

## Uncommon Presentation of CMPA: FTT in a 6-month-old

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- Disclosures
  - Honorarium provided by Nutricia for this presentation.
  - American Academy of Pediatrics – spokesperson

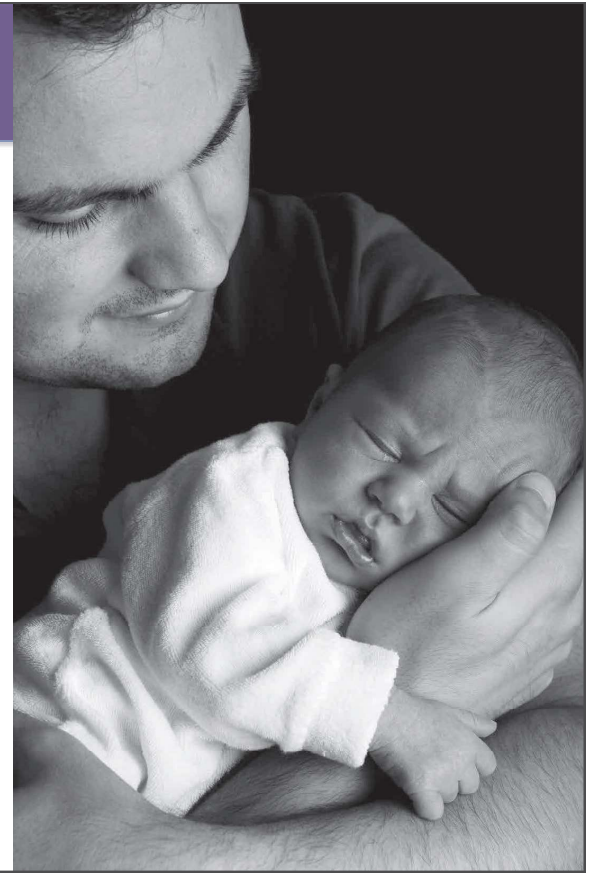
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## Case Study: Baby LD



### History

- FT, NSD, BF baby with normal growth along 25-50<sup>th</sup> percentile until 6 months old
- He started daycare at 4 months, along with his older brother, and experienced several viral illnesses, including, adenovirus, norovirus, COVID, s/p OM x 2, constant congestion, and refusal to eat
- Parents had denied any rashes, blood in the stool, diarrhea/watery or green mucousy stools, constipation, vomiting, back arching, or irritability

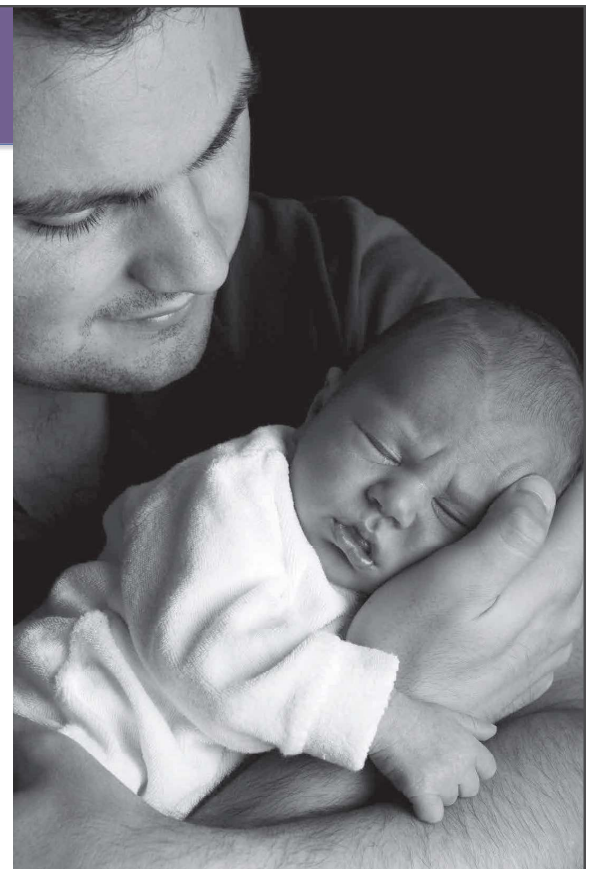


## Case Study: Baby LD



### History

- His initial feeding refusal was thought to be from back-to-back viral illnesses, along with decreased maternal milk supply. Supplementation after BF with formula and complimentary foods were instituted, with continued poor weight gain and feeding aversion
- At 7 months old he was seen by Peds GI with a negative work-up, including normal celiac panel, chemistries, cbc (hgb 12), inflammatory markers, and abdominal sono. His cow's milk formula was fortified to 22 calories/ounce.
- Parents felt when the formula was fortified, he became fussy

