

Nutrition for Babies with CF

Normal growth and development are the main nutritional goals for babies with CF. Optimising growth and good nutritional habits from the very beginning are extremely beneficial in CF. The team at Perth Children's Hospital will closely monitor your baby's weight and growth at clinic visits and the dietitian will provide tools and strategies aimed at keeping your baby at an optimal nutritional status.

Milk

In most cases, either breastfeeding or formula feeding will provide enough nutrition during the first six months. Breast milk is encouraged where possible, however, for some women can be very difficult. Be assured that formula is suitable for babies with CF. Energy supplements or concentrated infant formula top-ups can be used on recommendation from the CF dietitian.

Enzymes

Around 90% of babies with CF will have issues with their pancreas function, which is known as pancreatic insufficiency. Babies who are pancreatic insufficient will need Pancreatic Enzyme Replacement Therapy (PERT) when they eat food or drink nourishing fluids (e.g. milk) to allow their body to break down food and absorb nutrients. Without PERT, pancreatic insufficient babies are at risk of poor nutrient absorption leading to poor weight gain.

The most common enzymes used in Australia are called Creon. The dose of enzymes is based on how many grams of fat is in the feed. Enzymes are mixed with an acidic mixture such as apple puree and administered with a soft baby spoon at the start of each feed/meal.



Bowel health

Babies with CF can experience malabsorption of food, which can be revealed by their bowel movements and may include:

- Tummy pain and discomfort – in babies this may include squirming or tensing up muscles as well as facial expressions such as squeezing eyes shut or grimacing.
- Excessive, smelly wind.
- Greasy, oily poos.
- Diarrhoea and/or constipation.
- Hunger despite feeding well/eating lots of food.
- Poor weight gain and/or growth.

These symptoms can occur from incorrect enzyme dosage. If this is a common recurrence, you should speak with your child's CF dietitian.

Salt

People with CF, including babies, lose more salt through their sweat and require salt supplementation. For infants, this usually comes in liquid form and can be added to a bottle of expressed breast milk/formula or with water in a syringe.

Vitamins

Babies with CF often have deficiencies in fat-soluble vitamins A, D, E and K, due to their limited or total inability to absorb these vitamins, particularly those who are pancreatic insufficient, and will therefore require vitamin supplementation.

VitABDECK is a CF-specific multivitamin that is generally prescribed for people with CF, including infants. The VitABDECK capsule should be opened and required amount should be mixed in with apple or pear puree and spoon fed to your baby. If using apple puree doesn't work, it can also be dissolved with sterilised water and given orally via a baby syringe.

Solids

Solids should be introduced as normal, when your baby is showing signs of readiness. It is a good idea to talk to your CF care team about starting solids as you will need information on enzyme dosage.

Seeking help

Your baby's CF care team should always be your first port of call when questions or concerns arise. They are a valuable resource you can reach out to at your clinic visits and in between those visits.

Useful resources

- [Nutrition for Infants](#) (CFWA)
- [Information for New Parents](#) (CFWA)