

Bottle feeding - nutrition

Breast milk or a suitable infant formula is recommended as the main milk source for all babies less than 12 months of age. Breast milk is the feeding option of choice, but infant formula is a suitable alternative when breast milk is not available. Infant formulas have been developed to contain similar nutrition to breast milk. They provide all the nutrition your baby needs until you introduce solids at around six months.

Caution on changing formula

If your child sleeps or feeds badly, or is unsettled or 'colicky', you may think you need to change the formula you are using. There is little evidence that this is helpful for the majority of babies. Seek the advice of your maternal and child health nurse or doctor before switching formulas.

Starter or first formulas

There is a variety of starter formulas based on cows milk protein (whey or casein). These formulas:

- Are suitable for babies from birth to 12 months
- Can be confusing – the label may list a number of additions such as LCPUFAs (long chain polyunsaturated fatty acids or omega-3 fatty acids), pro-biotics or pre-biotics. These ingredients are added because they are found naturally in breast milk. The most important thing to remember is to choose a starter or first formula if your baby is under six months of age.
- Formula based on soy or goats milk is also available – again, choose a product that is suitable for your baby's age.

Soy formulas

Infant soy formulas are suitable for babies with a medical reason to use them, such as an allergy to cows milk. These formulas must not be confused with regular soy milk, which does not provide suitable nutrition for babies.

'Follow on' formulas

'Follow on' formulas are suitable for babies six months of age and over. It is your choice whether you use them. 'Follow on' formulas are available based on cows milk, soy or goats milk. These formulas:

- Are made for babies over six months of age
- Contain higher protein and mineral content than starter formulas.

Specialised infant formulas

Infant formulas can be modified in a variety of ways, including changes to the fat, carbohydrate or protein content. Specialised infant formulas are sometimes necessary for babies with certain medical conditions and may be prescribed by paediatricians through the Pharmaceutical Benefits Scheme (PBS).

Reasons for using these formulas might include:

- Severe allergy or intolerance
- Fat or carbohydrate malabsorption

- Severe digestive disorders.

Some examples of specialised infant formulas and when they are used include:

- **Low lactose** – is used for lactose (milk sugar) intolerance.
- **Modified protein content** – in some formulas, the cows milk protein is broken down into smaller units. In other formulas, the whole protein is replaced by amino acids, the individual building blocks of protein. These preparations are used for severe allergy, malabsorption and digestive disorders or metabolic conditions.
- **Modified fat content** – this includes formulas with a high concentration of triglycerides and lower levels of fatty acids. These may be used for babies with liver or gastrointestinal conditions.

Seek medical advice before using specialised formulas.

Premature babies

Premature babies need a formula with additional energy and mineral content. Special formulas are available to supply these additional nutritional needs.

New additions to formula

The composition of infant formula continues to change as research provides a greater understanding of the role of the unique ingredients contained in breast milk. A variety of new ingredients have been added to infant formulas in recent years. These include:

- Fatty acids called DHA (docosahexaenoic acid) and AA (arachadonic acid)
- Biologically active substances that are thought to be good for the immune system
- Nucleotides – breast milk is a rich source of nucleotides, a substance that plays a role in immune functions of the gastrointestinal system. These can now be added to infant formula with possible benefits for immunity.

Standards and regulations

The ingredients in infant formulas are strictly controlled and legislated in Australia and many other countries. Infant formula manufacturers and developers must comply with regulations and standards.

Where to get help

- Your maternal and child health nurse
- Your paediatrician
- An Accredited Practising Dietitian, contact the Dietitians Association of Australia
- Royal Children's Hospital Tel. (03) 9345 5522
- Advisory Panel on the Marketing in Australia of Infant Formula (APMAIF) Tel. (02) 6289 7358

Things to remember

- Breast milk is the feeding option of choice for infants.
- If breast milk is not available, then infant formula is a suitable alternative.
- Breast milk or formula should be the main milk used until the baby is 12 months old.
- Choose a formula to match the age and needs of your baby.
- If you believe your baby has a problem with feeding, discuss this with your maternal and child health nurse or doctor before switching brands.

This page has been produced in consultation with, and approved by:

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