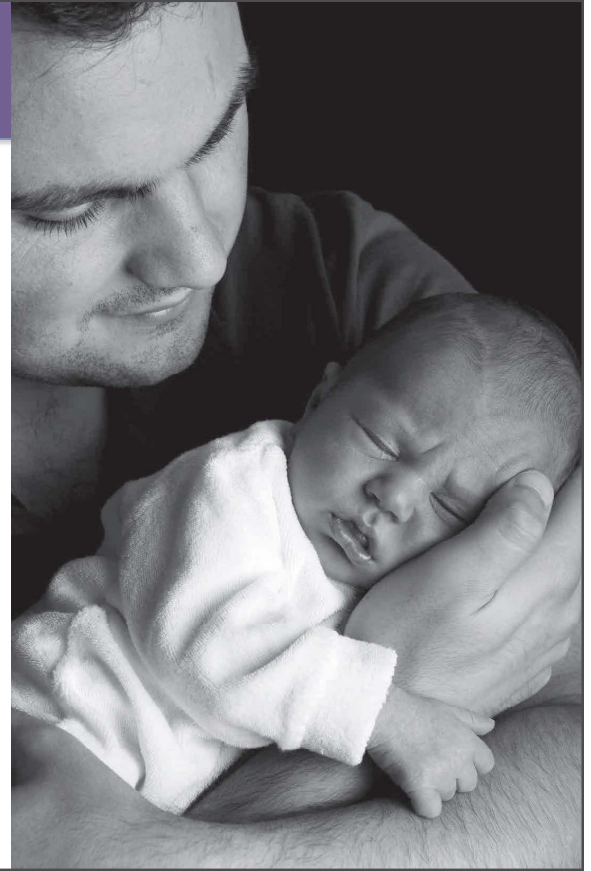


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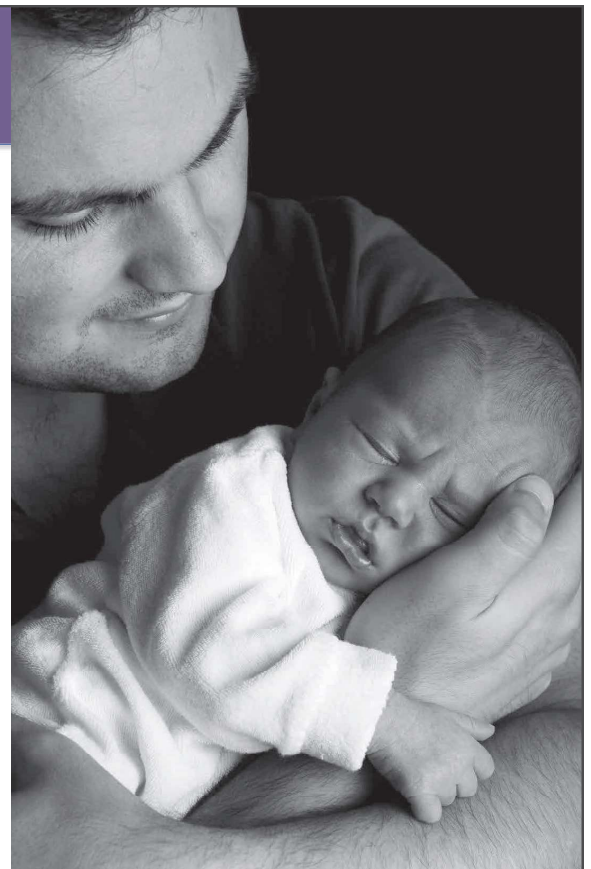
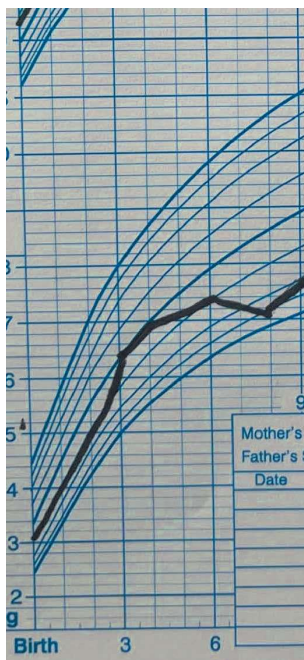


## History

- At 8 months LD was down to the 5%, continued with feeding refusal, and was referred to speech and swallow with a negative work-up
- Parents were also concerned about continued congestion and sought out an ENT referral, which also yielded normal results
- Due to multiple illnesses, and FTT, immune work- up initiated, was negative and child was taken out of day care, upon which he remained steady on his growth curve, and he remained illness free
- At 8.5 months he caught another gastro illness and with refusal to eat presented to ED with dehydration. Bloodwork there revealed a Hgb of 10, at which point he was guaiac positive



