the websites, a topic on silent reflux had been viewed more than 16,000 times in the 14 months since postings began, although there were fewer than a dozen actual postings into the conversation by members. Many parents across the websites expressed concern that their babies were vomiting frequently, or that they appeared to be in pain around feeding times, and that they were concerned that these might be signs of reflux or silent reflux. Reflux is a condition whereby a baby regurgitates swallowed food that has reached the stomach due to immaturity of muscular valve at end of the oesophagus. In silent reflux there is no vomiting or other obvious symptoms, but babies can appear in pain while feeding.

Parents were uncertain about whether spitting up milk or discomfort when feeding were normal for babies, or whether these were signs of something more serious that needed medical intervention. Parents were concerned that vomiting meant that their babies might not be eating enough. Parents also expressed concern that baby feeding was a highly stressful and unpleasant time for both parent and baby. A lack of sleep for both baby and parent was cited in many postings. In some cases, feeding worries seemed to be part of more serious depression and anxiety on the part of mother. Parents looked for a variety of reasons to explain vomiting and apparent discomfort such as back-arching, including reflux. Where such concerns led to other explanations such as allergy or intolerance, this is generally discussed elsewhere in this report. Parents looked for a variety of solutions to their worries, including reflux. Parents worried about serious health conditions if reflux was not dealt with, including permanent damage to the oesophagus and Sandifer’s Syndrome.

The use of medication including for infants under 6 months of age was significant within this theme. Parents frequently reported a cycle of drug use for infants that went from reflux, to medication for reflux, to constipation from medication for reflux, to addition of medication for constipation or switch to another medication. Specialist formulas might also have been involved in this process, including those marketed for reflux. These milks are thicker and the suggestion is that thicker milk is more likely to stay in the stomach. Some of the medicines used to tackle reflux symptoms (or side effects from medications given for reflux) are via prescription (Omeprazole, Ranitidine or domperidone) while others (Gaviscon, gripe water or glycerine suppositories) are not. No-one suggested that there might be health risks associated with self-medication with specialist formula alongside medication such as Gaviscon.

It is not clear from searching conversations on the chat forums how or whether diagnoses of reflux were made by health professionals in most instances. In one instance a mother reports
that a private paediatrician diagnoses reflux and lactose intolerance in an hour and prescribes specialist formula along with Ranitidine and domperidone to a baby under 6 months old. Tongue tie arose as an issue in this topic and in other topics.

Feeding practices in conversations within this theme

There was some evidence from the chat forum conversations that parental concerns led to examples of or recommendations for feeding practices out of step with best practice guidelines, in particular: giving liquids/foods to infants under 6 months of age to tackle constipation resulting from anti-reflux medication including sugar, fruit juice and water and introduction of soya milk for infants under 6 months of age. The use of anti-reflux formulas was generally regarded as useful but not perfect in tackling reflux although one forum member recommends a brand or type of formula even over breast milk. The most common feeding recommendation was the addition of a variety of medications to formula to tackle the condition. There was little discussion among members that formula was fundamentally problematic in terms of upsetting the digestion of babies. It was more a matter of finding the right formula and then letting babies’ systems mature enough to handle milk, perhaps with the support of medication.

Information sources in conversations within this theme

A mix of information sources was mentioned within conversations where members were exploring issues around reflux. Healthcare professionals were reported to offer a mix of advice, but none that directly contradicted government feeding advice. However, there were recommendations from health professionals for practices around which there is little, no or conflicting evidence, including the use of anti-reflux formulas, variations in the usefulness of particular formula brands, and the use of various medications for reflux (and the side effects of medications used to tackle reflux) including Infant Gaviscon, Ranitidine, domperidone, Omeprazole, and carobel. One forum member suggested she had worked in a special care baby unit and that it was clear to her that Aptamil or Cow & Gate were better than SMA which was most likely to cause reflux.

Healthcare professionals were sometimes seen as helpful but less likely to be interested unless babies were combining reflux with lack of weight gain. Parents did not consider that reflux was only problematic if allied to poor weight gain. Healthcare professionals were most likely to be seen as supportive if they enabled access to medication and took parents’ concerns seriously.

Peers, mainly in the form of forum members, were also involved as information sources, and offered a mix of advice. Some forum members were very supportive of anti-reflux milks, while
others felt that various medications were a better solution. One member recommended another online parenting forum that specialises in reflux.

This research is unable to identify what final choices chat forum members did make, and it was clear that many were taking a considered view, collecting advice from a range of sources.

**Company influence in conversations within this theme**

There was a significant level of discussion around formula brands in this topic. The merits of various anti-reflux formulas were debated. Aptamil was reported most frequently as a beneficial formula including that health professionals suggest this. SMA was most likely to be linked to vomiting and upset stomach. There was considerable acceptance that anti-reflux formulas had a role to play in tackling vomiting and feeding pain that was seen to be indicative of reflux. There was considerable acceptance that the thickness of anti-reflux formulas meant that formula was ‘more likely to stay in babies’ stomachs’. Although such formulas were linked to constipation, this was accepted as preferable to reflux, and manageable, perhaps, with medication.

**SAMPLE CONVERSATIONS**

1) **Mother of 2 week old baby who is being sick a lot is given advice by chat forum members about various formulas and medications for reflux**

**Summary:** The mother of a 2 week old baby sought advice about what milk to give her baby who, she said, was being sick a lot and then wanting to feed more often, which was stressful and tiring for her. The baby was already on one brand of reflux milk (SMA) which had seemed to work but then seemed to stop working. The mother noted that thicker formula is recommended to tackle vomiting.

**Feeding practice:** Suggestion that, if babies are being held while feeding, they should not be upset; recommended use of soya formula for baby under 6 months.

**Information source:** Family and peers (chat forum members); health professionals (GP, health visitor, A&E).

**Company influence:** Brands mentioned with request for brand recommendations; suggestion that particular formulas or brands make a difference to reflux.

- I would see your GP and/or health visitor. There may be more you should be doing than simply changing milks. If it is reflux, I’d want to make sure that’s getting treated. That said, it’s worth just remembering that formula (all of them) can be rough on tummies and it just might be a period of adjustment until his digestive system catches up with itself. Feeding frequently and being sick occasionally (but not all the time) are also just things new babies do, and may not be indicative of a
problem, however, he shouldn't seem uncomfortable or upset assuming you're holding him. Any baby will likely cry when not held at that age, but when in your arms, they shouldn't seem uncomfortable or in pain, so it's something to have a chat with your GP about. But you might consider trying a different formula to see if that helps in the meantime. I've heard SMA is the one most likely to cause tummy issues. You might try Aptamil or Cow and Gate (they're the same, one's just a lot more money) or Hipp (which is supposed to be easier on tummies than some of the others). We actually used Hipp ourselves and found it gave our daughter reflux (that was a week of hell) and once we switched back to Cow and Gate, it disappeared and we never had it again. So there are instances when simply changing brands can make a huge difference. I'd consider that, along with getting some advice from your GP so you can get a proper diagnosis and treatment.

- I have also heard that of all the brands SMA is the one babies struggle with..no idea why though I've never used it myself. I would talk to your gp but in the meantime you could give aptamil or c&g a try to see if it agrees with your lo more...both are pretty much the same as far as I know and I used both with no probs with both my babies but ofc everyone is different and what works for one won't work for another.

- My lo is exactly like yours. I didn't try any of the anti reflux milks but I tried the regular and comfort milks. My LB got on best with hipp organic milk, even over comfort milks.

- My daughter was forever constipated on SMA, wish I'd tried other formulas, my boy has had no problems with Hipp. Cow and gate and Aptamil are made by the same company so I'd imagine they'd be similar.

- I have a reflux baby and we've used Aptamil since I stopped breast feeding and have had no problems. My LO was medicated with Infant Gaviscon...I second the advice of seeing your GP/HV.

- I had the same issue with my LO. I had to switch to soy formula because regular formula gave her bad gas and reflux. Now that she has been on soy for 3 months she is a lot better. Maybe worth a try.

- My LO had tummy issues with SMA Gold so we switched to Aptimal Comfort which made a big difference. He was also diagnosed with reflux and was prescribed Infant Gaviscon which really helped him along. I'd see your GP and describe the symptoms in case they agree with reflux and can give you something to help.

- We started on SMA Gold but also found LO just was not a happy baby so switched to Aptimal and he's was a different baby and also started taking a lot more where as we were struggling to get 2oz of SMA down him.

- Cow and gate was appallingly bad for my twins colic and reflux. Dreadful.

- My LO was medicated for his reflux. Switched to Hipp and could immediately drop 2/3 meds, it's a little thicker than Aptamil/c and g which seemed to help. I'd def speak to gp though x

- We use cow and gate and have had no problems. Having worked in scbu - SMA is the most likely to make babies sick/reflux, and Aptamil and cow and gate are pretty much the same milk by the same manufacturers, just Aptamil is more expensive! X
● (Original poster) I’ve spoken to the GP today, I took him in with me and explained the situation and she was utterly useless. She sent me away with infant gaviscon to use with the Staydown. If this doesn’t work then I’m going to switch to Aptamil comfort and go from there.

● We use c&g comfort with gaviscon :-) hope the gaviscon works for you!

● My gp was useless too...

● Too many doctors are utterly useless when it comes to reflux. I was bloody furious with the whole experience. The only ones which were really exceptional were the ones we saw in the ER when he choked.

● If there is constipation, the Aptamil Comfort is labelled as being good for constipation. It is, or at least should be, because it’s designed to be easier to digest. If you see an improvement in stools and reflux, that’s definitely a good thing. If it’s much better but not quite there yet, then it might be best to try something extensively hydrolized (usually labelled hypoallergenic) as that protein is broken down and easiest to digest for most babies. The Aptamil AR formula is good for the reflux as the carobel can definitely help that, but if a baby is prone to constipation, it can very well be that the constipation will be worse as the formula is thicker and the carobel itself is harder to digest. It’s a lot of playing about, and add in the fact that every formula change can upset the tummy as well while the GI system adjusts and you might want to bash your head against the wall a few times. It’s all really tough but it’s well worth it in the end if you can find what works for your kiddo. It gets much easier once you have a better sense of direction.

2) Mother very depressed by baby’s difficult feeding

Summary: A mother of an 11 week old wants advice because she thinks her baby son has silent reflux. She lists symptoms such as gagging, pulling faces, watery sick, constipation, screaming and frequent waking. Members advise anti-reflux formulas as they are thicker and stay in the stomach, as well as medications. They suggest health professionals are not interested in offering support unless babies are losing weight. Mother replies by suggesting she has a good health visitor but that the difficulties are really not helping her precarious mental health.

Feeding practice: Medications (Gaviscon, Colief, Ranitidine, gripe water).

Information source: Peers (chat forum members); health professionals (health visitors and GPs); internet and social media (not specified)

Company influence: Anti-reflux formulas mentioned.

● The problem is that their stomach contents can slosh up their throats which can be very painful due to the acid. There’s lots of advice available online, but don’t expect your hv or doctor to take it very seriously, they’re generally not bothered unless the baby is losing weight. Try the formula that is specifically for reflux (it’s thicker so theoretically should stay in the stomach better), raise the head end of
anywhere baby sleeps, keep baby upright as much as possible and get some support as it can be very
draining for you and baby! There are medications available that may help, but your doctor will probably
be reluctant to prescribe them. Infant Gaviscon is a thickener that helps some people, and the others are
designed to reduce the amount of acid produced so that even if baby refluxes it shouldn't hurt as much.

● (Original poster) What concerns me about the baby gaviscon is it can cause constipation and he
struggles to go as it is! I'm going to call my HV first thing Tuesday morning and talk it through with her,
she's quite good so I'm hoping she'll listen. His sleeping during the night is fine. He was on colief and
I've stopped it as I'm sure that's what was causing the constipation and he's pooped today so that's
confirmed it for me. I have PND and severe anxiety problems, they started when baby was around a
week old so I'm struggling as it is. I've spent most of the day crying and am exhausted to the point of
shivering and having a thumping headache. I just don't know what to do. I've had hubby home as it's
the weekend but if he's like this during the week I have no idea how I'm going to cope :'(

● Oh gosh you poor thing!! *hugs*. Sounds like you're having a hell of a time! I struggled with PND
myself so I know how hopeless things seem under that cloud. Gaviscon is quite bad for constipation;
that's why I stopped using it for my boy. It's worth getting ranitidine if you can, that helps some babies.
But the main thing is to accept that he has this problem! It won't go away over night, and there will be
hard days ahead, but you have to try to remind you self of your love for your lo and that these days will
pass!!

● (Original poster) Thank you. I'm trying the best I can and it's all I can do. Do you know much about
gripe water? I've been told to use it now we're not using colief and I've researched online. They say it
can help babies that are refluxy as the sodium bicarbonate settles the acid in their stomachs and can
help ease wind and unsettled tummy. Other things I've read says it has E numbers in so I'm unsure

● My 11 week old has had exactly the same symptoms as yours for the last few weeks. As I didn't know
what the problem was I tried Infacol and Colief but neither really worked. Then I read about reflux
and realised that was the problem. I was hesitant about going to the docs but after she brought up another
load of sick and spent the morning screaming in pain I decided enough was enough. So I went last
week and the doctor prescribed Infant Gaviscon…I've read quite a few posts on here about Reflux and
Infant Gaviscon and know that it doesn't work for all babies but for the sake of your sanity I would urge
you to try it. My little girl has improved so much over the last few days, it's almost like having a new
baby.

● Reflux takes over your life and makes you feel like a rubbish mum - even lovely friends and family
don't really understand how upsetting it is not to be able to feed your baby 'normally' without distress
but I can honestly say you are your LO's world, he adores you however rubbish you feel about yourself
and you are doing your very best for him and he will feel safe and cared for with you no matter what.
You need to see a specialist if your GP is unwilling to help - Gaviscon caused more problems than it
solved for us and Ranitidine was very effective at relieving our LO's silent reflux discomfort - he stopped
refusing feeds immediately and we've never looked back. Now he's 10 months he's almost out grown it.
With the right help things will improve. We were housebound for a couple of months as feeds were so
difficult and looking back it was one of the worst times ever but honestly things do get better - as your
LO self mobilises and is weaned reflux starts to fade into the background. Our HV was very good and
3) Mother asks if Ranitidine works and members’ replies include suggestions that it cured their own or their dog’s heartburn, so it should.

Summary: A mother of an infant asked if Ranitidine worked as she was reluctant to switch from Gaviscon which had partly worked. She did not specify reflux. Members offer various suggestions including branded anti-reflux milk and medications, as well as sharing personal experiences of the drug.

Information source: Peers (chat forum members); health professionals (paediatrician).

Company influence: Brand (Cow & Gate); type of milk (anti-reflux).

● Ranitidine is amazing ! I suffer with chronic heartburn and it works within minutes

● My dog is on a course of it along with antibiotics and he has certainly perked up. Hasn’t been any side effects and his stomach has stopped making those churning/gurgling sounds.

● My daughter had awful silent reflux and how her feeds used to be sound exactly the same as your son. We tried ranitidine too and it didn’t work. I reached breaking point and sobbed on the doctor, asking for Omeprazole as it was the only thing to sort my nephew’s silent reflux out.

● It made my boys reflux even worse we put him on cow and gate anti reflux milk and haven’t looked back since! Hes been on it since 6 weeks and I cant even remember the last time he threw up after a bottle! An absolute god send!

● It will work for some but not for others. All you can do is give it a try for about a week and see what happens. My son had silent reflux that was finally diagnosed at 7 weeks. The paediatrician prescribed ranitidine and it worked fine for a few months but then as he grew bigger it stopped working. We then tried Domoeridone but he had a bad reaction to it. The next medicine he had was Omeprazole. We were given the liquid version to put into his milk and the difference in him was amazing.

4) Website moderator (health visitor) advises mother who may be confusing reflux and lactose intolerance

Summary: Mother with infant under 6 months has just had doctor accept that her son has silent reflux. He has recommended Infant Gaviscon but mother is wondering whether to switch to lactose-free formula. A website moderator who is a health visitor advises her to get further information about reflux and lactose intolerance.

Feeding practice: Medication (Infant Gaviscon); change of formula.
Information source: Health professionals (website moderator who is a health visitor).

Company influence: Brand (SMA); type of formula (lactose-free).

• (Original poster) Hi my little boy has silent reflux and the doctor has only just listened to me after 3 months! My little boy now has infant gaviscon in his bottles but I was wondering does anyone else give their reflux baby SMA lactose free with gaviscon? Thank you.

