

Position Statement on Pre-packaged early weaning products marketed to prevent food allergies

Food allergy remains a significant public health issue effecting around 6% of UK infants. Recent evidence has demonstrated that a delay in the introduction of certain food allergens beyond 6 to 12 months of age, such as egg and peanut, can increase the risk of allergy to these foods developing, particularly in children at high risk of food allergies (such as those with eczema). These findings have been reflected in public health guidance, such as in the UK, where exclusive breastfeeding is recommended until around 6 months of age, with egg and peanut introduced alongside this as complementary foods from 6 months. The British Society for Allergy & Clinical Immunology (BSACI) has produced guidance for both healthcare professionals and parents, explaining the evidence behind early introduction of allergenic foods to babies at higher risk of developing food allergies, with practical guidance as to how to achieve this. View this guidance [here](#).

Following changes to public health guidance on the introduction of allergens, such as egg and peanut, a number of commercially produced early 'weaning' foods have become available in the US and these are now starting to appear in the UK. These are marketed on the premise that they specifically contain one or more of the common paediatric food allergens. The allergen content of these foods varies significantly, with some containing very small amounts of allergen, despite there being very limited evidence of an allergy preventative effect from feeding infants small amounts of allergens. Such food products are also significantly more expensive than allergenic foods in their normal form and do not carry the nutritional benefits that the consumption of milk, egg, nuts and other potentially allergenic foods provide to a growing child. There is additional concern that consumption of a product that contains multiple potential allergens together may result in difficulty identifying the cause of any reaction that may occur and instigate delay in further introduction whilst testing is arranged.

As experts in infant nutrition, we believe that these products represent an over-medicalisation of infant feeding and the introduction of complementary foods, which risks unnecessary expense and complication for parents and provides no nutritional benefit compared to consuming the potentially allergenic foods in their natural form. These products also do not consider the significant variation in dietary, cultural and religious requirements within the population. We believe that existing public health advice, supported by guidance from specialist societies and the NHS, provides evidence-based information to ensure that complementary foods are introduced optimally using food in its natural form and motivating timely introduction of allergens as appropriate, whilst protecting continued breastfeeding wherever possible.