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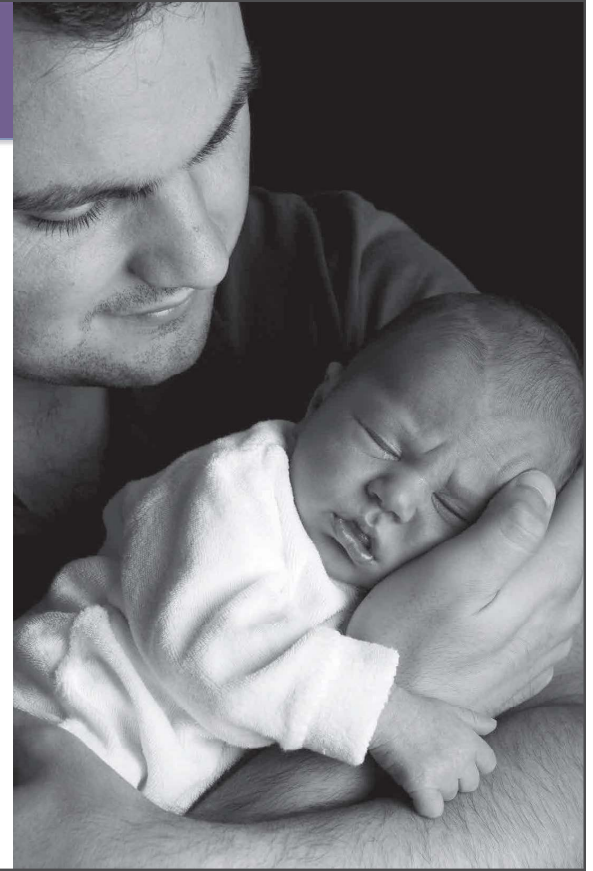


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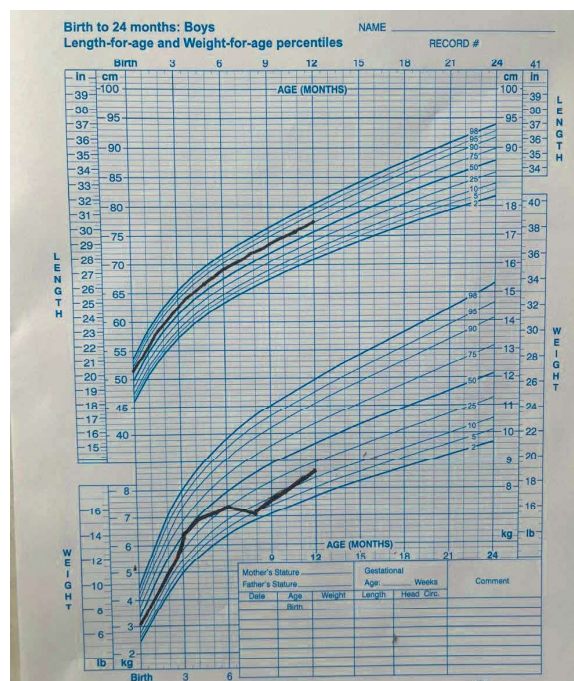


## History

- Given his FTT and Hgb drop, GI decision made to start the baby on whey based eHF with lactose
- Parents report with switch to whey based eHF with lactose, he was happier, no discomfort and began eating more formula as well as solid foods
- At the 9mo visit he was back at 10<sup>th</sup> percentile and at 12 months at 20<sup>th</sup> percentile.



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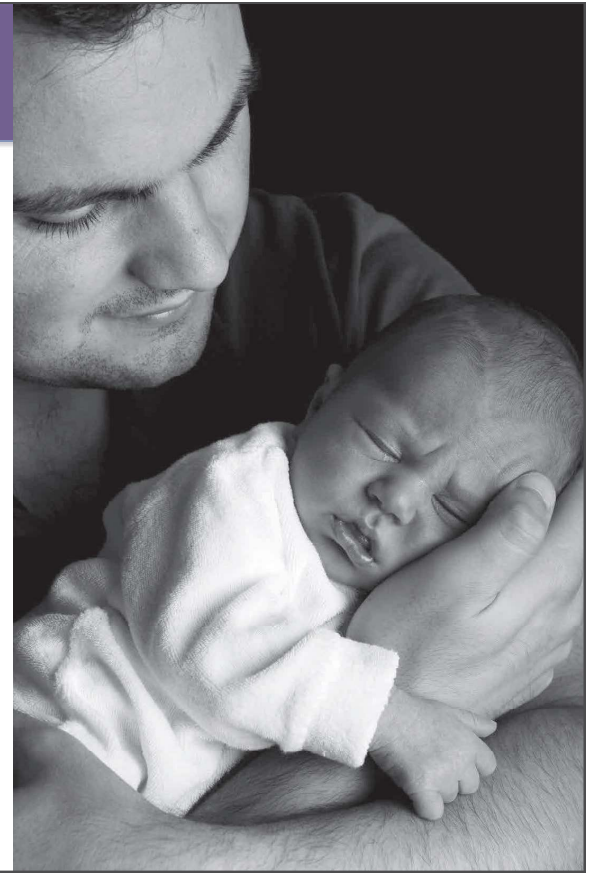
## A X months of age:

