NHS
East and North Hertfordshire
Clinical Commissioning Group

Herts Valleys Clinical Commissioning Group

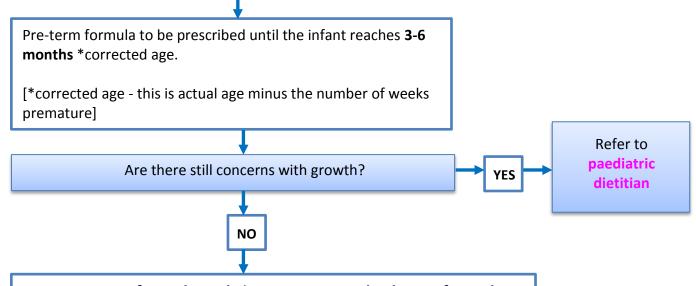
FLOW CHART FOR MANAGING PRE-TERM INFANTS

- Infant will have had their pre-term nutrient enriched formula commenced in hospital before discharge.
- These formulae should <u>not</u> be used in primary care to promote weight gain in patients other than babies born prematurely.

Babies born <34 weeks gestation, weighing <2kg at birth who are not breast fed will be initiated on: -

- Nutriprem 2® powder
 OR
- Birth up to a maximum of 3-6 months
- SMA Gold Prem 2® powder *corrected age
 Secondary care initiation only and prescribing to be continued by
 GP in primary care until infant reaches 3-6 months *corrected
 age.
- Monitoring of growth (weight, length and head circumference) carried out by Health Visitor
- The infant should already be under the regular review by the secondary care paediatrician
- Any concerns with baby's growth whilst on preterm infant formulae, refer to paediatrician and paediatric dietitian (see management flow chart for faltering growth)
- The preterm formula should be stopped if there is excessive weight gain at any stage up to 6 months *corrected age

- **POWDER** formula <u>only</u> to be prescribed.
- Nutriprem 2® or SMA Gold Prem 2® <u>liquids</u> should NOT BE ROUTINELY prescribed unless there is a clinical need in rare instances e.g. immunocompromised infant. This reason and duration should be clearly indicated by secondary
- Cost per 100kcals is £1.14 to £1.21 for the liquid compared to 25p to 28p for the powder formula.



Stop pre-term formula and change to a **standard term formula** *Pre-term formula should be discontinued by 6 months *corrected age*

Quantities of specialist formulae to prescribe

When any infant formula is prescribed the guide below should be used: Powder Formula

Age of Infant	Number of tins for 28 days and Basis for Recommendation						
	13 x 400g tins OR 6-7 x 800g tins OR 6 x 900g tins						
Under 6 months	Infants <6 months are exclusively formula fed and drink (on average)						
	150ml/kg/day of a normal concentration formula.						
6 – 12 months	7-13 x 400g tins OR 3-7 x 800g tins OR 3-6 x 900g tins						
6 – 12 months	Infants aged 6-12 months require less formula as solid food intake increases						
	7 x 400g tins OR 3-4 x 800g tins OR 3 x 900g tins						
Over 12 months	The Department of Health recommends infants >12 months drink 600ml of						
	milk or milk substitute per day						

- Always review recent correspondence from the paediatric dietitian/paediatrician
- Some infants may require more than the quantities stated above e.g. those with faltering growth

DOS AND DON'TS OF PRESCRIBING SPECIALIST INFANT FORMULAE

Do:

- Promote and encourage breast-feeding wherever possible where it is clinically safe
- Check any formula prescribed is appropriate for the age of the infant
- Check the quantity of formula prescribed is appropriate for the age of the infant and refer to the most recent correspondence from the paediatric dietitian
- Refer where appropriate to the paediatric dietitians and/or secondary/specialist care (as indicated in the management flow charts)
- Seek prescribing advice if needed in primary care from the CCG Pharmacy & Medicines Optimisation Team (PMOT) Herts Valleys CCG 01442 898888 or East and North Herts CCG 01707 361251.
- Seek prescribing advice if needed in secondary care from the hospital Medicines Information Centre Herts Valleys 01923 217853 or East and North Herts 01438 284969

Don't:

- **Do not** add infant feeds to the repeat prescription list in primary care, unless a review process is in place to ensure the correct product and quantity is prescribed for the age of the infant.
- **Do not** prescribe Nutriprem 2® **liquid** or SMA Gold Prem 2® **liquid** unless secondary care has specifically stated a clinical need e.g. immunocompromised infant.

National and Local Spend

These guidelines consider both clinical and cost effectiveness in its recommendations. Some products may not be the least expensive but are considered the most appropriate first line product for the condition. It is important to ensure that these products are only commenced in secondary care and that they are discontinued when the infant reaches 6 months corrected age. The liquid preparations should not be routinely prescribed but should be reserved for when there are clinical reasons eg immunocompromised infant. Potential cost savings can be realised by appropriate cessation of treatment and appropriate prescribing of the liquid preparations. Local annual prescribing spend for this indication - £66k for ENHCCG and £44k for HVCCG.

Costs of Specialist Infant Formulae

PRODUCT	Manufacturer	Presentation	Pack	Pack Size (g or ml)	COST* per Pack	COST per 100g or ml	COST per 100kcal
PRE-TERM INFANT FORMU	PRE-TERM INFANT FORMULA						
SMA Gold Prem 2 [®] Powder	SMA Nutrition	Powder	Tin	400	£5.30	£1.33	£0.25
Nutriprem 2® POWDER	Cow & Gate	Powder	EaZypack	900	£11.52	£1.39	£0.28
Nutriprem 2 [®] LIQUID	Cow & Gate	Liquid	Bottle	200	£1.68	£0.84	£1.12
SMA Gold Prem 2 [®] LIQUID	SMA Nutrition	Liquid	Carton	250	£2.10	£0.84	£1.15

^{*}Cost obtained from Dictionary of Medicines and Devises (DM&D) prices March 2016

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	Use as 1 st line		Secondary care initiation. Not routinely started in primary care.				
	Use as 2 nd line		Available to purchase over the counter (OTC) at a similar cost to standard infant formula				
	Ready to feed liquid not to be routinely prescribed instead of powder feed – only in rare clinical circumstances – this reason						
	and the duration sh	the duration should be clearly stated by secondary care					

Acknowledgements, References and Appendices: Please refer to the full document: Hertfordshire Guidelines on Specialist Infant Feeds (HMMC) Feb 2015 (Updated June 2016).