

# Novalac Management Guide

FOR HEALTHCARE PROFESSIONAL USE ONLY

## Symptoms

## Formulation

## Benefits for baby

### Cow's Milk Protein Allergy

Impaired growth, wheezing, unexplained crying, regurgitation, diarrhoea, constipation and rash.



- The first and only 100% rice protein-based infant formula in Australia
- Hypoallergenic

#### % Tolerated

Tolerated by >90% of babies with confirmed CMPA<sup>1-3</sup>

- Helps babies return to normal weight and growth patterns<sup>1-5</sup>
- Reduces allergy symptoms such as regurgitation, rash, diarrhoea, and constipation<sup>1-3</sup>
- Provides an amino acid profile similar to breast milk
- Has a mild, pleasant taste<sup>1,2,6</sup>

**Nutritionally complete**

### Constipation

Abdominal discomfort, delay or difficulty in passing stools.



- High levels of lactose (100% of total carbohydrates)
- Increased magnesium
- High calcium: phosphorous ratio (2:1)

#### Clinical Trial Results with Novalac Constipation (n=604):<sup>8</sup>

% cases resolved	Time to resolution
91.6%	7 days

- Significant increase in number of stools/day.<sup>9</sup>

- Increases water content in stools to gently aid movement through the intestine
- Encourages gastric emptying
- Softens stools

**Nutritionally complete**

### Reflux

Frequent spitting up or vomiting, a reflux cough, difficulty swallowing food.



- Specially treated cornstarch

#### Clinical Trial Results with Novalac Reflux (n=441):<sup>8</sup>

% cases resolved	Time to resolution
81.0%	6 days

- Significant reduction in total number of reflux episodes/hour ( $p < 0.001$ ) and reflux episodes lasting >5 min ( $p < 0.0001$ ).<sup>10</sup>

- Thickens in the stomach, not the bottle

**Nutritionally complete**

### Colic

Excessive, frequent and unexplained crying or fussing in babies who are otherwise healthy and well fed.



- Reduced proportion of lactose (30% of total carbohydrates)
- Whey dominant (60% of total proteins)
- Non-fermenting maltodextrins (70% of total carbohydrates)

#### Clinical Trial Results with Novalac Colic (n=646):<sup>8</sup>

% cases resolved	Time to resolution
87.6%	8 days

- Crying and associated symptoms were greatly reduced.<sup>8</sup>

- Minimal excess lactose that will ferment in colon reducing wind and abdominal discomfort
- Sufficient lactose for mineral absorption

**Nutritionally complete**

### Sweet Dreams

Waking due to hunger. Overfed, excessive weight gain. Hungry baby.



- Slowly digested complex carbohydrates and long-chain Omega 3 fatty acids ( $\alpha$ -Linolenic acid)
- Casein-dominant (80% of total proteins)

#### Clinical Trial Results with Novalac Sweet Dreams (n=2,008):<sup>11</sup>

Milk volume reduction	Time Period
11.0%	7 days

- Helps to normalise weight gain after 30 days.<sup>11</sup>

- Provides a long-lasting feeling of fullness that meets infant energy requirements
- Slows gastric emptying

**Nutritionally complete**

### Novalac Diarrhoea

Frequent, loose and watery stools. Reduced appetite.



- Casein-dominant (90% of total proteins)
- High concentration of electrolytes
- Low Lactose\*

#### Clinical Trial Results with Novalac Diarrhoea (n=378):<sup>8</sup>

% cases resolved	Time to resolution
92.6%	3 days <sup>8</sup>

- Novalac Diarrhoea is suitable for short-term use only.

- Helps to rehydrate
- Low lactose to avoid secondary intolerance\*
- Pleasant banana and apple taste

Breast milk is best for babies. Professional advice should be followed before using an infant formula. Introducing partial bottle feeding could negatively affect breastfeeding. Good maternal nutrition is preferred for breastfeeding and reversing a decision not to breastfeed may be difficult. Infant formula should be used as directed. Proper use of an infant formula is important to the health of the infant. Social and financial implications should be considered when selecting a method of feeding. <sup>A</sup>Babies aged over 6 months should be offered solid food in addition to infant formula.

\*Lactose: < 0.00135 g / 100 mL, Galactose: < 0.00135 g / 100 mL. 1. Vandenplas Y et al. Eur J Paediatr. 2014; 173(9):1209-16. 2. Vandenplas Y et al. Arch Dis Child. 2014; 99:933-6. 3. Reche M et al. Pediatr Allergy Immunol. 2010; 21:577-85. 4. D'Auria E et al. J Int Med Res. 2003; 31:215-22. 5. Agostoni C et al. Pediatr Allergy Immunol. 2007; 18:599-606. 6. Pedrosa M et al. J Investig Allergol Clin Immunol. 2006; 16:351-6. 7. Australian Society of Clinical Immunology and Allergy. Cow's milk protein allergy. 2019. 8. Pina DI et al. World J Gastroenterol. 2008; 14(2):248-54. 9. Le Luyer B et al. Excerpts from RIP 2002, Tome XXXIII; no. 316:5-8. 10. Xinias I et al. Dig Liver Dis. 2005; 37(1):23-7. 11. Maurage C, Nathan P. "Greedy/hungry" infants (translation)." Nutrition & Endocrinologie. 2007; 5.