

Milk Allergy – Birth to 3 Years

What is a milk allergy?

A milk allergy is when our bodies react to the protein in cow's milk.

The only way to treat a milk allergy and prevent a reaction is to avoid all foods that contain milk or milk ingredients.

A milk allergy needs to be diagnosed by a doctor, such as a family doctor, pediatrician, or allergist.

Signs of a milk allergy may include:

- skin problems like rashes, eczema, hives (bumps or welts), and swelling of the face and lips
- stomach and gut problems like nausea, vomiting, diarrhea, stomach pain, and blood in stools
- airway problems like a runny nose, wheezing; trouble breathing, speaking, or swallowing; or drooling and gagging

These signs can happen right away or a few hours after eating foods that contain milk or milk ingredients.

Call 9-1-1 right away if your child has these signs of an allergy:

- trouble breathing or speaking
- not able to swallow
- swelling of tongue or mouth

Lactose intolerance isn't the same as a milk allergy

Lactose is the sugar found naturally in milk.

Lactose intolerance is a problem digesting lactose. It happens when your body doesn't make enough of the enzyme lactase, which is needed to break down lactose. Lactose intolerance is rare in infants and uncommon in children.

Most people with lactose intolerance can still drink lactose-reduced milk and eat milk products low in lactose, such as aged cheese and yogurt.

Feeding a baby or young child with a milk allergy

Breastmilk

Breastmilk gives your baby the best nutrition. Some babies with a milk allergy may react to traces of cow's milk protein that pass from a mom's diet into her breastmilk.

If your breastfed baby shows signs of an allergic reaction, stop eating all foods that contain milk or milk ingredients. Talk to a dietitian to ensure your nutrient needs are being met.

Infant formula

Babies who aren't breastfed, or are partially breastfed, should be fed an infant formula that has the proteins broken down into smaller pieces. This is called an *extensively hydrolyzed casein* formula.

Some babies may react to an extensively hydrolyzed casein formula and need proteins to be broken down even more. This is called an *amino acid-based* formula.

Babies with a milk allergy may also react to soy formula. Talk to your child's doctor or dietitian before trying a soy formula. If you try a soy formula, watch for signs of an allergic reaction.

Keep using formula up to 2 years of age. If using a soy formula, switch to a soy follow-up formula when your child turns 1 year old to help meet your child's calcium needs.

Ask your child's doctor or dietitian what type of formula is best for your baby. You may need to ask a pharmacist to order it for you.

Recommended type of formula: _____

Soy and other plant-based beverages

Don't use soy or other plant-based beverages (like coconut, hemp, potato, rice, oat, or almond) for children under 2 years. They don't have enough protein, energy, and healthy fat to help your child grow and develop.

At 2 years, you can switch children from breastmilk or formula to a soy beverage fortified with calcium and vitamin D.



What about milk from other animals?

A child who's allergic to cow's milk is often allergic to milk from other animals, such as goats, sheep, or buffalo, as the proteins are very similar. **Talk to your child's doctor or dietitian before giving other animal milks to your child.**

Milk in baked goods

Some older children may develop tolerance to milk in baked goods over time. **Talk to your child's doctor or dietitian before giving baked goods containing milk to your child.**

Starting solid foods

- Babies should start solid foods when they're around 6 months old.
- Try only 1 new food at a time. Wait 2 days before offering another new food.
- Offer a variety of foods, including eggs, wheat, peanuts, or fish. Don't give foods your baby is allergic to.
- Many baby cereals with iron have milk added. Read the label and choose one without milk or milk ingredients.
- **Don't give your baby foods and drinks that contain milk or milk ingredients.** See the list on the next page for more information.



Managing your child's allergy may seem hard at first—it should get easier over time.



Read food labels to choose foods without milk or milk ingredients

- Read the ingredient list on the food label every time you buy a product because the ingredients may change.
- **Products that contain any milk or milk ingredient must be labelled with the word “milk”.**
- Avoid food that has the words “milk”, “contains milk”, or “may contain milk” on the label.



X

Ingredients: Rice flour, dry skim milk, dicalcium phosphate, safflower oil, soy lecithin, iron, natural flavour.