- 1) 3 months- 14lbs
- 2) 6 months-16.8lbs
- 3) 8 months-15.8lbs



## Anthropometric changes:

- 1) 50%
- 2) 25%
- 3) 5%



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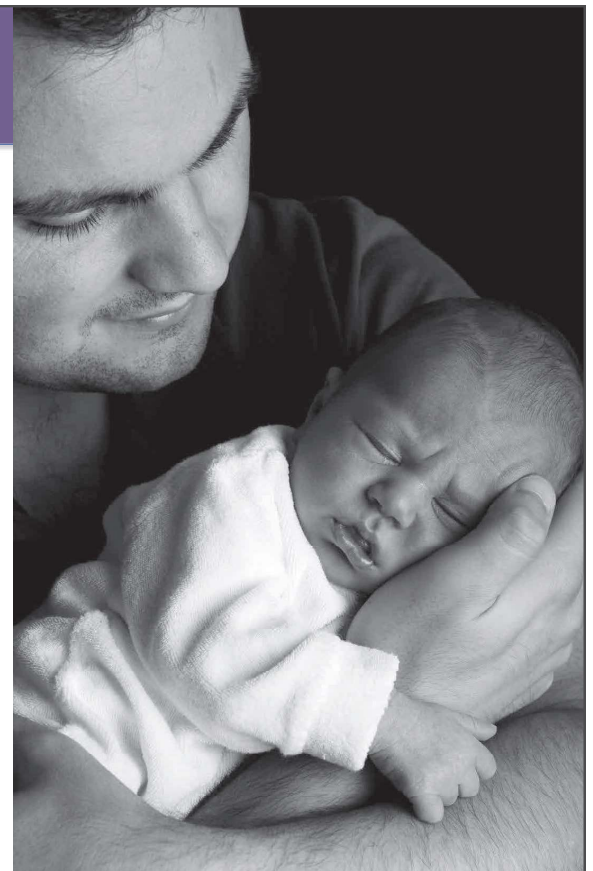
## A X months of age:

- 1) 8 months-5%
- 2) 9 months-10%
- 3) 12 months- 20%



## Regimen change:

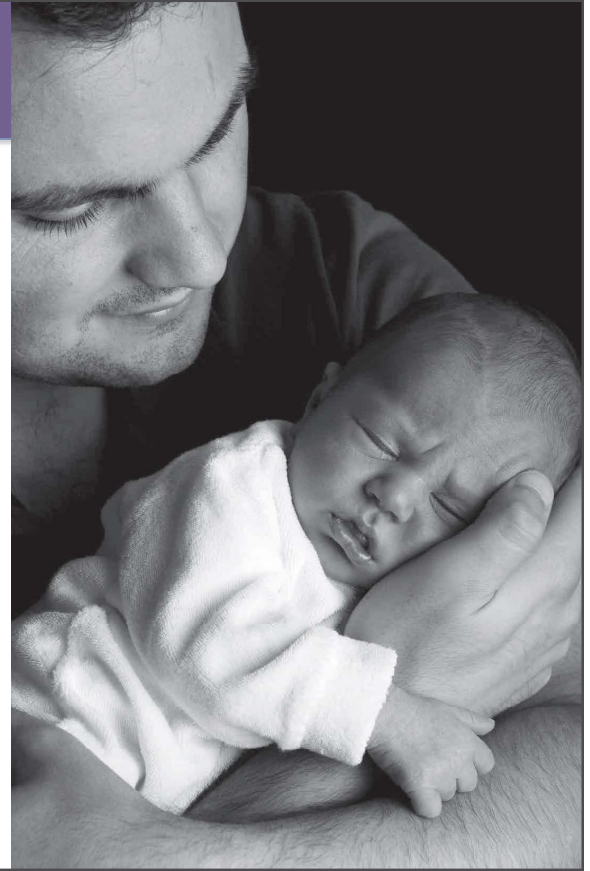
- 1) Inc calories of cow's milk formula
- 2) Changed to whey based eHF with lactose and high calorie foods
- 3) Continued on whey based eHF with lactose and high calorie foods



## Case Study: Baby LD

### 4 weeks after regimen change:

- Regained percentile on growth curve and steadily gaining weight
- Food refusal resolved, eating higher volumes and overall happier baby



## Case Study Summary



1

Not all CMPA present as the typical green mucousy, blood flecked stool and rashes

2

In a baby with FTT, think of CMPA and order a stool guiac

3

Health care professionals need to be aware of the various presentations of CMPA since there is no one pathognomonic “symptom” or diagnostic test