• How are you? Has the Gaviscon helped at all or have you been back to the doctor again? Sometimes it does take a few weeks for the improvement to show. If constipation is a problem this can be treated, or there are other medications for reflux that could be prescribed. Did you find the Lactose free formula was helping? Lactose intolerance is not very common in young babies...if it helped it could be that your baby is actually intolerant of cows milk and a hypoallergenic formula may be needed. You GP could prescribe this...and there is also a stool test to check for lactose intolerance. There is more information here... Baby Reflux symptoms and treatment - Netmums

5) Mother tries anti-reflux formula for 4 week old baby which causes painful constipation. Peers discuss usefulness of such formulas, suppositories and other medication.

Summary: A 4 week old baby has become painfully constipated since starting on anti-reflux formula. Baby and mother are upset and mother wonders if she should switch back to regular formula or if the baby will get used to anti-reflux. Members have mixed views, with one suggesting that such anti-reflux formulas do not work but that glycerine suppositories are good for constipation, and another suggesting formula does work but that Gaviscon causes constipation.

Feeding practice: Medication (Infant Gaviscon; glycerine suppositories).

Information source: Peers (forum members); Health professionals (health visitor).

Company influence: Brand (Aptamil); type of formula (Comfort; anti-reflux).

• Hiya! i give same formula to my 7wks daughter and yes she is often constipated !so I got glycerin suppositories from chemist that I use every 2 days and they work very good! but I might switch formula tomorrow. And by the way it does not really works on colic for her so what's the point? Just too expensive !

• When my eldest was around 6 weeks old she developed silent reflux and after trying various remedies/treatments (including Gaviscon, which made her really constipated) we started using Aptamil Comfort formula at the recommendation of my health visitor. It worked a treat. Perhaps it might be worth giving it a go? You can buy it at the supermarket and it might be easier on the tummy than the anti-reflux formulas.
3.4 I am not sure my baby is eating the right amount / gaining the right amount of weight

Key ideas arising in conversations within this theme

Many parents across the websites expressed concern that their babies were not gaining the right amount of weight and/or that their babies were being compared unfavourably against weight for age percentiles by health professionals. Some parents were independently concerned about their babies’ weight gain but more often reported concern arising after comment from a health professional. There was confusion over the exact expectations and role of weight for age percentiles. Many parents were also unclear about how much and how often babies should be fed and how rigidly recommendations needed to be adhered to. They wondered whether there were maximum daily amounts of formula that must be adhered to. Members also wondered what type of feeding schedules were most beneficial for babies, and reported that they had received conflicting advice about this from health professionals. Parents regularly posted contributions that listed exact details of feeding schedules and amounts, asking if their babies were ‘normal’. Parents worried about amounts consumed, even when their babies seemed otherwise happy and healthy.

There was a frequently expressed belief that formula feeding led to longer sleep and greater weight gain than breastfeeding. There was some suggestion that some members believed that formula-fed babies should be fed on demand, while others were not so certain of this. Members had a mix of beliefs around offering complementary foods before 6 months and whether it supported weight gain or not.

Parents looked for a variety of reasons to explain why their babies did not seem to be gaining weight or where they seemed to refuse to eat according to ‘recommended’ amounts. Where such concerns led to other possible explanations such as reflux, allergy or intolerance, this is generally discussed elsewhere in this report. Parents looked for a variety of solutions to their worries including to specialist formula, in particular hungry milk, particular brands, alterations of feeding practices including shifting away from breastfeeding to formula, early weaning, ‘dream feeding’ (giving infants a feed while they are asleep), ‘force feeding’ (parents’ words) and diagnosis of tongue tie.

Feeding practices in conversations within this theme

There was some evidence from the chat forum conversations that parental concerns led to examples of or recommendations for feeding practices out of step with best practice guidelines, in particular: early introduction of solids; and the introduction of, or a shift to, formula from breastfeeding, including for infants under 6 months of age. The use of formulas was generally regarded as useful but not perfect in increasing weight gain. The use of milks
marketed for ‘hungry’ babies was discussed and members tended to have a negative view about these, although this was not universal. There was also evidence of feeding practices, including dream feeding and ‘force feeding’ to increase food consumption.

Information sources in conversations within this theme

A mix of information sources was mentioned within conversations where members were exploring issues around weight gain and formula amounts. Healthcare professionals were reported to offer a mix of advice including some that directly contradicted government feeding advice, such as the early introduction of complementary foods and the use of formula to promote weight gain in breastfed infants under 6 months. There were also recommendations from health professionals for the use of ‘hungry baby’ formula, even though there is no public health guidance that these milks are beneficial. Health professionals were reported to give confusing and contradictory information about weight for age percentile charts and feeding schedules and amounts. Some members were highly critical in particular of health visitors, who were reported sometimes to offer unhelpful, unsupportive advice based on personal opinions.

Peers, mainly in the form of chat forum members, were also involved as information sources, and offered a mix of advice. The opinions around hungry baby milk and follow-on milk were variable and there was considerable support for feeding on demand, although this was not universal. There was a mix of opinions about early complementary feeding to support weight gain.

Company influence in conversations within this theme

There was some discussion around formula brands in this topic, but the greater focus was on type of formula, in particular hungry baby milk. There was considerable support for formula as an aid to better weight gain for baby compared with breastfeeding. Formula was generally seen to promote less frequent waking in the night.
SAMPLE CONVERSATIONS

1) Mother wonders why her 12 week old baby who has always fed well suddenly screams for ages before taking her bottle.

**Summary:** Mother wants to know if any members have any idea why her 12 week old is suddenly crying for up to an hour before she will take her bottle. Members share their experiences including worries over amounts, erratic feeding and sleeping. Some members post several times.

**Feeding practice:** Health visitor recommended addition of solids earlier than official recommendations; dream feeding.

**Information source:** Peers and family (forum members; mother, in-laws); health professionals (health visitor).

**Company influence:** Brand (Aptamil).

- Hi there, hope you don't mind me butting in but I have a very similar problem I was about to post. I breastfed my son for 12 weeks then we put him on Aptamil 1....and he has been on that since... The last month when you first give him his bottle, he shakes his head, waves his arms around, kicks his legs and really whiny, this goes on for a few minutes till he gets going... Sometimes he will drink 6oz no problems, other time as little as 1oz. He is hungry and showing the signs of wanting a feed. If we distract him with noisy toys when he is fussy he will get going on it. We have to dream feed him now to make sure he is getting enough for the day. Being now almost 18 weeks I know he should be on more, although I don't think he is just full up as sometimes after sleeping through the night he still will only have just 1oz for his morning bottle. It is a bit of a nightmare as when he doesn't feed well he doesn't nap well. I have to keep offering the bottle throughout the day now to make sure that he has the right amount in the 24 hours. He has the mother care bottles and first teats. Does anyone have any ideas on what it could be that's making him like this?

- My baby is exactly the same... Was drinking 5-6oz bottles at 6 weeks and now she's 12 weeks she's still on the same amount, but sometimes will only have 3oz...even after a 10hour sleep!! This new fight against feeding is sooo draining, if only I knew what the difference is? But while she's kicking off about the bottle, if you take it away and sit her up she's all smiles!

- Yes it is soooo draining. Just now he needed a fed, fought against it but once he started dropping off fed a good couple of ozs! Just feels like a constant battle. Just like your lo, all smiles whenever not feeding. Really wish I knew what was wrong too. I dare not feed in public now as if being fussy it just looks really bad. Do you think maybe they are just bored of milk??

- I know what you mean! It's a total embarrassment trying to feed infront of people, just looks like I haven't got a clue what I'm doing! I asked my health visitor today about it maybe due to the fact that she wants more, like baby rice etc and she said to try it, and just persevere with the feeds alongside. So funny that you say that your LO will drink more when falling asleep, my girl fights and fights unless she's dead tired and then I can get a good 6-7oz in her!
● I wouldn't worry so much about making sure she drank the right amount if I knew she was having something else. Might take some of the worry off. I know what you mean about tricking...my LO will cry and cry, if u put a dummy in for a few seconds and then once she settles down swap it for the bottle, she'll drink a few ounces, then once she starts crying, we have to do it over again. But I can't go through this when we're out lol

● My dd has been bottle fed since birth, now almost 16weeks and we have similar problems during 2 out of 5 of her bottles. Wriggly, crying from the start for the first third and then she settles. I think, in her case, its when she is too tired. I just perservere knowing she will eventually settle. She is better if she has a distraction to look at. I think the general advice is not to wean early unless you absolutely have to, dd is only on 5 bottles of 6 oz a day and we throw away a good 6-10oz of that! But she's growing etc so am trying not to be worried - hard when ds always drained his bottles!

● Hi - baby is just taking what she needs if she is happy enough in herself. i am having a similar problem with my 11 wk old son. every 3 hours i am giving him a bottle and the most he will take is 3 oz. he starts off well, but at about 2 oz he starts to cry, pull his legs up, try to push the bottle away, and then i spend abut another 45 minutes trying to get another oz into him. when i take the bottle away he is back to his happy cheery smiley self. once maybe twice in 24 hours i will get 5 - 7 oz into him if im lucky. i have been considering trying him with some baby rice as im worried he is not having enough to eat, but i cant make him take anymore day or night. but i think he is still to young so i am going to see my HV for some advice. i am trying not to get to upset about it or frustrated but im coming to the end of my tether with worry.maybe they are bored of milk?!! LOL

● My LO goes to bed at 7.30 and I know she's quite happy to sleep through to 6, but I have to wake her up at 10 to get her to drink maybe 3oz to make up what she hadn't drunk during the day, and bless her, she realllly doesn't want to wake up...end up feeling terrible cos I've just disturbed my babies sleep to basically force feed her! I too am fed up with being told to persevere...it's so so hard!! We both just end up getting upset. Spoke with my HV again today, she said to definitely try baby rice, just one or 2 spoons a day and feeds on top whatever she will drink. So fingers crossed I'll try that tomorrow. Although today wasn't so bad, only 2 out of the 4 feeds today were a complete battle, but just to make it worse and to make me feel a complete failure, my mum fed her at lunch time today, all smiles and drank the whole 6oz!!! Unbelievable!

● I'm glad to have found this post. My lo is behaving exactly like your lo'ss about having a bottle feed. All was going really well but now at 16 wks he has started fussing and it seems to be worse in the morning. I too have began to dream feed to make sure he gets enough & sleeps through and yesterday I tried to extend the time between bottles longer than our usual 3 hours so I knew he was hungry. I agree with a pp it is like he is suddenly bored of milk and interested in everything else that is going on. I have tried to distract him but it is hit n miss as to if that works. I know what you mean about looking like you haven't a clue and feeling hopeless but I keep telling myself it's a phase. Just like when he grows up & is a toddler and having tantrums. I will be pulling my hair out then too. They hopefully will grow out of it.
2) Mother of 9 week old says health visitors giving conflicting advice about frequency of feeds.

Summary: Mother is concerned about volume of feed and feeding pattern and reports conflicting advice from health visitors.

Feeding practice: Health visitors recommended different feed schedules; dream feeding.

Information source: Peers (forum members); health professionals (health visitor).

- My baby is 9 weeks old today. I recently put her on a routine as advised by health visitor, feeding every 3 hours in the day, dream feed at 10 and she has one night feed now. This is 7 feeds a day, although the dream feed is usually only a couple of ounces, the others are around 5oz (always make up 6 and about 1oz left) and she will sometimes take only 3 or 4 on one or her other feeds. Now been told I'm over feeding by another health visitor which is giving her wind and slight constipation and they've said she should only be on 5 feeds a day now so to put her on 4 hourly routine in day and drop the dream feed. If I drop that feed she will wake twice in the night anyway so I don't see the point. But could I be giving her digestive pain and constipation? I feel like such a bad mother

- I feed my son 6oz every 3 hours, he has around 36oz every 24 hours. He doesn't usually wake in the night for a bottle but sometimes he will so has extra on that occasion, He isn't overweight he is on the 50th centile & always followed the same line since birth. He is 12 weeks on Monday & has been on 6oz 3 hourly since he was about 5 weeks old, I don't think your over feeding at all. All hv have different opinions which I don't thinks right as surely they sh...
needs the extra calories. Hungry baby milk can also make them constipated so maybe it's making her tummy sore. I would go back to first milk. Offer more if she drains her bottles and make up bigger ones going forward. No need to restrict her to a certain amount.

- This happened to me but with cow and gate hungry milk! The first day all he done was cry when he isn't a crying baby.. so by the evening I put him back on first milk and he was fine the following day. I heard hungry milk cause the ingredient it can be a bit harsh on there tummy if there not ready for it xx

- hi i am a new mum too of twins , born at 36 weeks, they are now 5 weeks old , now weigh just over 7lbs each, they are currently on sma gold and feeding every 2 1/2 to 3 hours through day and night and they are very restless ,and seem to be hungry all the time , we have tried giving them 5ozs but will still only manage the 4ozs , was thinking of switching them to sma white , any advice ?

- This is normal behaviour and sounds like a growth spurt. Little and often is good, you don’t want to stretch their tiny tummies. SMA white/hungry baby is intended only for older babies who are downing full (8oz+) bottles and they aren't yet old enough for weaning, not for small babies who really do need to feed little and often. If they are only just 7lb then their tummies will be about the size of a ping pong ball so frequent feeding is normal. All hungry baby milk will do is sit in their tummies putting them off taking feeds that they need to take to grow.

4) Mother of 16 week old baby doing mixed formula and breastfeeding is worried about her baby’s weight gain.

Summary: A 16 week old baby is not maintaining weight for age percentiles, and health professionals have recommended early weaning. The baby’s mother is not sure if this is the best advice. The baby has also been prescribed a special high-calorie formula. Peers suggest further health investigations including looking for tongue tie and allergies. Moderator supports mother in avoiding weaning.

Feeding practice: Health visitors recommend early weaning with support from GP; lack of clarity over weaning foods.

Information source: Peers (forum members, moderator); health professionals (health visitor, GP, paediatrician); government information (red books – weight for age percentile charts)

Company influence: Brand (Infatrini).

- So...LO is still not gaining weight sufficiently to maintain a centile, and has gone from 25th to 0.4. He's 16 weeks and I was horrified to be told by the HV to wean him early (starting from now) to get him
to gain weight. We have literally tried everything. He's mix fed, mainly BF. I wasn't happy to accept this, so booked an appointment with the GP the following day...who said "see how the weaning goes and then come back to us". I said that I was under the impression that the first foods to try to wean with were lower calorie than milk, and that I was not happy about the advice. The GP responded "I'd never thought about it, but yes, fruit and vegetable purees would have less calories". Anyway, I demanded to be referred as I said that I wanted to make sure there were no underlying issues prior to weaning, and I also asked for higher calorie formula for topping up, as we just use Aptamil. The GP had never heard of it, but spoke to paeds and okayed it with them and has given us Infatrini. Now, given this, I assume that weaning can be delayed until we see what his weight gain is in two week's time...I'm not keen to wean due to him still having the tongue reflex where he spits everything out, not sitting upright independently and he just doesn't seem ready. However, when we do start to wean, are there foods and meals which are healthy but high calorie? I.e. Not ones where we just add butter to everything! Anyone else have similar experiences/stories? Did their LO gain when weaned or did this not help at all? Do you think I'm wise to try to delay weaning (only until about five/six months, as I don't feel he's quite ready yet, and I'd like him to gain a bit more before we start introducing foods which may take up valuable space where milkies could be).

● I don't want to worry or alarm you unnecessarily, but I would urge you to get a paed's appointment asap. Your LO has dropped a lot of weight. If you can't get an appointment quickly, go to A&E and get referred that way.

● The OP hasn't said her baby has dropped any weight, just that they have dropped centiles slow weight gain - is that right OP? I would also ask for a referral to a paed since your baby has crossed two centile lines though, especially as your GP doesn't seem exactly knowledgable in this area.

● (Original poster) He has dropped that in fourteen weeks not in a short space of time (sorry, I should have mentioned that!)...We have a pead referral, so should be seeing them in a few weeks. he is gaining, but slowly, hence a drop in centiles. He was 25th at birth, regained his birth weight in five days (so good gain then!), but then dropped to ninth, then second, then 0.4 since birth weight was regained. He was 6lb 9oz when born, so not a huge baby, but not small either...

● Was he checked for a tongue-tie? Presume you're already doing switch feeding, breast compressions etc? Hopefully the new formula will help and the paed can give you some answers. I agree that there doesn't seem much point in weaning early as you can only give low calorie foods until 6 months anyway.