X

Contains milk

- **If you're not sure if a food has milk or milk ingredients in it, avoid it.** Ask the food manufacturer or a healthcare provider for more information.

Avoid foods that contain milk in any form

- **Butter:** including butter fat, butter flavouring, butter oil, butter solids, buttermilk, and ghee
- **Cheese:** all cheeses, including cheese curds, cottage cheese, cream cheese, dairy cheese, feta cheese, processed cheese, quark, and ricotta cheese
- **Cream:** including cereal cream, dried cream, half and half cream, ice cream, light cream, sour cream, and whipping cream
- **Custards and puddings made with milk**
- **Milk:** including buttermilk, condensed milk, evaporated milk, ice milk, kefir, kumiss, lactose-free milk, lactose-reduced milk, powdered milk, and skim, 1%, 2%, and 3.25% (homogenized) milk
- **Yogurt and frozen yogurt**

Avoid foods with these words on the label (they contain milk)

- **Casein, caseinate:** including ammonium caseinate, calcium caseinate, caseinate hydrolysate, hydrolyzed casein, magnesium caseinate, potassium caseinate, rennet casein, and sodium caseinate
- **Lactose, lactalbumin, lactalbumin phosphate, lactoferrin, lactoglobulin**
- **Milk:** including acidophilus, buttermilk, buttermilk solids, dried or sour milk solids, hydrolyzed milk protein, milk derivative, milk fat, milk ingredients, milk protein, and modified milk ingredients
- **Opta® or Simplese®** (fat replacers)
- **Whey:** including delactosed whey, demineralized whey, hydrolyzed whey, sweet dairy, whey hydrolysate, whey powder, whey protein concentrate, and whey protein isolate

These foods and ingredients are safe:

- Calcium lactate
- Calcium stearoyl lactylate
- Cocoa butter
- Cream of tartar
- Oleoresin
- Sodium lactate
- Sodium stearoyl lactylate

Other sources of milk

- The **wax coating on some fresh fruit and vegetables** may contain casein (milk). Wash fresh vegetables and fruit well before using.
- Some **medicine** contains milk proteins. Talk to your pharmacist for more information.

The lists on this page are only a guide and may change. Food and food products bought from other countries may not follow the same labelling standards as Canada.

Getting enough calcium and vitamin D

When milk is taken out of the diet, it can be hard to get enough calcium and vitamin D. Both are needed to build strong, healthy bones and to support good health.

Calcium

- Most babies will get enough calcium from breastmilk or formula, until the age of 1.
- After your baby’s 1 year old, keep offering breastmilk or formula, and talk to a dietitian to make sure your baby’s calcium needs are being met.
- If using a soy formula, switch to follow-up soy formula at 1 year of age to help meet increased calcium needs.
- Children 2 years and older should drink 2–3 cups (500–750 mL) of fortified soy beverage each day to meet their calcium needs.
- After 6 months of age, offer a variety of foods with calcium, like tofu made with calcium, baked beans, broccoli, and spinach.



Vitamin D

- All babies and children in Alberta need a 400 IU vitamin D supplement every day.
- Foods with vitamin D include infant formula, fortified soy beverage, fatty fish (salmon, herring, and rainbow trout), eggs, and margarine.

Age	Calcium needs each day	Vitamin D needs each day IU= International Units
Babies and Children		
0–6 months	200 mg	400 IU
7–12 months	260 mg	400 IU
1–3 years	700 mg	600 IU
Breastfeeding Moms		
18 years and younger	1300 mg	600 IU
19–50 years	1000 mg	600 IU

Can a child outgrow a milk allergy?

Most children outgrow a milk allergy by the time they’re 1–3 years old. Talk with your child’s doctor before adding foods that contain milk or milk ingredients back into your child’s diet. The doctor can tell you when and how to safely offer milk to your child.

For more information

See the [Food allergies and intolerances](#) information from Health Canada. Visit www.healthycanadians.gc.ca and click on [Health](#) > [Food & nutrition](#) > [Food allergies & intolerances](#).