Food Sensitivities in Breastfed Babies

If a breastfeeding baby is fussy, one of the questions a mother will often ask is whether her baby is allergic to something that she is eating. In recent years, it has become increasingly common for a breastfeeding mother to be told that her baby is sensitive to something in her diet.

- **A classic food allergy** is when the immune system reacts to a food immediately by releasing histamines, which can lead to hives, difficulty breathing, and/or low blood pressure.
- **A food intolerance or sensitivity** is when a baby may be fussy, or have other less-serious symptoms, usually within hours of eating a food, or, after being exposed to a food through their mother’s milk.

The majority of infants with a food sensitivity will outgrow it by age three.

**Why are more mothers being told their babies are sensitive to certain foods?**

Breastfeeding is designed to expose newborns to tiny amounts of food proteins via their mother’s milk. This allows the immune system in their gut the opportunity to learn to “tolerate” these foreign proteins without over-reacting. A baby’s gut expects to see these proteins again sometime in the future, and ignore them. However, for some reason, some babies seem to be sensitive to something their mother eats.

We don’t really know everything that can cause a baby to have excessive fussiness. But health care providers are recognizing that fussiness or “colic” is often “cured” when a mother makes changes in her diet. Whatever the reason for a baby’s fussiness, it is important to keep in mind that breastfeeding is still the best nutrition possible for a baby.

**Why do most children outgrow a food sensitivity?**

It may be that as the immune system of a baby matures, the inflammatory response decreases. And, as the digestive tract matures, it becomes less easy for foreign substances to cause an irritation.

**What are the most common symptoms of a food sensitivity?**

- Eczema (dry, flaking skin – often on the face, but it may spread to other parts of a baby’s body)
- Fussiness (a baby who does not calm when being held or after being fed)
- Reflux (spitting up)
- Very liquid stools, stools with mucus, or infrequent stools (< one per day in a baby who has not started solids)
- Respiratory congestion (usually just a stuffy nose, with no mucous)
- Visible blood in the stool

None of the above symptoms always indicate a food sensitivity, and most babies do not have ALL of these symptoms. Food sensitivities are complicated and not well understood, even by the experts.
Breastfed babies can also be fussy because they are underfed, overfed, or their mom has too much milk – resulting in excess intake of the low-fat “foremilk” (See our information on An Abundant Milk Supply). Some babies may also exhibit an inability to calm themselves in the early months, resulting in more fussiness (See our information on Soothing Your Baby). Bloody stools indicate an irritation of the colon, but not all colon irritation is from a food sensitivity.

Physicians often diagnose a baby with a “food sensitivity” and send a mom to MilkWorks for more information. The breastfeeding educators at MilkWorks are not capable of diagnosing, nor treating, a food sensitivity. Our board-certified lactation consultants (IBCLCs) have the ability to share basic information and provide limited support to mothers, however, they do not have a guaranteed cure for a food sensitivity.

Most of what MilkWorks has learned about food sensitivities comes from Dr. Leeper, our breastfeeding medicine specialist, who has years of experience with food sensitivities in breastfed babies. Unfortunately, there are no reliable tests to diagnose a food sensitivity; it is up to the breastfeeding mother to determine what will help her baby, often by trial and error.

In OUR experience, the most common food sensitivities in breastfed babies are: cow’s milk (including ALL products made from cow’s milk), soy, corn, wheat, eggs, beef, rice, and nuts.

Skin testing or blood testing for a food sensitivity is not very accurate at any age. If your baby’s symptoms are “mild,” you could wait and see. If they are significant enough that you feel the need to do something, you could avoid cow’s milk products completely. You should be able to tell if you are on the right track within 72 hours, however, it may take up to two weeks for the symptoms to get as good as they are going to get. We do not recommend eliminating multiple foods at one time. A baby may temporarily improve if you do this, but it often backfires as a baby will become sensitive to the food that you ARE eating all the time.

Because cow’s milk is the most common food sensitivity in infants, we have a list of terms that indicate the presence of cow’s milk components or ingredients. This is especially helpful if you eat processed foods. A list of milk ingredients may be found in our Breastfeeding Information Center at www.milkworks.org.

MilkWorks also carries high quality probiotics for mothers and babies (see our information on Probiotics and Prebiotics), which may be a piece of the puzzle as to why we see food sensitivities in babies, but there is much for researchers to sort out. We highly recommend that you consult with your baby’s physician for a diagnosis and treatment, or consider making an appointment with Dr. Leeper in Lincoln or Omaha.

For more information, you may want to read Dealing with Food Allergies in Babies and Children by Janice Joneja, PhD. It is very comprehensive and addresses all aspects of food allergies.

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