



## ORIGINAL ARTICLE

## Attitudes towards cow's milk protein allergy management by Spanish gastroenterologist<sup>☆,☆☆</sup>

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**KEYWORDS**

Food allergy;  
Allergy;  
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**Abstract**

**Introduction:** Food allergy is an increasing health problem in the developed world. Cow's milk protein is the main cause of food allergy in infants. Without an appropriate diagnostic workup, there is a high risk of both over- and underdiagnosis and therefore, over and undertreatment. The objective of our study was to analyze the variability in cow's milk protein allergy (CMPA) management by pediatric gastroenterologists in Spain.

**Methods:** A 50 item questionnaire, including open and closed items in a Likert's scale from 0 to 5, was drafted and distributed through the Spanish Society for Pediatric Gastroenterology, Hepatology and Nutrition (SEGHNP) e-mail list.

**Results:** Seventy-three questionnaires were received back out of 321. Only 3 of the items achieved concordance greater than 90%. Thirty-three percent considered oral challenge to be necessary for the diagnosis of CMPA under any circumstance. Twenty-five percent considered that symptom improvement after cow's milk removal was enough for the diagnosis. Oral challenge was performed at home by 83.5% in non-IgE mediated cases. Extensively hydrolyzed casein formulas were the treatment of choice for 69.9%. Soy formulas were the last option. Almost all respondents were aware of the existence of clinical guidelines on CMPA, being European Society of Pediatric Gastroenterology, Hepatology and Nutrition guidelines the most followed (64.4%). Twenty-three percent considered that their knowledge about allergy was inadequate.

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☆☆ We presented these results in the Spanish Congress of Pediatric Gastroenterology, Hepatology and Nutrition in Gijón, May 2016 and in the World Congress of Pediatric Gastroenterology, Hepatology and Nutrition in Montreal, October 2016.

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**PALABRAS CLAVE**

Alergia alimentaria;  
Alergia;  
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**Conclusions:** Although CMPA is a prevalent condition that pediatric gastroenterologists have been treating for decades, we found a huge variability on its management. There is potential for improvement in this field among pediatric gastroenterologist in the future.

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**Manejo de la alergia a proteína de leche de vaca por los gastroenterólogos españoles****Resumen**

**Introducción:** La alergia alimentaria es un problema creciente, siendo la proteína de leche de vaca la principal causa en niños. Sin un proceso diagnóstico adecuado, existe un elevado riesgo de sobrediagnóstico e infradiagnóstico y, por lo tanto, de sobretratamiento e infratratamiento. El objetivo de nuestro estudio fue analizar la variabilidad en el manejo de la alergia a proteína de leche de vaca (APLV) por los gastroenterólogos pediátricos españoles.

**Métodos:** Se envió un cuestionario de 50 preguntas a través de la lista de email de la Sociedad Española de Gastroenterología, Hepatología y Nutrición Pediátricas.

**Resultados:** Recibimos 73 cuestionarios de los 321 enviados. Solo 3 de las respuestas lograron más del 90% de acuerdo. El 33% considera que la provocación oral es necesaria para el diagnóstico de APLV siempre. El 25% considera que la mejoría clínica tras la retirada de las proteínas de leche de vaca es suficiente para el diagnóstico. La provocación oral es realizada en domicilio por el 83,5% de los encuestados en APLV no IgE mediada. Los hidrolizados extensos de caseína son el tratamiento de elección (69,9%). Las fórmulas de soja, la última opción. Casi todos los encuestados conocían la existencia de guías de manejo de APLV, siendo las de la Sociedad Europea de Gastroenterología, Hepatología y Nutrición Pediátrica las más utilizadas (64,4%). El 23% considera que su conocimiento sobre alergia es inadecuado.

**Conclusiones:** Aunque la APLV es una patología prevalente que los gastroenterólogos pediátricos llevan décadas tratando, hemos encontrado una gran variabilidad en su manejo. Existe posibilidad de mejora en este campo en el futuro.

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**Introduction**

Food allergy is an increasing health care concern. Food allergy is defined as an adverse health effect secondary to a specific immune response that occurs reproducibly following exposure to a given food. The immune reaction may be IgE mediated, non-IgE mediated, or mixed. Cow's-milk protein is the leading cause of food allergy in infants and young children.<sup>1</sup> Without an appropriate diagnostic workup, there is a high risk of both over- and underdiagnosis and therefore, over and undertreatment. This could affect dramatically to children's quality of life. Moreover, milk avoidance, when it is not necessary, may disturb child's nutritional status or growth development.<sup>2,3</sup>

Although cow's milk protein allergy (CMPA) is a prevalent condition, its management is quite different depending on the attending physician. Several guidelines<sup>4-7</sup> from different organizations have been recently published in highly read journals, trying to unify the management of this condition among pediatric practitioners involved, including primary care pediatricians, pediatric gastroenterologists and pediatric allergologists.

The aim of our study was to analyze the variability in CMPA management by different pediatric gastroenterologist divisions in Spain.

**Methods**

A fifty-item questionnaire ([Appendix A](#)) was composed and sent through the Spanish Society for Pediatric Gastroenterology, Hepatology and Nutrition (SEGHNP) e-mail list, where the vast majority of pediatric gastroenterologists in Spain are included. This Society has a total of 321 members, among which 121 of them are full members. The questionnaire comprised open and closed items in a Likert's scale from 0 to 5, including questions about CMPA diagnosis, treatment and prognosis. The items score were grouped as follows: 0-1 "disagree"; 2-3 "undefined"; 4-5 "agree". The questionnaire was sent January 15th 2016 and the study was closed on January 31st. Data were anonymously included in a database and then analyzed with SPSS 20.0.

**Results**

Seventy-three questionnaires were received back. 56.9% of the respondents were SEGHNP full members. The median time of professional experience of the participants, was 16 years, ranging from 5 to 43 years.

Only 3 of the items reached more than 90% of concordance among the survey respondents. In other words, for those 3 items more than 90% of the survey respondents

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