● How is he generally? DS had weight gain issues due to allergies. It's a common side effect. He had other symptoms though, poor appetite, farty, poor sleeper, reflux, green poo and was quite mucousy sounding. We were advised to wean early but didn't as I'm a coeliac and didn't want to take the risk. Pleased you have a pead appointment. Our pead has been very helpful.

● (Original poster) Generally he is ok...meeting his milestones, jolly chap (when not hungry or tired!), etc. he is quite windy as well, but I guess the paed will look into any causes.

● (Forum moderator) wow, you have worked hard at challenging and making sure you got the best help. Weaning early onto fruit 'n' veg is not a good idea for a baby who is not gaining weight. It's well-
established that early weaning can displace milk and for a small baby, this is clearly a poor strategy. Infatrini is well-established as a higher-density formula for those babies who need it. It's not surprising the GP had not come across it, as it's not all that common outside hospital situations. Can't remember if you have said, but an appointment with the dietitian either in the community or at the hospital outpatients, would help. He/she can help you select calorie dense solids for when the time comes. They include banana, avocado, dried fruits (though not great for teeth), toast and peanut butter (assuming no allergies).

● (Original poster)  It is such a stress isn't it...damn those red books! Invented to stress out parents

5) Mother wants reassurance about amounts and frequency of feeds.

Summary: A baby has changed her feeding pattern, wanting more frequent feeds in lesser amounts. Mother feels this is probably OK but would like reassurance as doctor has told her fewer, larger feeds are better. Members reassure her that following the baby’s lead is a good idea.

Feeding practice: Uncertainty over frequency of feeding and amounts.

Information source: Peers (forum members); health professionals (paediatrician).

● (Original poster) We made a rather abrupt change to combi feeding recently & now 99.9% formula feeding. Baby was taking between 150-180ml bottles every 3 hrs, but a few days ago she started waking up hungry in the middle of the night and took the full 180ml and seemed like she wanted more. Yesterday after seeing our pediatrician we decided to change the formula as it was making her quite constipated. She took the bottle okay and drank around 150ml. Work up at night and drank another 150ml. But since morning she’s been wanting around 100-120ml every less than 2 hours. I have no issue with giving her smaller but more frequent bottles, but wondering if it's okay to do that? In the back of my mind I feel that it's fine but I guess I want reassurance. Pediatrician was more for spacing out feeds and giving bigger bottles...

● Yes just go with what lo wants. Dd sometimes does this usually only for a day or 2, think its when she’s having a growth spurt. Then goes back to normal.

● (Original poster) Thank you I did wonder if it was a growth spurt as it's our first since we started giving her formula. Other aspects of how she's behaving confirmed that it's a growth spurt as well. Thanks!

● My lo just did this for her 3 month growth spurt...ate smaller, more frequent feeds but after almost a week of this, she is back to her normal. I always take lead :-)

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6) A mother of a baby older than 4 months wonders if hungry milk will help her baby sleep at night.

**Summary:** Mother says her son used to sleep at night and ate regularly in the day. But he now gets distracted in the daytime and feeds less, and so wants to feed at night. Mother wonders if she just needs to shift his feeding schedule again, or if hungry baby milk might work.

**Feeding practice:** Uncertainty over frequency of feeding and amounts; use of special formula (hungry milk).

**Information source:** Peers (forum members).

**Company influence:** Type of formula (hungry milk).

- **Hungry milk or not?** I’m really struggling with feeding lo at the moment, ever since he was 4 months old. Basically before that he was a great eater, perhaps too hungry! He would eat every 2 to 3 hours from 120mks to 180 mls sometimes a bit more added on at the end too. He would go to bed between 7 and 9 and sleep through until 6ish, then he’d feed and go back to sleep for another 2 hours. This lasted and sleeping through actually got better, 7 til 7 without stirring, until 16 weeks. Bring on the regression from hell! He’s so distracted when I try to feed him now, chews the teat wastes half the bottle maybe only drinks 90 to 100 mls. He will easily go 5 to 6 hours without even grizzling for a bottle so sometimes I even forget, I know it’s terrible but when he is perfectly happy I have to think to myself, when is he due a feed? The main problem now of course is that he just isn’t getting enough food during the day so come the night time I’m up every 2 to 3 hours playing catch up trying to get the calories down him as he can’t sleep through anymore, he’s too hungry. Could I try hungry milk at 7 which is his bedtime? Or should I try and get him back on track eating more during the day?

- No, I would just make more of an effort during the day to have him eating regularly. If he isn’t having that much during the day, the last thing you want is to discourage him from eating during the night because he does probably need those calories, whatever time it is that he gets them. I’d just try to make sure he eats whenever he wants it during the day. I’m assuming you aren’t weaning yet? That can sometimes decrease daytime feeds meaning they make up for them at night. Also, you might just need to slog through with the night feeds as it could be he just needs them. My daughter had 1-2 night feeds a night most nights until 9 months old. Then she just didn’t want another (she still wakes 3-4 times a night at 14 months, but no interest in food). As you can see, night waking isn’t always about food and filling him up with hungry milk might not do anything but give him a tummy ache. Any chance he’s teething though? What you describe, being funny about feeds, taking little amounts, chewing the teat, waking and eating little amounts through the night are very characteristic of teething.

- (Original poster) Thank you for your reply, I think that’s great advice. Today we have done just that, even if he’s not been demanding feeds I’ve offered him food at least every 3 hours and his intake has improved dramatically! Yay! Just have to get used to him not really crying for food anymore. We’ll see if it helps him sleeping at all tonight. And yes, I think some days he looks like he’s teething.
7) Mother of baby under 6 months says from birth her son has been fussy and wanting to feed too frequently.

**Summary:** Mother has been working to get her young baby on a less frequent feeding schedule as she does not want to feed him every hour. Baby is upset by this. Mother wonders if she should feed more frequently but then worries about giving too much. Forum members recommend feeding on demand for young babies.

**Feeding practice:** Uncertainty over frequency of feeding and amounts; formula linked to better weight gain than breastfeeding; force feeding.

**Information source:** Peers (forum members); health professionals (health visitor).

**Company influence:** Type of formula (hungry baby milk).

- Cutting a VERY long story short..I have a very fussy baby who has had a Terribly erratic feeding schedule since day one but currently he is asking for a feed almost constant but i would say most of the time he's asking every 2 hours. I've been making him wait 3 hours because this is my first baby and I was lead to believe by my friends, family and health visitor that the "norm" for a baby of his age is every 3 hours. I now feel cruel as I can clearly see he is hungry way before 3 hours, and as a result I have an hour of screaming that is inconsolable. I would much rather feed him 1-2oz every 2 hours if that's what satisfies him but would this mean I'm over feeding him? I'm at the end of my tether because his inconsolable crying is getting too much He doesn't wind either which makes feeding difficult as I often wonder if he is still hungry from having wind and that could be why sometimes just an hour later he wants more? Anyway my main question is: can I feed him 2oz every 2 hours safely?

- I feed on demand there tummies are so small a newborn will not over eat if he takes 2oz every two hours I would give it. my little one is 16 weeks and eats 3-4 oz every 3-4 hours normally but somedays will take 2oz every 2 hours(I was breastfeeding but had supply issues so had to switch i look at it as breastfed babies are fed on demand so why should she be fed differently because she now gets formula)

- I did 2 oz every 2 hours, at first with mine. Newborns have tiny stomachs that can't hold a lot. As your LO grows, he'll start taking more and spacing his feedings out more. That's what happened with mine. I'm sure there are some that do take more each feeding and can wait a while longer right from the start, but not all babies are the same. And you can't really overfeed them. If they aren't hungry, they won't eat - at least that's how mine is.

- I think if ur sure ur LO is hungry , then u should just feed him. I thought babies fed roughly every 2 hours in the first month anyways? Coz their stomach is so small. Ur LO might be going thru a growth spurt and need to feed more anyways. I don't really think you can over feed a baby. My LO is 16 weeks and I feed her around 4oz every 3 hours during the day.

- Our boys are almost the same age and although he's combi fed at the moment and will want feeding sooner if he's had more breastmilk than formula in a feed, sometimes he'll go three hours and other
times he's starving after 2-2.5. I just feed him when he seems hungry hun. We've also been giving him
infacol before his feeds for about a week now which has helped him with bringing up wind.

● You should just feed him when he is hungry end of, mine was just the same at that age even now it
varies between a 2-4 hours it is totally normal. If he is hungry he is not being over fed just satisfied.
Take him weekly to be weighed by the HV to put your mind at rest for the time being, it’s what they are
there for.

● My LO is almost 3 months and still eats every 2-3 hours. She started only taking 2-3...now she takes
4-6...sounds normal/okay to me! She's also a fairly crabby/colicky/refluxy baby so I would rather feed
her small amounts more often.

● (Original poster) Sometimes I can't get more than 1oz down him though and that's after managing to
wind him?? It can be a real fight too get 2oz down him. And sometimes he's asking for a feed after an
hour! If he was breastfed then I could understand but he's solely on formula. I just want too make sure
I'm doing the right thing for him.

8) Mother of 7 week old wonders if she should switch to hungry baby milk to increase
weight gain.

Summary: Mother says health visitor has suggested her baby is not gaining enough weight or
eating enough. Health visitor has suggested switching to hungry milk. Forum members
suggest a mix of solutions including a particular brand, but note that hungry milk and follow-on
are marketing ploys.

Feeding practice: Uncertainty over frequency of feeding and amounts.

Information source: Peers (forum members); health professionals (health visitor).

Company influence: Brands (Aptamil, Cow & Gate); type of formula (hungry milk, follow-on
formula).

● hungry milk has the same calories as first milk but is harder to digest. I wouldn't give it to a 7 week old
baby as it is more suited to an older baby. Could you give less milk more often e.g. add in an extra
bottle but make all of them a bit smaller?

● My son was much more settled when I switched from C&G to Aptamil when he was about 11 weeks
old. He was having a lot of milk before then and absolutely piling weight on. He went up one centile at
about seven weeks. He's now part way between his birth centile and the next one up and has been like
that for months. I think Hungry Baby and Follow On milks are marketing ploys. Stage 1 milk provides
everything a healthy baby needs until they are ready to switch to cows' milk. I only know this because I
had the same problem and the same question as you, and I spent ages researching it.

● (Original poster) Thanks everyone… I though hv was a bit pushy about it and wasn't answering my
questions. That's why I asked.
9) Mother of 10 week old on hungry milk wants to know if the milk is a good idea.

Summary: Mother feels baby is happier, more settled and sleeps longer on hungry milk but health visitor recommends switching back to infant formula with maximum two weeks of use of hungry milk. Forum members are very critical of health visitor and support hungry milk.

Feeding practice: Uncertainty over frequency of feeding and amounts.

Information source: Peers (forum members); health professionals (health visitor).

Company influence: Type of formula (hungry baby).

- You know your daughter better than anyone and quite frankly ***** what the Health visitor says!!! My son is now nearly 2 1/2 and he was exactly the same as we swapped him to hungry milk too and we kept him on it and its fine to! if your HV says its not she is talking bull!!

- I am no health visitor hun but I really can't understand why she would say kep changing her or only keep her on it for such a short time when it obviously suits her so well. My daughter was a big baby 10 lbs 4 oz and we switched her to hungry baby formula at about 10 weeks as well. My health visitor knew and never recommended that we swap n change. She was a much happier healthier baby for it. If it was my baby I would nod n smile at the hv and do what I knew was working and right for my little one. Your oldest was fine on it too. I really believe in this case mommy knows best xxx

- My health visitor told me off for swapping to hungry milk but my girl was the same as yours( i put her on it at 5 weeks). As soon as she changed she was fine. I hate the health visitors, they haven't contributed anything helpful, they just seem to criticise and you see a different one every time- I think they just give their own opinion rather than anything based on fact. At the end of the day you know your girl better than anyone and you do what works for you. Very easy for health visitor to visit for 5 mins and say you should give her other milk and leave you to deal with the screaming baby- go with your instincts- mum always knows best!!! Xx
3.5 I think my baby has an allergy / intolerance

Key ideas arising in conversations within this theme

Along with concerns around reflux, feeding amounts and weight gain, this was the most commonly discussed issue within the parenting forums. In particular, there was interest in cow’s milk protein intolerance (CMPI) and cow’s milk protein allergy (CMPA), with slight interest in lactose intolerance. Many parents across the websites suggested either that their babies had been diagnosed with CMPA or CMPI, or that they were concerned that their babies were suffering from such conditions due to symptoms such as facial rashes and stomach upsets (vomiting, loose poos, constipation). Parents reported poor weight gain, loss of sleep for baby and parent, and considerable upset. There was frequently worry that babies would not be getting the right nutrition they needed due to allergy, and uncertainty over how allergy would impact on the introduction of solids.

The issue of how diagnoses of allergy or intolerance were made is not clear. In some instances it is unclear how parents came to be using specialist milks for their babies and whether these were prescribed or not. Parents report a lack of clarity around diagnosis and a lack of information about the origin and impacts (long and short-term) of allergy diagnoses, in particular around cow’s milk protein and the distinction between intolerance and allergy. Some parents appeared to have made diagnoses themselves. Eczema and facial or neck rashes were seen as a key sign of allergy, and were distinguished from reflux which was not particularly associated with rashes. There was uncertainty about whether allergy could be present if babies were gaining weight.

There was uncertainty over the role of specialist milks for babies under 6 months suffering from allergy. Specialist allergy formulas were often seen as useful, but parents reported that babies sometimes did not react well to these, in particular that they produced upset stomachs and smelly poos. Parents reported that such formulas were costly and that they worried that specialist CMPI and CMPA formulas in particular tasted and smelled very bad. When problems occurred, parents were sometimes unsure about what to do next, whether this suggested that allergy was not a problem or that another allergy might be the issue, or whether it was just the baby’s system getting used to the new formula. There was some use of medication within the group expressing concern over allergy. Medications were similar to those used in reflux, as reflux was sometimes seen as a symptom of allergy or intolerance.

Feeding practices in conversations within this theme

There was some evidence that concerns in this area led to feeding practices that go against government and best practice guidelines. In particular, there were recommendations for: early weaning, the addition of Nesquik or food flavouring to food for babies under 6 months (and one
year), and giving babies under 6 months soya formula including for CMPA. Parents wanted more information about when to add solids to the diet and how or whether to introduce cow's milk into the diet. Comfort milks were generally seen as beneficial to babies and 'gentle on their stomachs', and there was some confusion about Comfort milks and lactose-free milks and their use for suspected lactose intolerance.

**Information sources in conversations within this theme**

Healthcare professionals were reported to offer a mix of advice about allergy that could be confusing to parents. Parents reported contradictory advice about what was wrong with their baby from different health professionals. Health professionals were reported to move slowly sometimes in responding to baby and parent upset. However, they were also reported to diagnose allergy and intolerance without full explanation or clear tests. The main contradiction to government feeding advice from health professionals was to offer soya formula in cases of CMPA. It also seemed that parents had been recommended particular formulas by health professionals, and it is unclear how these professionals selected between brands that offer similar formulas.

Peers, mainly in the form of forum members, were also involved as information sources, and offered a mix of advice. Most forum members were very supportive of allergy milks for both real or perceived allergy and intolerance. However, members did suggest that other issues might be at play such as reflux or colic and that it was not always easy to tell exactly which allergy or intolerance was the issue. Many members suggested that there could be problems with specialist milks, for example in terms of upsetting baby’s stomach and baby just not liking the generally poor taste (of CMPI or CMPA milks). There was a mix of ideas about why this occurred and how it could best be tackled.

**Company influence in conversations within this theme**

There was a significant level of discussion around formula brands in this topic. The merits of various brands of allergy formulas were debated in discussions directly related to the allergic condition and the best formula for it. There was considerable acceptance that allergy formulas had a role to play, particularly in tackling CMPI and CMPA. Parents were aware of brands of milks before diagnosis in some instances, and were already speaking about using particular products.
SAMPLE CONVERSATIONS

1) Mother of 8 week old on lactose-free milk wants baby to sleep longer.

**Summary:** Mother says baby has been on lactose-free milk for six weeks. Baby feeds every 3 or 4 hours in the day but suddenly seems to want a bottle every two hours at night. She is exhausted and wants advice. Forum member suggests that CMPA might be the problem as lactose intolerance is rare.

**Feeding practice:** Uncertainty over frequency of feeding and amounts; uncertainty over how long babies sleep between feeds.

**Information source:** Peers (forum members, social media CMPA support groups); health professionals (doctor, health visitor, paediatrician, dietitian).

