

Clinical Newsletter for Telehealth Triage Nurses

June 2022

KEY POINTS

- The US baby formula shortage is now a crisis, but one with an endpoint.
- This newsletter provides interim advice to help telehealth nurses deal with these challenging calls.
- Most calls about healthy infants on standard formula can be handled by nurses independently.
- For children on specialty formulas, the PCP should be involved. Ideally, these decisions should be made in the office when open.

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Formula Shortage in the United States – Helping Parents

The current baby formula shortage in the United States is increasing pediatric calls to offices and after-hours call centers. The shortage is due to supply chain issues from the COVID-19 pandemic and the temporary shutdown of Abbott Nutrition's formula production in February 2022. During this acute shortage, here are some tips to handle these calls from worried parents who can't find the usual formula for their child.

Cow's Milk-Based Formula (80% of Infants) – Substitute Formulas

- Recommendation: Switch to any available standard infant cow's milk-based formula you can find. Store brand infant formulas may be more readily available and the best option right now. Store brands are available from Walmart, Target, Kroger, Walgreens, CVS, Meijer, HEB, Safeway, Sam's Club, Topco and Amazon. All are safe and similar to the brand name formula products such as Similac, Enfamil and Good Start.
- Soy infant formulas may also be used temporarily.
- Higher calorie formula for preterm babies may be used on full-term babies if you don't have any other choice. Can use for a few weeks per the American Academy of Pediatrics (AAP).
- Last Resort: Infants 6 months and older can use whole cow's milk
 TEMPORARILY until they can find baby formula. Then go back to
 formula. For 6-11 months of age, do not use for over 1 week (per
 the AAP). For infants over 11 months of age, you can switch solely
 to whole milk. To help with nutrients that are not in whole cow's
 milk, increase intake of iron-fortified baby foods (such as iron enriched cereals, meats, etc.). Reason: to prevent anemia.
- For infants on formulas such as Similac for Spit Up or Enfamil AR for severe reflux, you can use a store brand substitute that has cereal added. You can also substitute a regular cow's milk formula and add cereal on your own to thicken the feedings. The correct mixture is usually 1 or 2 teaspoons of dry baby cereal per ounce of formula. (Note: The American Academy of Pediatrics recommends using oatmeal baby cereal, not rice cereal.) Check with your pediatrician during office hours if you have questions on how to do this.

Soy-Based Formula – Substitute Formulas

- Switch to any available infant soy-based formula you can find. Store brand soy infant formulas may be more available and the best option currently.
- If no known milk allergy, could also try a store brand cow's milk formula temporarily. (See above section).
- Infants close to 1 year old can use regular soy milk TEMPORARILY until
 they can find soy formula. Then go back to soy formula. Do not use for
 over 1 week, per the AAP, unless 11 months or older. Look for a regular soy milk
 fortified with calcium and vitamin D.



- Most babies on these types of formulas have allergies, metabolic diseases, or digestive tract diseases.
- If the family can't find their baby's specialty formula, the pediatric HCP or a pediatric dietician should be involved in the decision about switching to a safe substitute formula.
- Formulas included in this category are hydrolyzed protein formulas (such as Nutramigen, Pregestimil, Alimentum, Gerber Extensive HA). This also applies to amino acid/elemental formulas (such as Neocate, EleCare, Alfamino, Puramino).

Precautions for Non-Formula Substitutes

The following products are not formula substitutes and should **not** be used as a replacement:

- Homemade formula, such as those made with evaporated milk. Reason: does not have adequate iron and vitamins your baby needs. Also, can be contaminated with bacteria during preparation and an infection risk for your baby.
- Watered-down formula. This not only reduces the calories your baby needs to grow, but can be harmful.
- Toddler formula. Should not be used for young infants. If babies are close to 1 year old, they can be used for a few days. (per the AAP)
- Water, infant tea, or juice. Reason: lack adequate calories and can be harmful.
- Pedialyte. Reason: no protein needed for growth.
- Goat's milk or plant-based regular milk products such as almond, oat, rice and coconut milk. Reason: not enough calories or protein for normal growth.
- Evaporated, dried, condensed, or powered milk products.

Where to Find Formula if Substitute Formula Advice Does Not Work – Best Options

 Anyone insured by WIC should contact their local WIC agency. During this crisis, most states have waived the prescription requirement for formula type. Medicaid also has agreed to pay for any formula that WIC is unable to provide.

- Check smaller stores (e.g., convenience stores) or drug stores (e.g., Walgreens) for formula if bigger grocery chains are out.
- Look for comparable store brands. They are more likely to be in stock than brand names such as Similac. If not on shelves, order formula on-line (might have better supply available).
- Liquid ready-to-feed formula or liquid concentrate may be an option instead of powdered formula. However, it is more expensive.
- You may use formula brands imported from Europe or other countries, as long as they are FDA approved.

Other Formula Resources

- Local food banks, local United Way (call 211) or local Community Assistance Agencies at https://communityactionpartnership.com/find-a-cap. Search by your zip code.
- Social networking or on-line parenting sites for places that may have stocked formula.
- State's public health department website.
- Formula manufacturer's website (such as Abbott) may have other options for high-risk patients.
- Donor breastmilk banks may also be an option especially for premature and high-risk babies. Most milk banks require a prescription.

Websites for Nurses and Parents for Current Information

- American Academy of Pediatrics (AAP) sound advice from Dr. Steven Abrams: <u>www.healthychildren.org/English/tips-tools/ask-the-pediatrician/Pages/are-there-shortages-of-infant-formula-due-to-COVID-19.aspx</u>
- US Health and Human Services: https://hhs.gov/formula/index.html
- North American Society for Pediatric Gastroenterology, Hepatology and Nutrition for a table of comparable formulas: https://naspghan.org/recent-news/naspghan-tools-for-hcps-affected-by-formula-recall

Surviving this Temporary National Baby Formula Shortage

Advise callers only to buy a 2-week supply so there will be enough baby formula for everyone who needs it. The Abbott Nutrition formula plant has re-opened. This shortage hopefully will be resolved within the next few months. In the meantime, we hope this information will help support telehealth nurses in reassuring and empowering most callers to find an appropriate formula substitute.