

Faltering growth additional notes

Symptoms and diagnosis

- ⌚ It is not a condition in itself – there are lots of different possible explanations, with feeding problems being the most common.
- ⌚ UK WHO growth charts should be used to plot weight, length and head circumference.
- ⌚ The weight / length of an infant need to be measured properly to interpret changes in pattern:
 - Use only appropriate scales/equipment that are regularly serviced and/or calibrated
 - Remove clothing and nappies before weighing
 - Ensure staff is skilled and practiced
- ⌚ Pre-term birth, neurodevelopmental concerns and maternal postnatal depression/anxiety are factors associated with faltering growth.
- ⌚ If a child is not growing at the expected rate, it is important that this is picked up at an early stage and the reasons investigated. E.g. dehydration, acute illness, iron deficiency anaemia, CMPA, Coeliac disease, GORD or a child safeguarding issue.
- ⌚ In the majority of cases, there isn't an underlying medical problem and a baby can be successfully treated at home. However recognise that a range of factors may contribute to the problem and it may not be possible to identify a clear cause.
- ⌚ There may be difficulties in the interaction between an infant and the parents or carers that may contribute to the problem (but this may not be the primary cause).

Treatment

- ⌚ **Early days:** provide feeding support as per NICE guideline [NG194](#) and [NG75](#)
- ⌚ **Under 6 months:** Check frequency and timing/volume of feeds, as well as breastfeeding and/or bottle preparation technique. An infant's requirements are around 150mls/kg/day and most will need one or more feeds during the night.
- ⌚ **6 months and over:** Ensure appropriate solids are offered at regular intervals; ask about volume and frequency of milk and solids food. Once a food routine is established, milk intake should be around 500-600mls a day. More than that may compromise appetite for solids.

Review and discontinuation of treatment

- ⌚ All infants on high energy formula will need growth (weight and length) monitored to ensure catch up growth occurs but also prevent excessive weight gain.
- ⌚ Paediatric Dietitians or Paediatricians should advise if/when the formula should be stopped.

Formula	Presentation	Cost*	Cost / 100Kcal	Details
SMA Pro High Energy (SMA)	200mls	£1.96	£0.99	100Kcal /100mls From birth up to 8kg
Similac High Energy® (Abbott Nutrition)	60 / 200mls	£0.71 / 2.38	£1.18	
Infatrini® (Nutricia)	125 / 200mls	£1.51 / 2.40	£1.21	
Infatrini Peptisorb® (Nutricia)	200mls	£3.67	£1.84	+ malabsorption

*MIMS July 2018