**Company influence:** Brand (Nutricia); type of formula (lactose-free, Neocate)

- Hi ladies has anyone got any advice? My baby boy is nearly 8 weeks and is on lactose free milk and during the day can go three-four hours between feeds but at night he wants a bottle every 2! It's really sudden he is now 12lb so a big boy but he seems hungry all of the time it seems to only be in the last week as he was going 4 hourly in the night before! He has on average around 4 ounces even though I offer him 5 so didn't really finish his bottles ever! But he obviously needs more cause in the night he is so hungry. I'm a bit at wits end now the no sleep during the night is starting to really get to me and really don't know how I can change things around so he has more milk and still gets what he needs. He too is shattered for the day so needs to sleep to catch up! Thank you! Xxx

- (Original poster)  Also what I was mainly meant to ask is how long you should leave it to try them again with lactose? I hear they grow out of it but don't know whether it's still too soon? His been on this for about 6 weeks so not sure if it's still too soon? Xx

- Can I ask why you are using lactose free milk? Only primary lactose intolerance with babies is very rare and far more serious than people think. It is possible for babies to get a secondary lactose intolerance after a bug, but this is unlikely at such a young age and should only last a few weeks. It's far more likely that, if it's a reaction to milk, it's the protein rather than the lactose in which case lactose free won't help. My son has cows milk protein allergy and was very unsettled at night because he had tummy ache and reflux, therefore wanted to feed for comfort more. He was put on to neocate. Have a google of the difference, or there's some good cmpa facebook groups for advice and support. GPs can be very unsure of the difference because we seem to talk about lactose intolerance more because adults can develop it. If it is a cows milk protein allergy then it may be a matter of months, or years until he grows out of it. Push for a referral to a pead and dietician as they will be far more knowledgeable than a gp or hv and can support weaning and reintroducing. Hope this helps? Feel free to pm if you need a bit more advice. It's a bit daunting when lo's on such a restrictive diet.
2) Mother wonders if baby has CMPA.

**Summary:** Baby is windy and sickly after feeding and has loose poo. GP has suggested reflux and recommended various medications that have not improved the situation. Mother now wonders if baby has CMPA and asks forum members for advice. Forum members offer a range of advice including that the mother should check CMPA symptoms on internet. If they match baby’s, members suggest getting GP to prescribe specialist milk.

**Feeding practice:** Medication (Omeprazole, Ranitidine, Gaviscon, domperidone); uncertainty over weaning practice and CMPA; uncertainty over difference between CMPI and CMPA.

**Information source:** Peers (forum members); health professionals (GP, paediatrician, hospital); internet.

**Company influence:** Brand (Nutricia, Mead Johnson); type of formula (Neocate, Nutramigen AA, Nutramigen Lipil 2).

- Could someone please explain the symptoms and also previous experience with cmpa..My little boy is sickly after every bottle, always has wind no matter what I do and even being on Dr Brown bottles. He has VERY lose stools that it very often leaks out of his nappies..My GP suggested reflux so therefore I've tried gaviscon, ranitadine, domperidone but all three barely done anything so therefore I decided to stop them. Like I just don't know what to do anymore as now he is becoming a little unsettled and upset now. Any help please xx

- My lg is 8 months old. I breastfed for first 6 months of her life. From about 1 week old she would vomit, have tummy pains, wind that we never seemed to be able to get up, watery poo that ALWAYS leaked, struggled with sleep and just generally unsettled. Drs kept telling me reflux but I knew that meds never made any difference. Eventually diagnosed with CMPA and tuned into a different baby after 2 days of no dairy. She didn't get diagnosed till 6 months, now on dairy free diet and a dairy free formula prescribed from drs x

- (Original poster) How did you manage to get her diagnosed? By her gp or a paediatric doctor

- I visited the GP lots of times about symptoms and was always told reflux. So I went to GP with list of symptoms and explained that I thought it was dairy allergy, she agreed. At the time I was still bf so cut dairy out of both our diets and symptoms gone so then returned in a week and gp then referred to paediatrician. Since then GP now prescribes her a formula x

- (Original poster) Oh wow! Think I am going to have to pester my GP he barely naps either.. His just becoming miserable and he doesn't wanna b.. HHIS 4 months old.. what formula does she have now x

- If GP is unsure just pester them to let you trial the formula. It's expensive (£15 for a small tin) so obviously they don't like to just give it out if they can help it. Don't think you can just buy it though had to be prescribed. My daughter was a bad sleeper and always seemed to have tummy pains and now sleeps an has normal poo lol. I'd get a list of CMPA symptoms off the Internet and show dr which ones your son has x

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• (Original poster) Yeah I think I am gonna do that Tuesday the frustrating thing is one GP said it was reflux and the other said oh no I don't think it's reflux but keep him on the meds cause the other doctor prescribed them!! I'm gonna pester him I've searched it and he seems to have a majority of the symptoms! X

• My son was diagnosed with CMPA at 8 weeks, just to add on to above symptoms (all of which my son had) - he also had very loose nappies about 8/9 times a day. Runny and watery or frothy. He also had prickly heat type rash on his back and belly. He was put on Nutramigen AA milk and his symptoms disappeared the same day. I hope you get things sorted soon x

• Hi, girls. My boy was also diagnosed with cmpa when he was 6 months old. We also took him many many times to the GP because we knew this wasn't normal, and they just kept telling us that he had reflux, eczema, diarrhoea, etc. One day, we took him to A&E and he was finally diagnosed. I breastfeed him, so I'm on a lactose-free diet. Also, it seems like our boy is finally growing out of it. I've had a few products with lactose this month and he's not reacting to them at all. He's 11 months old.

3) Mother of 8 week old wants advice on anti-reflux milk and forum member suggests investigating possible CMPA.

Summary: Baby has been on SMA Staydown since he was two weeks old due to reflux. However, the milk constipates him and mother wants to know if Aptamil anti-reflux would be better. Forum members suggest Aptamil is good and one says to check out CMPA as many doctors overlook this.

Feeding practice: Medication (laxatives).

Information source: Peers (forum members); health professionals (doctor).

Company influence: Brand (Aptamil; SMA); type of formula (Pepti, Comfort, Staydown); price.

• I used aptimil anti-reflux after sma staydown stopped working for my little boy. I have used it for months and am just weaning him back onto normal milk. Never had a problem with constipation. Best move we made.

• Aptamil anti reflux works very well for us x

• (Original poster) is it easy to make?.xx

• The SMA Stay Down formula is thickened with natural corn starch. The Aptamil AR formula is thickened (thickens in the tummy more than in the bottle) with carob flour. IF your kiddo can digest it, it's great for reflux as it really is much harder to bring up. however, my kiddo was always having constipation issues and the carob definitely did not agree with him. He got very constipated and needed to be put on laxatives. My kiddo still struggles with starches in general. He has cow milk protein intolerance though so the only thing that really helped was putting him on Aptamil Pepti formula. I guess you only know if you try though, that's the downside to reflux! Has cmpi been ruled out in your
case? There is also Aptamil Omneo Comfort which has natural starches (so it is slightly thicker than the standard) but also has partially broken down cow milk protein which makes it an easier-to-digest formula. It says on the package that it’s for babies with constipation issues. I used this for baby’s reflux because it had a mix of both (though the starches don’t thicken exactly the same way as the carob) and this worked great but he needed the protein to be more broken down eventually. My kiddo cannot digest the cow milk protein which is why he was always constipated. He was also very windy and had bad reflux issues. Just mentioning it in case, as too many doctors are overlooking this.

4) Mother of 5 week old is switching from breastfeeding to formula but baby seems very poorly on it.

Summary: Mother says baby screams and vomits after drinking formula. Baby is also gassy and has flaky patches on his skin. Mother not sure what to do. Forum members suggest talking to health professionals and investigating possibility of reflux. One member suggests it might be a good idea to try a different formula as baby might be reacting to it, while another suggests it is not necessarily a formula reaction.

Feeding practice: Medication (eczema cream).

Information source: Peers (forum members); health professionals (doctor, health visitor, hospital).

Company influence: Brand (Cow & Gate); type of formula (anti-reflux).

- Allergy to formula? Reflux? Colic? Please help. Hi girls I have a 5 week old son and he is breastfed, I’ve been trying to get him into formula because I no longer want to breastfeed, anyway I tried about a week ago, just have bottles, and he got so unsettled and kept projectile vomiting, screaming etc.. Anyway he was so unsettled I went back to breast, yesterday he couldn’t seem to get much milk from me So I gave him formula, he then become so unsettled constant crying for hours after, being sick, kept swallowing... And then I didn’t give him formula until this evening at 7 because he kept pulling of my breast then going back on etc... Anyway after he drank this bottle, he has come out in a little rash, I always thought it was his baby acne as this has happened a few times after Formula.. But it just Inflames then goes back down, he's also very gassy, he has flaky patches of skin around his forehead really runny poos (after formula). all signs of milk allergy, but then he also cries from 5-8 every evening without fail and tenses up his whole body sometimes, signs of colic! Plus he swallows and spits up a lot, signs of reflux. I just don’t know what to do it's driving me mad! this seems to come up worse after he has had formula..

- It definitely looks like he has some sort of reaction to the powder. If you are really concerned (I would be too), ring your HV and ask for a home visit or take him to the doctor and see what options you can try! They may recommend changing the powder make and using the reflux one. Invest in some anti colic medium flow bottles, they’re fab! If he’s not able to keep his milk down, he isn’t getting the nourishment he needs to grow and that puts a massive strain on the baby as they’re then always hungry.
We have had the same problem and were convinced it was a reaction to the powder but 4 different doctors and numerous health visitors have said it’s not. Had a trip to a&e by ambulance one night we were that concerned! Started using dr browns bottles at about 4 weeks and the colic symptoms reduced almost completely within about 2 days and started sleeping through the night from 5 weeks. Switched to cow and gate anti reflux milk at about 7 weeks and his reflux seems to be much better. Health visitor gave us 3 different eczema creams for the rash which seems to help too. He’s now 9 weeks old and is a much happier baby.

5) Mother of 6 week old thinks baby might be allergic to SMA formula and wonders if baby needs soya formula.

Summary: Mother says baby’s poo is dark green and really smelly. Baby’s ears are also a bit puffy and her stomach is occasionally upset. Mother cannot get an appointment with doctor straight away and asks for advice about trying soya formula. Forum members suggest speaking to a health professional to see if it is a reaction to the formula or perhaps a cow’s milk intolerance, and mention various formula brands and types.

Feeding practice: Giving baby under 6 months soya formula; medication (Gaviscon).

Information source: Peers (forum members); health professionals (GP, dietitian, health visitor, hospital).

Company influence: Brand (Cow & Gate, SMA, Infasoy, Aptamil).

you should speak to a health professional... a lot of mothers i no have said they wont recommend it (sma) as there baby s had bad colic,have you tried any other one? my friends little one had cow and gate and there was no improvement so then she tried (infasoy) soya and baby was content with it ! some baby ahve milk intolarence for the first year then are ok to have milk, hers was having milk at just after a year old. good luck what ever you decide but would recomend speaking with profetional ie hv maybe?

My first 2 kids used sma gold no probs apart from a bit of constipation. My 3rd however had bad green poo and refluxed often so changed to cow and gate comfort which helped wind and made poo yellow. Was still refluxing so dr gave gaviscon. Didn't help. He 11 weeks old now and symptoms are wavering off apart from the explosive poos. Definitly go to drs and see what they recommend before changing to soya.

I had the same thing, spoke to my HV yesterday who just said to monitor it and if baby doesn't seem unwell or unsettled the probably not the milk. I'm giving my LG a week and if still the same im going back to my gp. Xx

I could have written that post myself, my baby was awful on sma gold, he didn't have the rash but exactly same as your LO. I changed milk and bottles to dr browns. Been on that almost 5 weeks. Like having a new baby. I could hear the rumbling of gas in his tummy. My HV told me he had colic. I totally ignored her and changed formula and bottles. FUNNily enough no colic symptoms! X
3.6 I think my baby has constipation / problems with stools

Key ideas arising in conversations within this theme

This was a quite commonly discussed issue within the parenting forums. Many parents across the websites expressed concern that their babies were unsettled around their pooing habits. There was concern over loose poo, smell / colour of poo, frequency of pooing, and constipation. There was uncertainty over just what was right in terms of pooing habits – for example, uncertainty over how common constipation was among babies, with some people reporting that this was very common. Parents reported upset babies and a lack of sleep as a result of pooing issues.

In response to problems, a mix of advice and solutions were offered. Comfort milk was seen as a useful product for sensitive stomachs. Some members suggested that pooing problems might be caused by various allergies or intolerances and that these were worth investigating with health professionals. There was considerable discussion of brands, with Aptamil being seen as the best and SMA the worst in terms of lessening the likelihood of constipation. Various medications were suggested including laxative suppositories and medications similar to those suggested for reflux. There was a considerable number of solutions suggested that go against best-practice feeding guidelines, including suggestions from health professionals.

Feeding practices in conversations within this theme

There was some evidence from the chat forum conversations that parental concerns led to examples of or recommendations for feeding practices out of step with best practice guidelines, in particular: offering infants under 6 months of age water, juice, sugar, or tea; and diluting infant formula with extra water. There were reports that health professionals recommended such practices. One member reported that offering orange juice was useful as it got the baby used to the taste of orange which was the flavour of various medications. There was a considerable amount of discussion and disagreement over whether it was appropriate to give water to babies, including those under 6 months. Comfort milk was regularly recommended.

Information sources in conversations within this theme

A mix of information sources was mentioned within conversations where members were exploring issues around pooing. Healthcare professionals were reported to offer a mix of advice including some that directly contradicted government feeding advice, such as offering babies under 6 months substances other than formula including sugar, juices and tea. Health professionals were reported to advise against such practices in some instances. It was reported that a health professional recommended Comfort formula without diagnosis of lactose intolerance.

Peers, mainly in the form of forum members, were also involved as information sources, and offered a mix of advice. Forum members were keen to suggest one brand over another. There were quite a number of suggestions for feeding practices that were out of step with
government guidelines. Members regularly recommended the use of medications. Members recommended viewing information on other websites.

This research is unable to identify what final choices chat forum members did make, and it was clear that many were taking a considered view, collecting advice from a range of sources. Not all posts to conversations have been copied, so conversational strands do not necessarily reflect the full range of opinions expressed by members.

**Company influence in conversations within this theme**

There was considerable discussion around formula brands and types in this topic. Certain brands were seen as more likely to promote more comfortable or normal pooing habits, and specialist formulas such as Comfort milks were seen as useful in some instances.

**SAMPLE CONVERSATIONS**

1) **Mother of 8 week old wants advice on best formula to tackle constipation.**

**Summary:** Mother has tried different brands, including Aptamil as she has heard it is the best. However, her baby is still constipated. Forum members suggest specialist formulas including Comfort milk and Nutramigen for babies with lactose intolerance. One member suggests giving orange juice with brown sugar to tackle constipation. Members also note that changing formulas can upset babies as it takes time to adjust to new formulas.

**Feeding practice:** Giving a baby under 6 months sugar and orange juice; medication (for constipation, but type of medicine not specified); uncertainty over what colour of poo is normal.

**Information source:** Peers (forum members); health professionals (GP, health visitor).

**Company influence:** Brands (Aptamil, SMA, Nutramigen); type of formula (Comfort; lactose intolerance); price.

- **My lb is 8 weeks and I've just changed his formula from SMA gold to Aptamil, as on SMA gold he had terrible constipation, with his soil being firm and green and with him seeming to be in huge discomfort. Through forums I've read mainly that Aptamil is the best one to try. I only put my lb on it yesterday, no soils just yet but he seems to be bringing up a lot of the milk after feeds. Is this due to the change in formula? Will the constipation get better if I leave him on it for a while longer? I just need one that'll work for him as I can't bare I see him in so much discomfort any more.**

- **Hi, I used Aptamil for 4 weeks for my little boy & it never agreed with him at all, we changed to cow & gate normal formula & although he was ok & possibly a little better on it he was still struggling to poo & was still squirming around with wind / belly aches etc. Changed to cow & gate comfort milk, & now he poos around twice a day & is much better, sleeping 10+ hours every night & is chilled in the day. Were as before he used to literally scream my house down in pain from his belly the poor little thing. My advice would be to go on to a comfort milk. You could trial it, it won't do any harm at all. Comfort milk**
you do need to give a few days to work though.

- Green poos often mean a tummy ache. You need to keep to one formula and not keep changing or the constipation will not remedy itself. Is he pulling his knees up? Does he well?

- (Original poster) He’s been on SMA for 6 weeks as breast fed to start with but I couldn’t keep him on SMA as it certainly isn’t working well with him. He does bring his knees up and it’s obvious he’s got stomach ache and trouble pooping! So actamil was the most recommended one which he started on yesterday but has still yet to have soiled, not sure how long it takes to make a difference. This was recommended by the health visitor I saw yesterday, the last thing I want to be doing is changing his formula a lot x

- (Original poster) Thank you, I’ll have to try him with comfort then. Just feel so helpless and want to find one that works for him asap! Xx

- Our little one was crying shortly after feed when he was a few weeks old. He also had a little bit of blood in his stools and a lot of baby acne. One evening not knowing what to do we took him to the hospital. The paediatrician gave us a milk called ‘Nutramigen’ it is for baby with Lactose intolerance. The milk contains lactose but it is broken in very small pieces. It worked a treat! And we have been using it since. You can buy it in Pharmacy over the counter although it is expensive (£15 to £18 a small box) but if it works your GP can prescribe it. Worth asking your pharmacist for advise and maybe give a try. I think there are also drop you can add in the milk to decrease the level of lactose in the milk.

- He may need special milk.. I wouldn’t keep changing milk without advice though because difference in milks can cause tummy upset and it takes a few days for the milk change over to settle.. For constipation you can try a bit of orange squeezed in a bottle with brown sugar in it.. Don’t give this all the time just as a one off for bad constipation. There are also regular medications that can help babies poo. I would contact your health visitor or gp for advice.

2) Mother of 5 week old wants advice about constipated baby who is very upset and not sleeping well.

Summary: Mother has tried Infacol which did not help baby and health visitor now suggests Colief. Mother is reluctant to use this as it needs to be in bottle for half an hour and she is feeding on demand. Mother wonders if she should try Comfort milk. Forum members suggest various solutions for constipation, including medication and specialist formulas. Members note the difference between Comfort formula with reduced lactose and lactose-free formulas.

Feeding practice: Medication (Infacol, Colief).

Information source: Peers (forum members); health professionals (health visitor).

Company influence: Brand (Aptamil SMA); type of formula (Comfort, lactose-free); price.
● I use both comfort and colief, since my ds was about 4-5wks (he's 9wks now). Try comfort milk (note it might make baby's poop green due to reduced lactose) offer water, I tend to offer a bit twice a day (he usually takes 20ml if that) which also helps him poop. One more thing, don't buy colief, pop to ur gp and get it on prescription (bottle for 7ml is about £12, so abit pricy).

● We had a similar thing. Have you changed to dr brown bottles? They reduce wind dramatically! However we in the end had to switch to lactose free milk and it completely sorted his pain out. He was crying/she waking mostly in the evenings and in the mornings too with stomach pain - you could really see he was in loads of pain so I tried optimal lactose free and he has been fine ever since! No more crying in pain anymore! He still has horrid wind and to be honest Infacol didn't work for us really either! We did try comfort milk and colief and after a week it went back to the way it was again hence trying lactose free. Try Infacol half a syringe before the feed and half during it. And if she can't get her wind up lay her on her back, run her stomach in circular clockwise motions for a minute then wind her again over the shoulder her sitting up. Nine times out of ten you'll get a burp up that way! Hope that Helps! Xx

● Hi there. My lil us 8 weeks. We had same problems as you. We tried colief for a week at 3 weeks old and found it such a mess about. We switched to comfort milk which is technically the same thing, has reduced lactose as easier to digest. This also sorted out lb's toilet troubles as well. He been much happier and content now hes on it but it did take nearly 2 weeks to notice the difference. Although still have the odd few wobbles just think he a bit of a unsettled baby as we hae slight problems with SR x xx

● I had exactly same thing with my DS, at exactly same age! We went on to sma comfort and dr brown bottles and I can say I now have the happiest baby! He changed within a week from a crying baby, who could settle to a little angel. my husband said he would pay twice the price of the normal sma because the results were so good!

3) Mother of 13 day old wants advice about constipation.

Summary: Mother says baby is constantly screaming and trying to poo but cannot. Forum members recommend specialist milks, medications and feeding baby juices, tea and sugar. Some suggest health professionals have recommended these practices.

Feeding practice: Feeding baby under 6 months sugar, juices (prune, orange), tea (redbush) and water; medicines (gripe water, Infacol, Colief).

Information source: Health professionals (GP, health visitor, midwife).

Company influence: Brands (Aptamil, SMA, Cow & Gate; HIPP Organic); type of formula (Comfort, hungry).

● my LO suffered from this, the doctor recommended lots of fluid, we even tired prune juice but little one wasn't keen! Try and get as much water in her as possible but if you are concerned ring the doctor or HV
• (Original poster) I was told baby wasn't allowed water and juice at a such a young age...?

• I used to give my daughter water inbetween feeds it never did her any harm, she was born in the summer and just needed a drink not food, shes almost 4 now and a very healthy happy little girl! I think its a good thing, we have drinks aswell as food, and they do once you start weaning why should it be any different for babies just on milk? As long as they still have ther feeds and arnt filling up on the water i dont see the problem!

• (Original poster) My LG is 13 days old has always eaten lots 5oz every 2 hours but last 2 days she has gone off of food and barely drinking 2oz, and simply not settling at all... Rubbing her belly soothes her until you stop. She drinks sma milk but also was having sma hungry baby too which we stopped giving her due to midwife advice...I heard we could give her prune juice or gripe water... Just looking for advice until I can get thru to a mw or hv

• Hi i went to my docs today and her said try ounce/two of water with a little of brown sugar or if that dosent work try a squeeze of orange juice. My doc did say not to mention to the hv about the sugar water as the hv will worry abotu babys teeth but as they dont have any they will be ok. Also what does ur hv say about your lil one having 5ounces every 2 hours is it ok. My daughter is having 3ounces every 2/3 hours. Every were i read there ment to go 4 hours but my daughter wont last tht long

• I can't believe your gp told you not to tell your hv. Its not about their teeth it's about causing your child to develop a sweet tooth. Better to have oj in water.

• I havent used it at the moment im just offerin 1/2 ounce of water and that sees to be going o.t everyoen i speak to says it works well brown sugar and water but im not sure if the water stops working i will offer her some orange juice

• Water with tiny bit ov brown suger worked for my little girl n she’s 5 weeks today, she suffered from 2 weeks. It may be cause it using 2 different milks the hungry baby is meant to be thicker. My little one feeds every 2hrs aswell n hv said cause she’s constipated she wouldn’t recommend hungry baby as it makes it worse n that she’s too little to be on hungry baby at 2 weeks x

• (Original poster) Is this pure orange u can get in cartons? Or actually from a orange?

• Actually from an orange, just a teaspoon of it squeezed straight from the fruit into 2oz cooled boil water that's how I've always done it x

• your little one at 13 days old is too young for gripe water (it's from one month old, although i don't really see the harm in giving it early to be honest but I did myself follow the instructions on the box & just gave from one month old) You can give infacol though which is safe from birth x Hungry baby formula at 13 days is really not a good idea. SMA is also notorious for causing constipation. I think it reasonable to consider changing her food. My daughter was constipated on Aptamil (at 21 days). She was miserable and clearly in discomfort. I changed her formula to Aptamil Comfort, which is specifically for constipation. There was improvement in a day, and by day 2 she was clearly sorted out. When the "Comfort" runs out, I've got a box of Hipp to feed her. It seems to have the same ingredients, as do other brands "comfort" formulae. Prune juice might have an effect, but it won't solve the problem.
● My son (8wks) was similar, I moved him onto cow and gate comfort milk with colief and he’s been fab! He goes between 2-3 hours for feeds taking 2-4 oz. I was worried about his milk intake but my hv said it’s fine Becoz weight x2 = oz’s of milk.

● I had the same problem with my little one and so I tried her on rio boos tea. A couple of dunks in warm water (in a feeding bottle) might do the trick. Good luck.

● (Original poster) I only used sma hungry baby as was recommended to use it by a midwife when I told her how much she was feeding abd the amount... I was then informed on the next visit by another mw about all the problems it has been causing and how my LG shudnt b on it anyway. So I stopped instantly giving it to her. Is sma really bad for constipation? If so what would people recommend I give her? Obviously I dnt want to see her in this pain

● My little girls on hipp organic byt i hear cow and gate is good. I wouldnt change from sma until u have spoke to ur midwife and see what she says as changing between milks could be the reason why shes constipated.

4) Mother wonders if Comfort milk will help with baby’s colic and constipation.

Summary: Mother wonders if changing from the infant formula she currently uses to Cow & Gate Comfort Milk will help her baby. Forum members suggest constipation is common and note water might help. Mother says health visitor says water will not help.

Feeding practice: Feeding baby under 6 months water; medications (Infacol, Dentinox, suppositories).

Information source: Peers (forum members); family (mother); health professionals (GP, health visitor, feeding support).

Company influence: Brands (Cow & Gate); type of formula (Comfort).

• Have you tried infacol or dentinox colic drops? Or anti colic bottles? A baby can go up to 10 days without pooping, believe it or not. Constipation is extremely common. Try giving him water after a feed as the formula can be quite thick for their little bellies. If the constipation persists for five days or more, I’d consult your gp, as babies can experience a lot of discomfort trying to go if they get too clogged up, poor things..!

• (Original poster) He’s been on infacol over a week now. He has expressed breast milk and formula milk but poops every other day and only once. Always crying in pain and pulling his knees up with extremely bad wind all the time. I know something’s up with him and it’s horrible :) my mum said about water but I spoke to Hv and feeding support and both said no don’t do it it doesn't help them at all xx
● I was strictly advised to give him water as babies do get dehydrated and sometimes need the extra fluid because formula is very dehydrating. And the water will help soften the formula in his tummy so he doesn’t clog up with too much solid poop.

5) Mother of 2 week old seeks advice for constipated baby.

Summary: Mother says baby is unsettled and trying to poo but is not able to do so. Forum members recommend water, orange juice, or specialist formula and suggest health visitor support for this.

Feeding practice: Feeding baby under 6 months water or juice (orange).

Information source: Health professionals (health visitor).

Company influence: Type of formula (Comfort, hungry).

● Hi, try an ounce of cooled boiled water. If that doesn’t work try an ounce of cooled boiled water with a teaspoon of freshly squeezed orange in, hv told me to do that when my son was 3 weeks old & it cleared him out so he wasn’t constipated any more. X

● My daughter is suffering with the same and I have been guided by the health visitor to offer cooled boiled water with fresh orange squeezed in too it and to change to comfort formula milk.
3.7 I am not sure which brand / type of baby milk is best

Key ideas arising in conversations within this theme

This was a commonly discussed issue within the parenting forums. Many parents across the websites expressed interest in what other forum members had to recommend in terms of formula brands. Members also discussed that making up formula feeds could be inconvenient if health and safety guidelines were followed and wondered if ready-made formulas were any good.

There was some awareness expressed that formulas were very similar in nutritional composition due to government requirements, but many members felt that the little differences in ingredients were what could make the difference to an individual baby being satisfied and happy. Parents felt that, much as adults have different tastes in drinks, so must babies. There was the sense that parents wanted their babies to have the best feeding experience possible and that the right brand and type of milk could be found to provide this. One member referred to wanting the ‘textbook feed’.

Aptamil was the most frequently discussed brand and had the most positive comments. Many members suggested that health professionals had recommended the formula, repeating versions of Aptamil’s advertising by suggesting it is ‘the closest of formulas to breast milk’. This was a strong finding in the previous report (Mitchell, 2009). Aptamil was not the only brand to becommented upon in terms of advertising messages. One member mentioned that SMA’s packaging seemed to suggest it was for when baby was ‘moving on from breastfeeding’. However, SMA had the most negative comments across all websites with parents reporting negative comments by other parents and health professionals. Frustration was expressed around marketing restrictions placed on companies’ marketing formula and the emphasis on breastfeeding as the best option. There were very few posts about goats’ milk and this milk seemed to be generally regarded as of high quality and closer to breast milk than cow’s milk based formulas.

Ready-made formulas were the subject of some posts and were generally regarded as costly but of high quality and some people expressed ideas that the UHT heat treatment helped break down ingredients in ready-to-feed formula to make them ‘easier to digest’.

Feeding practices in conversations within this theme

There was some evidence from the chat forum conversations that parental concerns led to examples of or recommendations for feeding practices out of step with best practice guidelines. However, the use of formulas was generally regarded as an acceptable and positive choice and finding the right type for each baby was important.

Information sources in conversations within this theme

Healthcare professionals were reported to offer a mix of advice including some about brand recommendations. Health professionals were reported to recommend types of formulas, for
example, Comfort milk, without any clear reason for doing so. Some members were highly critical of health visitors who were seen to offer unhelpful, unsupportive advice based on personal opinions. Peers, mainly in the form of forum members, were also involved as information sources, and offered a mix of advice. There was considerable support for the idea that it was worth searching for the right formula for your individual baby.

Company influence in conversations within this theme

There was considerable discussion around formula brands across all parent discussion forums. Parents showed awareness of company advertising messages and brand images. They reported health professionals making brand recommendations that reflected awareness of brand messages. There was awareness of price, and of regulations around formula promotion.

SAMPLE CONVERSATIONS

1) Mother of 6 week old breastfed baby asks for recommendations on formula brands.

Summary: Mother intends to return to work and will introduce formula top-ups. Forum members recommend a mix of brands but particularly report health professionals advising Aptamil and noting it is closest to breasmilk.

Feeding practice: Topping up breast milk.

Information source: Health professionals (midwife, health visitor).

Company influence: Brands (Aptamil, SMA, Cow & Gate); type of formula (Comfort).

- We just started giving the formula straight away in between EBM bottles and gradually started giving more of the formula! I don't think our little dude noticed! We are using Aptamil as recommended by the Midwife and Health Visitor as it's meant to be the closest to breast milk! I don't know how true that is but he seems to enjoy it - we aren't having any problems with runny poo or constipation infact it seems to have stayed more or less the same as when we were breastfeeding just less frequent! We haven't tried any other formula so can't really comment on these I'm afraid! Hope that helps and good luck!

- Aptamil is closest to breastmilk. Its thinner than the other brands to mimic consistency of breastmilk.

- My midwife friend told me actamil and cow and gate are exactly the same inside the box but call them 2 different names (look at ingredients on box) so would go for cow and gate as cheaper, SMA was horrible and my son just threw it back up after every feed so went onto cow and gate and was great on that. They have the same ingredients but in different quantities. Cow and gate is a lot thicker than aptamil and smells different.

- I bought my son aptamil & he was on it for 4 weeks but didn't get on with it, he is now on cow & gate

First Steps Nutrition Trust: page 54
I ebf for three months. I went to SMA Comfort as the tin said it was for when you are moving from breastfeeding.

2) Pregnant woman asks for brand recommendations.

Summary: Mother-to-be favours Cow & Gate but father favours SMA. Forum members recommend a mix of brands and note some recommended by health professionals. Interestingly, SMA Gold is still referred to, although the name was dropped some time ago.

Information source: Health professionals (midwife, health visitor).

Company influence: Brands (Aptamil, SMA, Cow & Gate); type of formula

- My DD is on sma gold, we had a few problems to begin with but all sorted now. I think they've also changed the formula in the last few years xx
- Hiya SMA didn't agree with mine rashes and cranky moved to aptimal no problems
- I've used SMA gold with all 3 of my children with no problems at all
- Didnt agree with my second baby. We used aptamil for our first baby and there was no problems. Dont even know why I changed to sma for second baby. Fancied a change lol but it gave him a really bad tummy, changed his poo from yellow to green. Took the doctors ages to find out what was wrong with him. In the end I changed the milk to aptamil and he was fine after that lol. Ive heard bad reviews about sma too
- I also used SMA gold for my baby, cannot recommend it, she was first on Aptamil (which wasn't good for her at all, colic, constipation and all that) then we decided to try SMA - that was even worse, especially with the colic, finally we started on Cow and Gate on which she is until now (19 months) and there are no problems at all, we're really happy with this milk
- We started on aptamil on the recommendation (unofficially) from my hospital but moved onto SMA gold. This was partly because we bought the small ready made bottles one day with the disposable teets which my daughter liked and partly because afterwards we noticed it was on offer at asda. Both formulas we found good. To be honest aptamil is the same price as sma gold now. I would say it depends on what your baby is like. Lets face it we prefer certain drinks to others so its the same for babies isn't it? Its a bit of trial and error I think.
- I was told by the midwife to use sma gold when I was struggling to bf. my poor dd ended up with horrendous constipation. Switched to aptamil and haven't had a problem since
- Sma was awful for my son. Made him really gassy and constipated. Apparently its quite common. We moved to cow and gate comfort. Like having a new baby!
- Used SMA for both mine and had no probs but every baby is different x
3) Mother asks for brand recommendations but mentions no concerns with current formula.

**Summary:** A mother notes her baby is on SMA as it is cheaper and comes in a nice tin. She notes trying other formulas with previous babies. No health problems are mentioned but forum members are asked to suggest brands. They report a mix of brands and types of milk and there is a suggestion that health visitors have recommended Aptamil and Comfort milk. Some suggest that formulas are basically the same in terms of nutrition.

**Information source:** Peers (forum members); health professionals (health visitor).

**Company influence:** Brands (SMA, Aptamil, Cow & Gate); type of formula (Comfort milk); price and formula packaging.

- **Cow & Gate or SMA** Which one would you recommend?? We're using SMA at the moment and we're doing ok. With dd3 we tried Aptimil and C&G, the C&G seemed to be better for her. A very selfish reason but we're using SMA this time (and hopefully won't come across any problems) because it's cheaper in Aldi where we shop and available in our small local co-op if we need it in emergencies. Also it's in a cool tin which a lot of my family members ask for for storage containers. So probably random plus points for going with SMA but that's us.

- **I don't think there's that much difference. All formula has to be nutritionally (sp?) Complete so one isn't any better that way. It's just what works best for your lo.**

- **When I was at the Well Baby Clinic the HV said it may be an idea to use the "comfort" types (easy digest type) for my LO if she can't handle full on formula due to her size. That might be worth a thought if it's something you are concerned about.**

- **Whatever works for your lo. We were using SMA at first but it made him constipated so we switched him to Aptamil which was fine but he has colic so we put him on Cow and Gate Comfort which is working well for his digestion and colic :-(**

- **All baby formulas are made up of the same components - they have to adhere to certain guidelines, so one formula is no better than another, so it does depend on your baby. We tried LO on C&G, mainly because it was the cheaper option in ASDA, but she didn't get on with it, so we tried Aptamil and she's doing fine on that now. It's a little bit more expensive, but she was bringing a lot of milk back up with C&G - more than normal, so she's better off on Aptamil. It really does depend on each baby, the only way you can really figure it out is trial and error, although our HV seems to think Aptamil is a good formula to be on.**
4) Mother of 5 week old reports trying different brands and asks for recommendations.

**Summary:** Mother reports that SMA seems to leave baby unsettled, with wind, and asks for suggestions. Forum members suggest Aptamil as closest to breast milk (and recommended by health professionals) as well as suggesting looking for health issues around baby being unsettled. Members suggest that changing formula can unsettle a baby but that it is worth searching for the right one for your baby.

**Feeding practice:** Uncertainty over how long baby might seem unsettled before this indicates problem with health or formula; uncertainty over colour of poo that is healthy.

**Information source:** Peers (forum members); health professionals (midwives, health visitor, GP, feeding advisor).

**Company influence:** Brands (SMA, Aptamil, Cow & Gate); price of formula.

- Would love to hear your views and experiences please! Have tried SMA and my 5 week old baby doesn't seem to settle, lots of trapped wind. Now trying Aptimal and if that doesn't help, Cow and Gate. What do you think???

- I used Aptamil with DS and had no problems, apparently it's the closest to boobie juice.

- Hi there, I used sma with no problems, my son did have a stomach problem at 2 weeks old but that had nothing to do with the formula. I think most formula is the same, perhaps if your wee one is not settling changing won't help - maybe there is another reason; milk allergy, problem with wind etc. I'd try visiting gp or health visitor before changing the formula - because changing and waiting to see if it works and settles could take a while. when we changed from baby formula to toddler it took about a week for my wee one to get used to it and for his poo to return to normal - if your baby is not settling for a week I'd be worried.

- I used Aptamil for DD because the MWs in the hospital said it was the best one - they didn't elaborate on that statement though.

- my feeding adviser told me to switch my son to cow and gate from sma as he was a large baby and cow and gate is heavier, he then went another hour before feeds, it may just be chance, but ill use it again

- also switching your baby from milk to milk can give them a bad belly, because they have to adjust each time u switch them. to try and stick to one if possible

- You could look at the comfort milks, they have a lot less lactose in them. Some babies don't have the enzyme in their stomachs to break the lactose (milk sugars) down properly until they get a bit older. We started our son on SMA, then switched to Cow and Gate as he didn't settle and was always squirming around with wind (although it seemed like 'bottom' wind, not trapped burps). He was no better after we changed so the Health Visitor suggested the Cow and Gate comfort milk. It really worked. The only downside is you can't buy the comfort formulas ready-made. We were going away to
a hotel when DS was about 3 months old so decided to try him back on the 'normal' milk to make life a bit easier when we were away and he was fine. I think by then his digestive system had 'matured' a bit. Probably best to check with your Health Visitor before chopping and changing milks, but definitely ask about the comfort milk (it's nothing special, it's just for sale alongside all the other milks).

- (Original poster) Did the comfort formula give your son especially runny, green poo? I've been told this can happen. My health visitor suggested the Cow and Gate comfort if the Aptamil normal formula wasn't 'light enough' to make a difference. I don't want to spend the next 6 months trying every formula on the market, that's why I am asking for as much advice/opinions as poss. Trying to learn from others experiences. P.S. Just gave my daughter her first bottle of Aptamil and she had a text book feed. Good burps throughout and after and is now happily coo-ing away in her bouncey chair so maybe we've hit the jackpot already?!?!? Don't wanna speak to soon tho.

- That's good that the Aptamil seems not to be upsetting her. 'They' do say that it's a good one to use, I did use it for DD1 but this time (DD2 is 5 weeks old) I've gone with Cow and Gate again. Thankfully DD2 is fine with it, as the Aptamil is £1.50 a box more expensive! Yes, I seem to remember DS having green poo. It wasn't anything too bad though, it wasn't leaking from the nappy every time he went or anything.

5) Pregnant woman asks for brand recommendations.

**Summary:** Mother-to-be suggests searching websites (implies company sites) and suggests she is likely to try Aptamil. She also wonders if formula is good for baby as packaging suggests breastfeeding is best. Forum members recommend a range of brands and suggest recommendations from health professionals. Members also suggest hospitals providing easy access to ready-made bottles. Members note that breastfeeding is not suitable for everyone but that companies are forced to restrict formula marketing.

**Feeding practice:** Hospital providing easy access to ready-made bottles.

**Information source:** Peers (forum members); health professionals (midwife; hospital).

**Company influence:** Brands (SMA, Aptamil, Cow & Gate); price of formula.

- I use cow and gate it's made by the same people as aptamil but it's cheaper, it's practically the same formula. I used sma with my first but found it was really greasy and absolutely stunk! It's more expensive now aswell x

- I've just gone and brought some Aptamil powder. Also brought some of the ready made in the bottles to take with me to the Hospital so not having to faf around and get the midwifes to make one up for me. Hopefully they will be ok with me using them. The midwife at my antenatal class mentioned them so thought id buy some xx
6) Mother reports positive experience of ready-made milk with her twin sons.

Summary: Mother suggests powdered milk seemed to cause symptoms of colic and led to twins being given medication and trying out specialist milks in effort to find solution. She suggests ready-made formula solved the difficulties.

Feeding practice: Medications (Infacol, gripe water).

Information source: Peers (forum members); health professionals (doctor).

Company influence: Brands (Aptamil, Cow & Gate); type of formula (Comfort, lactose-free, ready-made).

Just wanted to share a bit of experience my husband and I had with our twin boys regarding feeding. They've had bottles from day one and were on Aptamil - the boxed powdered milk. They were ok on this for quite a while then started to get bad colic so we started the journey of Infacol, Gripe water then switched to Aptamil Comfort milk. This seemed to be fine for a while before they got bad again and we began to dread feeding them. I went to our doctor who let us try lactose-free milk even though he didn't
think they were lactose intolerant. Due to events we gave them already bottled Aptamil milk for a couple of days and they had no reaction to it at all and had the calmest feeds they'd had in a couple of months. It was the only one we hadn't tried and we only didn't try it sooner I think because we didn't think there would be such a big difference between the prepared bottled milk and powder, particularly being the same make. Since buying the bottled milk instead of powder they've been fine and were probably never colicky babies. Of course this won't be helpful for everyone but thought for some cases it may be worth a try. If I'd read a thread like this when they were about one and a half months old it would have saved a good two and a bit months of worrying and stress over feeding!

- Having the exact same experience with my 9 wo. Cow and gate, not Aptimil though. Was on ready milk from birth for a week, went on to powdered milk for 3 weeks (still C&G) - screaming, colicky and constipated. Put him back on ready milk at 4 weeks and he’s been so much better. Vastly expensive compared to powder but a small price to pay, IMO. Just to endorse your experience! I guessed that the process of dehydrating the milk into powder makes it harder for some babies to digest.... But pure speculation.

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7) Mother-to-be asks for opinions on goat milk formula.

**Summary:** Pregnant woman wants to breastfeed but, if this does not work out, she suggests she will look into goat milk or organic formula. Forum member suggests it is closer to breast milk than cow’s milk based formula.

**Information source:** Peers (forum members).

**Company influence:** Brands (NANNYCare); type of formula (organic, goat); websites.

- **Nanny care formula??And just curious as to who has heard of this formula or have indeed used it? I know it got banned from uk to use as baby milk but has been fighting long and hard and by the looks of it, has now been passed/will be deemed ok to use in uk very soon. I'm assuming this is due to it been goats milk. I am really going to persevere with breast feeding with this little one, but incase things don't work iv been looking at organic formula or this goats milk formula.. And any recommendations or reviews would be great thank you.** Thanks

- **I am BFing but have to go back to work soon and pumping won't be possible, and am hoping to use goats milk follow on as it is closer than cows milk formula to breast milk. Have researched it a lot and feel its the best decision for us! Maybe try talking to a nutrition? I found a lot about it on the internet, and it is used a lot in Australia & NZ!**

- **(Original poster) Thanks for replying, I’m assuming it’s not used much here at all lol!! I have done a lot if reading and found people changing to this have also helped greatly with like likes if reflux, colic, eczema and so on. I think I’m going to stick to my decision lol would be nice to BF thou, but just incase :-)**
3.8 I think something is wrong with my baby as she is upset / fussy / dissatisfied / does not want to stick to a routine

Key ideas arising in conversations within this theme

This is a broad topic that reflects concern, across parenting forums, about babies being generally upset and unsettled. Parents across sites expressed concern and confusion over why their babies cried, did not sleep for extended periods and wanted to be held much of the time. Parents expressed concern about their babies even when health professionals had said they were completely healthy. There was uncertainty expressed about why babies feed, and whether this was generally for comfort or hunger.

Parents looked for a variety of reasons to explain babies’ being unsettled and to a mix of solutions depending on what was seen to be the nature of the problem. Where such concerns led to other explanations such as allergy or intolerance, this is generally discussed elsewhere in this report. There were many suggestions for particular formulas (types and brands) and medications. Comfort and anti-reflux milks were generally seen as useful in helping to settle babies whose digestion seemed problematic. There was often the suggestion that various medications would help babies with digestive difficulties and babies became involved in drug and condition cycles akin to that with reflux diagnosis. Hungry milks were suggested to help babies sleep longer but not all members felt these were useful. Parents recommended various brands as being generally better to help babies settle. There were recommendations for feeding practices that were out of step with government guidelines.

Tongue tie arose as an issue in this topic and in other topics.

Feeding practices in conversations within this theme

There was some evidence from the chat forum conversations that parental concerns led to recommendations for feeding practices that were out of step with best-practice guidelines, in particular: early introduction of solids; giving foods such as juice or tea to babies under six months; and introducing a dummy or bottle to breastfed babies under 6 months. The use of specialist formulas such as Comfort or anti-reflux were generally regarded as useful for settling babies with upset stomachs. The use of hungry milk to help unsettled babies to sleep was also suggested, but members were not in agreement about whether it was useful. It was a common feeding recommendation to suggest the addition of a variety of medications to formula to tackle conditions that were seen to lead to babies being unsettled. There was some disagreement among members about the role of formula in settling babies and promoting independence and better sleep. Parents were also unsure about how long feeds should take and how frequent feeds should be. Parents typically believed that it was a matter of finding the right formula and then letting babies’ systems mature enough to handle milk, perhaps with the support of medication.
Information sources in conversations within this theme

Healthcare professionals were reported to offer a mix of advice, including some that directly contradicted government feeding guidelines, including: early introduction of solids; giving foods such as juice or tea to babies under 6 months; and introducing a dummy or bottle to breastfed babies under 6 months. Health professionals made recommendations for the use of formulas, medications and brands, for which there is no or limited evidence. Healthcare professionals were not generally seen as useful in helping to solve parents’ difficulties but were seen as persisting, for example, in recommending feeding practices that upset babies and parents.

Peers, mainly in the form of forum members, were also involved as information sources, and offered a mix of advice. This theme was the one in which there was the most tension expressed between members. Family members, in particular fathers, were mentioned as suggesting introducing formula to support baby’s sleeping and so that fathers could help more easily.

Company influence in conversations within this theme

There was a significant level of discussion around formula brands in this topic. The merits of various brands and types of formulas were debated and members expressed beliefs that certain brands and milk types were useful in tackling issues as diverse as vomiting, colic, pooping difficulties (constipation and loose poo), and length of sleep, all of which fell into this general ‘unsettled’ theme.

SAMPLE CONVERSATIONS

1) Mother wants advice on wind, constipation, colic and reflux for 7 week old.

Summary: Mother has tried many solutions including medications and specialist formula to help her baby, who seems to suffer with a range of conditions and be agitated and uncomfortable. A forum member mother recounts her similar experience with 4 week old, mentions upset to night time sleep, and search for answer. Recommends considering specialist milks and medications.

Feeding practice: Medications (Infacol, lactulose, Colief, gripe water, Gaviscon); uncertainty over how long babies under 6 months sleep after feeding.

Information source: Peers (forum members); health professionals (health visitor).

Company influence: Brands (SMA; Cow & Gate); type of formula (Staydown, reflux, Comfort).

● (Original poster) I have 7 week old dd, who has had a tough time with wind, constipation, colic and reflux so here’s the low down: Changed formula to SMA staydown - this has helped with reflux she seems happier. Tried all sorts of bottles inc dr brown - she seems to like tommee tippee anti colic bottles. 1. Tried infacol for wind - no change really, tried colief - not really effective as SMA staydown has to be made with chilled water and colief needs to be warm to work, she suffers from terrible trapped
wind, always drawing her legs and grunting and moaning even during sleep, she seems agitated always putting hands to face, she is always kicking her legs and is generally restless I think the reflux and constipation is under control now (she’s on lactulose) although she still has reflux when lie her down even after winding. I feed her upright, do baby massage, move around with her, wind her after every 30ml - she is good at burping but still has this trapped wind and I hear it in her tummy. I just can’t seem to find anything to help it, any ideas? Ooh, I have tried gripe water- she regurgitates this straight away!

• I’m sorry to hear ur lil one is suffering. I’m having similar problems with my lil boy. He’s 4 weeks and I started him on SMA gold at 1 week. He wasn’t winding very well and wouldn’t settle so we changed him onto cow & gate colic and constipation. This was great for a couple of weeks but the last few nights he’s been making this terrible grunting noise. He was also in a pretty good routine of taking his last feed around 10pm, another around 2am and his last one around 5am before settling back down till around 8/9am. Of course the grunting ruined this so I spoke with the hv yesterday. I bought some infant gaviscon from the pharmacy yesterday evening and it seems to have done the trick. He’s been back in his old routine throughout the night and I’ve just put him down after his 5am feed. I’m going to get him some cow & gate reflux milk today and alternate that with the gaviscon. The only problem I have now is I’m too worried to pat or rub his back to burp him in case it brings the acid back up. I’m not sure if ur lil one would benefit from the gaviscon but it made a difference for us right from the first feed. I hope u get it sorted and baby is feeling better soon.

2) Mother of 5 week old reports her baby is unsettled.

Summary: Mother asks for advice about baby who wakes every couple of hours in the night. Baby has had Comfort milk for colic but mother wonders if hungry milk might help her sleep through the night as she does not seem satisfied. Forum members recommend avoiding hungry milk and note that young babies do not sleep through the night.

Feeding practice: Uncertainty over how long babies under 6 months sleep after feeding.

Information source: Peers (forum members).

Company influence: Brands (Cow & Gate); type of formula (Comfort, hungry).

• (Original poster) Unsatisfied baby. My DD who is 5 weeks old is currently on cow and gate comfort formular as she colic problems, and as of a night time I feel she's not satisfied for the night, she has 5oz but may not finish all and will have 4oz instead. Through the night she will wake up every 2hrs. I feel we have sorted out her colic problem and would like to put her back on 1st formular milk c&g but as of a nighttime try her on hungry baby so she goes through the night not feeling Unsatisfied. Please can you help or give any advise on what I can do to help her.

• Hi. I would leave your baby on c&g comfort if helping with her colic. As baby is so young they want feeding little and often so you cant expect them to sleep all night at such a young age, that will come
eventually, 1 bottle of hungry baby milk won’t make your LO sleep through! My LB started sleeping through every night at around 12 weeks so the sleepless nights don't last forever!

3) Mother of breastfed 5½ month old wonders if formula is the magic bullet for getting baby to sleep through the night.

Summary: Mother reports baby has always been an unsettled sleeper with colic, tongue tie and wanting cuddles. Baby is now teething and waking every 2½ hours through the night, causing the parents sleep deprivation. Some forum members suggest introducing solids but others note that feeding method does not seem to link to length of baby’s sleep, with babies likely to wake for reasons other than hunger.

Feeding practice: Uncertainty over how long babies under 6 months sleep after feeding; uncertainty over how often baby needs to wake to feed; uncertainty over whether formula helps baby to sleep longer; recommendation of introduction of solids to baby under 6 months; uncertainty over whether introduction of solids helps baby to sleep longer.

Information source: Peers (forum members).

- Is formula the magic bullet? Just looking for some experiences from mix feeding mums. My DS is 5.5mo and thus far he's ebf. He's always been an unsettled sleeper (tongue tie, colic, love of sleeping on Mum/Dad) but now we're in the realm of teething it's become terrible. He's waking 4-5 times between 8pm and 8am, never sleeping longer than about 2.5 hours. All that will settle him back to sleep is a bit of boob. He's always refused a dummy. I'm struggling to cope with the sleep deprivation. We don't work well with feeding lying down - a mix of gushing milk/bad memories of feeding in hospital post EMCS/giant boobs. He sleeps in a cot beside the bed and I take him into bed when he wakes after 4/5 am. Now I'm rambling a bit! The gist of it is that DH wants to introduce formula before bed as he thinks this is the key to getting DS to sleep all night. I'm not so sure! I'm worried about supply issues plus DS was colicky and still suffers with digestive discomfort so I also worry that formula will cause him more discomfort (leading to more sleeplessness!). I should also probably mention that DS is a bottle refuser - he's taken one reluctantly a couple of times but I haven't pushed it as I won't be going back to work until he's about 11mo and was hoping he'd be on a sippy cup by then. Anyone want to share experiences of giving a formula bottle before bed?

- my 5mo ds is ff and a terrible sleeper. wakes every hour just to cry, cuddle and go back to sleep. his association with falling asleep is being on me so when he wakes in his cot he can't settle himself back to sleep. so we're now really working on self settling. sounds like you might be having the same problem, he associates feeding with falling asleep. its changing that which might help not what he's fed I think! but I'm having the exact same problems so I'm not exactly a wise sleep guru!! hope he settles soon and don't give up the bf if you don't want!

- If he is 5.5 months he maybe just getting hungrier and ready for weaning. DS was a terrible sleeper and a very frequent feeder but I remember it started getting worse when he was about 5 months. I was ebf and wanted /was obsessed with getting to the magic 6 months. I ended up weaning him at 5
months 3 weeks because basically he was hungry and I was sick of being the sole provider. I probably should've started a few weeks earlier. A bottle might help but then so might a bit of solid food.

- We mix fed (then weaning from 6mo). He was a terrible sleeper when we mostly fed bf, when we mostly fed ff and now when he's having solids. If there is a key to sound sleep it isn't what they're eating IME.

- No advice really but my DS has always (from about three days old) been bottle-fed and NEVER slept through. He is now 18months and weaned but still doesn't sleep well or through the night - I think some are just like that (sorry). I think if you feed on demand it makes little (no?) difference to sleep. Probably when it was more common to feed at set intervals for a certain amount of time switching from BF to FF possibly meant some babies got more milk in a shorter space of time and therefore slept better if they had been previously waking up hungry IYSWIM. Will you be starting him on solids soon? If he's a bottle refuser it might be worth waiting to 6months/starting now and seeing if that helps first (which it might if he's hungry) rather than getting him/you all upset over bottles.

- It depends why he is waking. If it is hunger then solids should do the trick and a bedtime bottle could be worth a shot. If it because he has a negative sleep association or is teething then it won't help. I suspect it is the latter as the wakings is more than 2/3 times. You could try pupd or shush-pat. Also make sure he's not overtired if at all possible.

4) Mother of 6 week old wonders if baby wants to feed due to hunger or pain.

**Summary:** Mother suggests baby is unsettled with wind and possible reflux, and wonders if she is feeding baby too much. Forum members offer a mix of advice including: suggesting using a dummy, endorsed by health visitor; specialist milks; and medication.

**Feeding practice:** Medications (Gaviscon); recommendation to give baby under 6 months a dummy; uncertainty over why healthy babies feed.

**Information source:** Peers (forum members); health professionals (health visitor).

**Company influence:** Brand (Cow & Gate); type of formula (hungry, anti-reflux).

- (Original poster) Is my 6 week old eating too much? Our dd2 has 6oz bottles, but the amount she has differs throughout the day. Sometimes she drains the bottle other times 4oz is all she wants. She goes about 2-3 hours between bottles. Usually 2.5 hours and has 8 bottles per day. It works out to about 40oz per day, is that too much? she suffers with wind and sometimes i wonder if she comfort eats? I want to follow her lead and give her as much as she wants as often as she wants but its hard to know the difference between hunger and pain sometimes. I dont want to make any possible tummyache worse. How much do most 6 week olds have?

- Hi!At 7 weeks baby was having 6oz every 2.5 hours, at least 6 sometimes 7 times a day. And he was actually finishing every one of those bottles! If she's not finishing each bottle I'd go with it. If you were BF you would be demand feeding so I can't see that it's much different. If she is having wind I can't
imagine she would want to take any milk so I wouldn’t say she was comfort eating due to that. When baby has wind he jumps away from the bottle because taking anymore milk hurts his tummy. Does she take a pacifier at all? That was the only way we knew whether or not baby was actually hungry because sometimes he just wanted to suckle on something and the dummy helped to calm him down rather than filling his tummy.

- (Original poster) im glad someone elses LO seems to like their food as much as mine! yes she does have a dummy/pacifier and youre right, it helps us to know whether shes actually hungry or not. I BF for nearly 5 weeks and HV advised a dummy as said some babies are just “sucky” (she was on my boob pretty much constantly some days!) it saved my sanity (and nipples!)

- Yeah we were suggested the same thing! He’s 16 weeks now and having 8oz every feed 5 times a day. Oh and at 6 weeks he was on hungry baby milk too. As long as she wants it I’d give her it. You can’t really overfeed a baby as they won’t take it if they don’t want it. Like I said baby will literally jump away from the bottle when he’s full.

- (Original poster) thanks. She has reflux too unfortunately so is now on gaviscon in her bottles (thats mainly why Im not BF anymore). She was projectile vomiting after lots of her feeds so it was hard to know what to do with her feeds (she would finish a bottle, then be sick, then seem hungry again 10 mins later) but health visitor said to let her tummy rest and not give her another bottle too soon after.

5) Mother of breastfed 7 week old reports health visitor suggests introduction of bottle.

Summary: Mother says baby is doing well with breastfeeding but health visitor says it is important to introduce a bottle so baby knows how to drink when he is older. Mother is confused by mix of feeding advice from health professionals and is not sure what is right. Baby seems fine but is upset when tried bottle. Forum members have mix of opinions, with some suggesting introduction of bottles is totally unnecessary and others suggesting it is less problematic.

Feeding practice: Recommendation to give breastfed baby under 6 months bottle; uncertainty over how and when to shift from feeding by breast to another implement.

Information source: Peers (forum members); health professionals (health visitor, midwife, GP); breastfeeding support group.

- I am just looking for a bit if advice please. My DS is 7 weeks old, he is my first baby. I am so confused with all of the advice that i have been given by health professionals, this all started the day he was born but the most recent confusion came from the health visitor. My DS is EBF and this has been going really well, and this was acknowledged by my health visitor during her last visit two weeks ago. However, she then went on to say that I need to give DS a bottle every day to get him used to feeding from a bottle or he wont be able to drink properly when he is older. I am so confused as I am breastfeeding for my own reasons and I don’t really want to give him a bottle but also I don’t want to cause him any problems when he is older. Has anyone else had this advice?
Gosh. That's unusual advice from an HV. Whether you give a bottle or not at this age will have no impact on their ability to drink when older. When you wean you give them water in a beaker which is different to a bottle anyway. My two got bottles early on if I needed a break or was going out to the shops. But it was now and again rather than every day. Some babies just won't take a bottle, some with difficulty, my two with ease. Do what you think is right. I've never heard on an HV giving the advice you've been given. Are you in a BF support group? I'd go there for advice rather than your HV.

Your HV is an idiot! What about all the babies born before bottle feeding?! Total nonsense and congratulations on baby. Well done for establishing ebf!

(Original poster) I thought it was unusual as well but being quite new at this I did what I was told and tried to give DS a bottle and he hated it, he screamed and was so distressed. He sucked so hard the teat went inside the bottle and it took an hour for him to take 4oz. I could not bare see him so upset so I have not tried it again since. No, I am not part of any support groups, there is one in my local area at the end of each month so I think I will go there. The issue got worse when the GP told me I could not breastfeed him for 24 hours as he had oral thrush, every website I looked at said to carry on, and at that point I did call a breastfeeding support line for advice who advised to carry on. It's just so hard with all the conflicting advice, even from my midwife and health visitor who I saw in the same day when my DS was 10 days old and both gave completely different advice on things. We have thought about giving DS a bottle occasionally so that my DH can feed him and have that time with him, but at the moment I am reluctant to given his initial response to a bottle.

Boo it won't let me edit. I was going to recommend reading The Womaly Art of Breastfeeding. It's available on Kindle and is so kind and helpful. Don't introduce bottles unless you DH and DS want them. Formula is fine no problem but breast is much better for babies in many ways so your HV (LOL I would have kicked her out my house and made a complaint) is making a very bizarre statement with no basis in fact. The thing is a lot if GPS and HVs actually don't know that much about BF. stick to BF support lines and do go to the group you've looked into. The group I went was the best baby group I went (and went to quite a few). In meantime go with what your gut tells you to do.

If you do want to try giving him the occasional bottle, then try introducing it very slowly to him. If you try a bottle instead of a breast feed he's likely to throw a wobbly because it isn't what he expected. Instead, try using a small bottle if you can get one, and put in a couple of ounces of breast milk. The anti-colic teats are the best because they don't allow an airlock to form so allow a constant stream - he will be used to milk being continually on supply in the breast. Make sure the milk is at blood heat - you can't feel a drip on your arm - and introduce it at the end of his breast feed. Try to hold him in the same position, even against your naked skin, and make sure there is milk on the outside of the teat so that he can taste it. With a bit of luck, he might take it. If he does you can increase the amount of milk from the bottle until he is taking a full feed. If he objects, just finish the feed on the breast and try again another time. Keep quite relaxed about it - it isn't a major thing.

The health visitor saga has continued, my son is nearly six months old, he has continued to refuse bottles. The Hv has had us in weekly or fortnightly for weight checks since my last post in January. She referred me to the gp who said my son is perfectly healthy. We are starting to wean now, and he is interested in taking breast milk from a free flow cup occasionally.
3.9 I am not sure if my baby needs a different milk, now that she is heading towards introduction of solids

Key ideas arising in conversations within this theme

There was some discussion on parenting forums about the role of formula in the diets of babies as they approach the introduction of solids. However, there was considerably less discussion in this area than with the other six themes. The main strands of concern were: the use of follow-on formulas from 6 months; the use of toddler and growing-up milks from one year; and the balance of formula and solids in a baby’s diet. In contrast to other themes, there was less mention of baby and parental upset about feeding. However, there was uncertainty about whether follow-on and toddler or growing-up milks were a useful part of baby’s diet. There was some confusion about how big a role formula should play in a baby’s diet from the age of 6 months and whether it should be restricted in favour of solids. This uncertainty related to maintaining a healthy weight for a baby, in particular in relation to whether a baby could be overfed, and whether baby needed extra vitamins from specialist formula as they got older. Parents also suggested that they were uncertain about what were the best solids to give a baby and whether extra vitamins were necessary. There was a strong sense of parents wanting to get things just right for their babies as they got older.

Feeding practices in conversations within this theme

There was some evidence from the chat forum conversations that parental concerns led to recommendations for feeding practices out of step with best practice guidelines, in particular: restricting baby’s access to formula under one year; and introducing water in favour of formula for some feeds. One health visitor was reported to suggest that a baby of 6 months should be offered water at night instead of formula. This left the mother concerned that she could overfeed her baby and make her fat if she did not actively cut back on formula. However, there was awareness among forum members that babies could not be overfed during weaning as long as they did not receive ‘junk food’.

There was little support for follow-on milks and most parents reported understanding that these were not nutritionally necessary for a baby. It was mentioned that these were advertising gimmicks to allow companies to advertise some type of formula, as infant milk advertisements are banned. However, one mother felt that these would not be on sale if they were not fine for a baby and suggested that, although she had heard they were sweet, so was breast milk. There was some concern that babies might need a boost of vitamins as they had less formula, and that follow-on milk could provide this. One health visitor was reported to back this view and suggest that, if follow-on formula was not given, vitamin drops should be used. Toddler and growing-up milks were the subject of very little discussion and were not viewed positively. It was mentioned that these were sugary drinks and one member directed parents to an independent report about their nutritional quality. However, one member reported finding the product useful because, as it is distinguished as a product for a toddler, her older children will not drink it up as they do the household cow’s milk.
Information sources in conversations within this theme

Healthcare professionals were reported to offer a mix of advice, including some that directly contradicted government feeding guidelines, including: the need for extra vitamins from the age of 6 months even when formula milk is at 500ml/day; and cutting back on formula in favour of water from the age of 6 months. Peers, mainly in the form of forum members, were also involved as information sources, and offered a mix of advice about weaning. There was a general, but not universal, consensus against specialist milks associated with babies beyond the age of 6 months. However, more information needs were expressed about babies and vitamins. One member directed others to an independent information source from the research charity Which?

Company influence in conversations within this theme

There was not a significant level of discussion around formula brands in this topic. However, there was awareness of types of formula (follow-on, growing-up and toddler milks) and members noted advertising for such formulas. The idea of doing the best for one’s baby as he or she grows up and the possible need for extra vitamins in baby’s diet are company messages. The idea that government would not allow products to be on sale or advertised if there was not something useful about them was expressed. Health visitors are clearly not immune to these messages and were reported to feed these back to parents.

SAMPLE CONVERSATIONS

1) Mother of 10 month old wonders if she should shift to follow-on milk.

Summary: Mother has seen an advertisement for follow-on milk. She says she did not realise different types of formula were recommended for different ages and thought infant milk was fine until cow’s milk was introduced at one year. Another forum member uses follow-on milk as it seemed to solve her baby’s constipation, but notes it is not necessary.

Feeding practice: Uncertainty over whether different formulas are recommended for different baby stages.

Information source: Peers (forum members).

Company influence: Type of formula (follow-on); advertisement.

● …there’s no real advantage to using follow on milk. It has a negligibly larger amount of iron and calories and is often made with a different kind of protein (which can be harder to digest for some babies), but it’s no better than first milk. We did use follow on simply because the first milk (with the other kind of milk protein) caused a lot of constipation. So I tried it on a whim and it seemed to sort out the constipation. It could have been pure coincidence, but there was no harm in continuing to use it. I probably wouldn’t bother next time if first milk was working just fine. I think with a baby who’s had issues in the past tolerating formula, if you have something that’s working, stick with it, especially if you plan to switch to cow’s milk at 1 year. Otherwise could be a lot of changes all at once.
2) Mother of baby nearing 6 months wonders if she should be cutting back on bottle feeds.

**Summary:** Health visitor has recommended cutting back on bottles by offering water at night. Mother asks for advice and worries about her baby getting fat if she continues with night feeds. Forum members offer a mix of advice including cutting back on formula, but others suggest feeding baby what she wants.

**Feeding practice:** Uncertainty over weaning practices.

**Information source:** Peers (Forum members); health professionals (health visitor).

- Anyone successfully night weaned a FF baby with water? My LO is very nearly 6 months old. She has three meals a day and until the HV came on Tuesday she was having 5 bottles in a 24 hour period at roughly these times: 01:00 6-7oz; 06:00 7oz 10:00 7-8oz; 14:00 6-8oz; 18:30 4-5oz. Her food would be 08:00; 11:30 & 16:30. The HV said that if she's having 3 meals a day then she ideally should only be having 3-4 bottles or 20-24oz a day and that perhaps the 01:00 feed was habit more than hunger. She suggested trying cooled boiled water instead. I've been trying this and she still wakes around that time and takes anywhere between 3-6oz of water and settles again. I'm just wondering whether other babies have been like this and finally decided waking up for water isn't worth it? If so how long did it take?

- Are you weaning her from that feed because you want to or just because HV said you should? Just because HV said it doesn't mean its necessary. At not quite 6 months that is a little young to night wean. If you do want to do it I never used water. I did slowly lessen the amount of formula by a half ounce every couple of days. So that his body had time to adjust. Water is still filling her tummy making her feel full I would think. I didn't night wean till close to a year. And you could try adding a meal/snack just before bed. So that tummy is fuller and might sleep longer.

- (Original poster) Thank you for your advice. There's several reasons why I'd like to night wean her...she's a big girl 23lb 12oz at 25 weeks old and I'm worried what with all that milk and food I might overfeed her. I guess I was lucky with my first that she self weaned dropping that night feed at 16weeks. The extra sleep would be lovely but I can cope without it. I think I'll try cutting down the ounces slowly and see if this makes a difference.

- Personally, I'd just keep doing what you're doing. 6 months is possibly still early to not need a night feed. My daughter was still having 1 full feed a night until 9 months (and then one day she went from wanting 180 ml at 4am to never wanting it again the next day). My friend who's baby is also FF is still having one and he's turning a year on Saturday. Night weaning at 16 weeks was probably just unusually early. I wouldn't necessarily attempt using water (as you're still reinforcing the habit of having a bottle, which might not help any), but you might consider in time encouraging more food and feeds during the day. My daughter stopped wanting a night feed when she really started to eat solids in large amounts, which is usually 9-10 months for most babies. At 6 months, she just might not be able to eat as much as she needs, despite having 3 meals a day, to keep him full at night. I think if it was me, I'd just give it a little more time and let it happen naturally, rather than making a big deal out of it or trying to introduce something new.
• Personally I would just carry on giving her milk. The first 12m of a child's life they grow and develop at the fastest rate that they ever will. All of mine have still been waking at least once in the night at 6m, and my middle one was STTN at 8m without me having to do anything, my eldest STTN at 14m, again, I did nothing, just fed him when he wanted what he needed.

• BTW, as long as you're not offering junk foods, you're not going to over-feed LO. They only eat until full and only take what they need and want so as long as you're offering a balanced and varied diet, they will be great!

3) Mother wonders if she should shift to follow-on milk.

Summary: Baby will soon be 6 months and mother says she does not seem to be drinking that much infant milk. She wonders if a shift to follow-on milk would be useful, but health visitor does not recommend it. Forum member recommends follow-on milk, saying it would not be on sale if it was not safe and that she has heard follow-on is sweet but so is breast milk.

Feeding practice: Uncertainty over weaning practices; uncertainty over role of follow-on milk.

Information source: Peers (forum members); health professionals (health visitor).

Company influence: Brand (HIPP Organic); type of formula (follow-on).

• Just a general question regarding 6 month follow on milk. I am debating with trying my LO on follow on milk next week (once she’s 6 month old), because my LG has been really fussy with her bottles for quite a while now and will only ever drink 4/5 ounces (sometimes just 3 oz) 5 times a day. Just did not know if she would take to the follow on milk better? Anyone had experience of this? Also, i know the HV says there is no added benefit for follow on milk but would she be missing out on anything if I switched? We have started weaning, and she has veg and pudding for lunch everyday and fruit for tea. Thanks

• I asked the same thing not that long ago and everyone said not to. My lg was exactly the same, fussy and only taking 3/4oz. I tried a pre made of the Hipp follow on milk (that’s what she was on previous) and she guzzled it!! Now takes 3 bottles of 6/7 oz a day along with her solid food. May be a fluke and she’d have settled with normal milk but it’s working so not changing!!! xx

• (Original poster) Thanks for replying, glad to hear it worked for you. yeah I might give it a go, once she turns 6 months next week. Surely she will be better having more ounces of the follow on milk than struggling to feed her on the stage one.

• Well that’s what I thought! At the end of the day it wouldn’t be there if it wasn’t safe and correct for their age. People commented to me that it was too sweet and would ruin them with a sweet tooth. I breastfed up to 5 months and breast milk is super sweet so is just mimicking that. Hope it goes well maybe get a few of the pre made first….I know they’re a bit more expensive but good to try and she if she’s ok on it!
4) Mother of 7½ month old is uncertain about introducing solids.

Summary: Mother asks for advice about what amount of formula and solids her baby should be eating. The doctor recommends not giving baby much water, but mother worries about both under and overfeeding. Forum members give a mix of advice including offering water, limiting bottle and not limiting bottle.

Feeding practice: Uncertainty over introducing solids; recommendation to limit infant milk in favour of solids.

Information source: Peers (forum members).

- My Daughter is 7 1/2 months and she is my first child I am having trouble getting a new feeding schedule started (including solids - we were great with just formula lol). The doctor suggested we give our daughter 4 bottles per day, around 7 oz in each. Then, give 2 to 3 servings of solids. The issue I am having is I feel like our daughter needs something to drink after having a solid, but the doctor said not to give much water a day...maybe 2 to 3 sips. Right now, I am giving my daughter 5, 6 1/2 ounce, bottles a day. She eats every three hours. With the second feeding, she has oatmeal (followed by bottle). With the third feeding, she has a serving of stage one vegetables or fruit. I worry that I am feeding her too much at a time, but also worrying that I'm not feeding her enough per day. I need to eliminate one Bottle day and Add one more serving of a solid. Can anyone give suggestions on their schedules?

- My sons feeding routine is: (bottle every 4hrs)

(This is what my son ate today)

7am - 7oz bottle
8/8:30 - ready break with cows milk.
11am - 6oz bottle
12:30pm - rice cake with cream cheese topping, 2 x fresh strawberry + 1 apple biscotti
3pm 6oz bottle
4:30/5pm - pasta + chicken & veg & yogurt for afters.
7pm - 7oz bottle

He's 7 months, breakfast we spoon feed apart from fresh fruit unless he is having toast or crumpet. lunch & dinner he feeds himself apart from the yogurts/fruit pots. Water is offered in a sippy cup with all meals. I fill it with 2oz of water each meal & let him choose when he's had enough.I'm regards to mixing, after we was done with one fruit/veg, I used to feed a single veg on its own, then straight after a single fruit. You could try making a food diary and feeding a single food for 2 days then add another food to her diet so you can eliminate anything that maybe making her tummy upset. After trying various veg/fruit after his 3pm bottle, we then set a breakfast routine and followed that for a week, then added dinner & then added lunch. If you've been weaning since 6m then maybe try to feed solids 0.5-1hr after ur LO's milk has settled, rather than feeding solids then bottle, as she maybe full from the solids & comfort eating on the bottle. Also she may not be ready to drop the 5th bottle until she is on 3 meals.
With weaning I don’t think there is a right or wrong way. everyone has a different way, ild go with what work for you & your girl she will let you know what she wants. xx

- What I’d strongly recommend is not trying to eliminate bottles or time them or limit them in anyway. Milk is the most important thing for her to eat until she’s 1 and you want her to have as much as she wants. What you might find helpful is picking set times for meals (ours were roughly 9am, 12pm and 5pm) and then any time she’s hungry around that, give her milk. If she's used to having milk first thing when she wakes up, do that, then offer breakfast, then if she's hungry before lunch, give her more milk, etc. And don’t limit water. That's terrible advice. Very little babies shouldn't have a lot of water (like2 months). But a 7 month old should have as much as she wants with meals and then offer milk to quench her thirst and also hunger in between. Don’t stress as much about the times or the amounts. Just give her whatever she wants. When she's ready to drop a bottle, she just won’t be hungry between breakfast and lunch or lunch and dinner and then you’ll know.

5) Mother wonders whether to switch to follow-on milk at 6 months.

Summary: Mother suggests she has a ‘crazy’ health visitor who says follow-on milks are unnecessary and a marketing ploy. She asks forum members if this is right. Forum members offer a mix of opinion with some suggesting that follow-on milk could be nutritionally important as babies get older, and one suggesting a health visitor has recommended it. Other members suggest it is not necessary and note follow-on and toddler milks are used to get around formula advertising laws. Members note that follow-on milks attract special offers.

Feeding practice: Uncertainty over weaning practice; recommendation to limit infant milk in favour of solids.

Information source: Peers (forum members); health professionals (health visitor).

Company influence: Brands (Aptamil); type of formula (follow-on); advertisements; supermarkets (price and promotions).

- Just wondering what people think about changing baby formula from stage 1 to follow on when baby gets to 6 months. I met a (rather crazy, for lots of reasons) health visitor recently who said not to bother using follow on formula as it's just a marketing ploy to try and make mum's buy it for the "added ingredients" when they’re not needed. She said to ignore follow on milk and use stage 1 till baby is 1? Is this right?!

- I have exactly the same dilemma.. Apparently babies iron supply drops at. 6 months and te follow on has extra iron in. It's up to you it won't have much of a difference to baby whatever one you use to be honest. I've changed my little boy over today he's 8 month and on 3 meals a day sorry I couldn't offer much help Hun xx

- My understanding has always been that there is no need to use follow on milk - your Hv is right. However, I swapped to it for small money saving purposes! I think the promotion rules that apply to
stage one milk don't apply to follow on milk so if you buy follow on milk you can collect supermarket points on it and it can also count towards shopping totals for the £5 off a £40 spend type offers. With stage one milk you can't collect points and it doesn't count towards the shopping totals for money off.

- I ha e heard that follow on isnt worth it. Especially after a year baby can just have full fat cows milk as they should be getting all the nutrients they need from food. I have seen vitamins to give baby once they are on solids. Dont know if thats an option for you? Im personally sticking with stage one just to keep tgings the same. She is six months now and having cows milk in food but formula to drink. X

- The HV is right - follow-on milk is not necessary. The formula manufacturers have 'invented' it to get round the ban on advertising and promoting infant formula. But, as the post I've quoted points out, because of this you can collect Clubcard/Advanatge points etc when you buy follow-on milk.

- It won't do your baby any harm, but just bear in mind it is a marketing thing, and definitely do NOT buy the toddler/1 year+ formula milks. They are very sweet, and are definitely not necessary when a baby is eating proper food. Cow's milk is fine as a drink from 12 months, and if you are concerned you can buy/be given (don't know what the qualifying criteria for free vitamin drops is though) vitamin drops. You should not be fooled into thinking that your toddler needs a sweet milky drink to get their vitamins!

- (Original poster) Thank you everyone. I think I'll stick to stage 1 then as I know she takes it and won't cause any unnecessary dietary changes. I'm still riled that although supermarkets are happy to sell and take money for state 1 milk they won't include it on promotions (but that's a different conversation altogether!)

- Supermarkets don't have the choice. But yeah that's another convo. I never used follow on milk, all mine stayed on stage one until cows milke

- They are not allowed to, it's covered by Government legislation. Hence the existence of Follow-on milk, and all those unnecessary toddler milks - the formula manufacturers claim these are not 'infant milk' and therefore are allowed to promote them.

- I switched my LO to 6 month follow on at 6 months my HV says it has the extra vitamins and if I dont switch I need to give them to her in vitamin drop form. She was fine BTW it was aptimil follow on

6) Mother wonders if she should give her baby toddler milk as he is about to be one.

Summary: Mother notes she has begun introducing cow’s milk to her son who will be one in a week. However, he has been sick since she has done this. Forum members suggest strategies for introducing cow’s milk, but also recommend a visit to doctor to check out possible cow’s milk allergy. Members suggest toddler milk is not a good idea as it is full of sugar but one notes she uses it as older children will not be tempted to drink it.
Hi all, just wondering if anyone uses toddler milk or has an opinion on it? My DS is 1 in just over a week and I started giving him formula mixed with milk to get him used to cows milk. Since then he's had terrible wind and awful nappies and started being sick at bed time. I think he's struggling with the cows milk. So when we were shopping yesterday I saw toddler milk in the same brand as we have always used for his formula. Do you think this would be ok? Or better than cows milk? Or should I persist with cows milk and hope he gets used to it?

If you were asking the question and weren't having possible issues with cow's milk I would say no to the toddler milk. The article below says they have added sugar. They also have added vitamins and things. If your LO is getting a balanced diet then cows milk is fine (plus cheaper).
http://www.which.co.uk/news/2013/08/...-milks-330947/ But to be honest I would want to look into the cow's milk reaction a bit more. Is he being sick every night? If it does seem to be a reaction then maybe visit the doctor and see what they suggest. If it is a reaction to the cow's milk, I'm not sure if staying with it will work to make the issues stop.

Yeah same as pp. If he wasn't reacting to cows milk id say ignore the toddler milk, they dont need it if they are getting a healthy balanced diet. If he can't handle cow's milk then it may be needed even if only temporary. Has he had cow's milk in cooking and other foods such as yogurts before? Did he ever react yo that? Are you giving full fat milk? semi skimmed and skimmed can make them sick. If he carries on reacting it might be worth a trip to docs to rule out an allergy.

You might just need to do it a bit more slowly and just see how it goes. For instance, add in a small amount of cow's milk to one bottle a day, then slightly more, then maybe a whole bottle once a day, etc. If he's been on normal formula, I'd say you likely don't have to worry about a dairy allergy, etc. or he would have already had a reaction. More than likely, his tummy just needs a bit of time to adjust to the change. We did it from from adding a small amount of milk to just one bottle a day to being fully on cow's milk (3 bottles a day) over about 2.5 months, so it was very gradual. We did have some digestive issues, but turns out they were related to teething and nothing to do with the milk (any chance he could be teething by the way? They tend to really start getting a lot of teeth somewhat unexpectedly around 1 and teething for us is always accompanied by explosive poos, nappy rash and vomiting). Generally though, I'd say move to cow's milk and not toddler milk. It's just a fake processed food with too much sugar (and linked to tooth decay in young children). If you plan to use milk in your LO's diet eventually, there's no harm in slowly making the switch now (and it's SO much easier and cheaper as well).

I use toddler milk but only because I have 6 other children & they are always drinking all the milk grrrr & the poor toddler would starve ! (Well not quite but you get my point)If it wasent for that it would be cows milk !
4 Discussion

It appears, from the conversations analysed for this report, that many parents who choose formula feeding have a number of concerns about finding ‘the right milk for their baby’. Whilst there are examples of good practice and sensible discussion over formula milk, there appears to be a belief that there is a perfect formula milk for each child, and a ‘textbook feed’ which is to be aspired to. The diagnosis of medical issues appears to be carried out both by health professionals and parents and it could be suggested that normal feeding behaviours are sometimes confused with medical conditions that require medication and specialist products. The impact of marketing messages on health professionals is clear and, whilst supportive health visitors and others were reported, there were many negative comments about the support received from health professionals.

The purpose of doing this work was to look for areas where we might offer parents and health care professionals more support so that they can give consistent and professional advice to families. It appears that there remains a need for:

- Clarity over normal infant behaviour
- Information about the risks associated with self-medicating babies with specialist formula
- Health professionals to be vigilant in avoiding company product promotion and to ensure they have received adequate training on how to support parents who formula-feed their infants
- Clarity to health professionals on public health guidance around settling babies and dealing with constipation and other issues
- Simple and clear guidance on normal growth and development
- Simple and clear guidance on introducing solid foods.

Whilst the review of parental conversations considered in this report is acknowledged to be both subjective and from a self-selected group of parents who use parental chat forums, it provides some insight into current concerns and worries. There remains a lack of information about how parents manage infant feeding and formula feeding, and about their perceptions of different formula. There is no doubt that the marketing of follow-on formula to families, and of all formula to health professionals, influences thinking and behaviour. It is important to note that there are no mechanisms to challenge mis-information in the health professional literature, even when evidence presented is flawed and not in line with policy and evidence. Health professionals need to be clear about where to access information and about their roles and responsibilities as health professionals. We recommend that all health professionals read the UNICEF publication *A guide for health workers to working within the International Code of Marketing of Breast Milk Substitutes* (UNICEF United Kingdom, 2013).
References


