

HiPP Comfort Special Formula - in cases of wind, colic* and constipation

The special ingredients of HiPP Comfort Special Formula can have a positive effect on digestion.

Special fat structure with high β -palmitate content

- Particularly easily digestible fat with a structure which very closely resembles the fatty acids contained in breast milk.
- Reduces the formation of calcium soap and provides for soft stool and less constipation^{5,6}

Reduced lactose content

- Reduces flatulence in the case of a temporary shortage of lactase
- Up to 40% less crying⁸⁻¹⁰

Hydrolysed protein

- Easier digestibility and better stool consistency
- Studies show significantly fewer symptoms in the gastrointestinal tract and less crying if a protein hydrolysate is administered to the infant^{7,11-13}

With *Lactobacillus fermentum*** and prebiotic dietary fibres (GOS***)

- Development of beneficial intestinal flora by the support of lactobacilli and bifidobacteria¹⁴
- Soft stool through prebiotic dietary fibres^{15,16}

**Suitable from birth on,
and therefore consistent with LCPs (DHA and AA)**

*in case of lactose-induced three months' colic

***Lactobacillus fermentum* CECT5716

***galacto-oligosaccharides derived from lactose

Important information:

Breastfeeding is best for your baby. HiPP Comfort Special Formula is suited as a dietary treatment for increased wind or constipation in infants and can be used under medical supervision from birth onward for exclusive nutrition.



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Special Formula

HiPP Comfort

In cases of wind, colic* and constipation

*in case of lactose-induced three months' colic

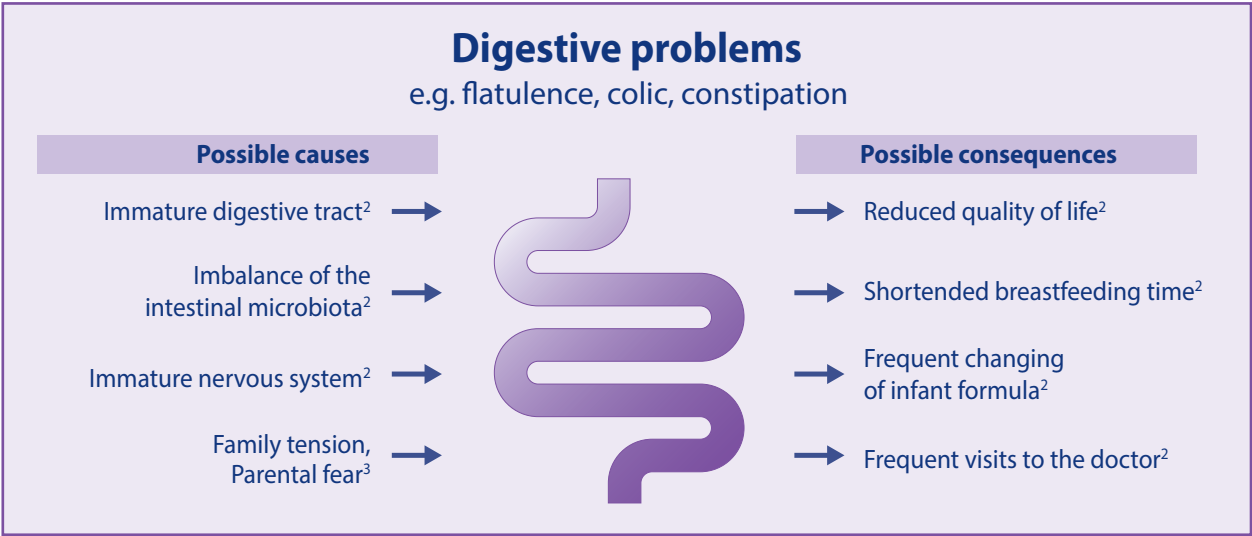
Information for health care professionals

hipp.com/hcp

References

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Every second infant suffers from non-specific digestive problems¹



New diagnostic criteria* for infant colic and functional constipation⁴

Infant colic

- ▶ An infant who is <5 months of age when the symptoms start and stop
- ▶ Recurrent and prolonged periods of infant crying, fussing, or irritability reported by caregivers that occur without obvious cause and cannot be prevented or resolved by caregivers
- ▶ No evidence of infant failure to thrive, fever, or illness

The Wessel criteria no longer apply.

Functional Constipation

Must include 1 month of at least 2 of the following in infants up to 4 years of age:

- ▶ 2 or fewer defecations per week
- ▶ History of excessive stool retention
- ▶ History of painful or hard bowel movements
- ▶ History of large-diameter stools
- ▶ Presence of a large fecal mass in the rectum

In toilet-trained children, the following additional criteria may be used:

- ▶ At least 1 episode/week of incontinence after them acquisition of toileting skills
- ▶ History of large-diameter stools that may obstruct the toilet

*Rome IV

Recommendations on how to handle infantile colic²

Clarification and reassurance for parents

- Crying as sign of hunger and fatigue
- Calm and regular daily routine
- Time limit of this phase (3-4 months with the peak at the age of 4-6 weeks)
- Comforting measures, such as holding the baby during a crying phase, can help.
- Encouragement to continue breastfeeding, take care of their own well-being and seek help



Nutritional measures

- A hydrolysed, lactose-reduced formula with prebiotics and probiotics can reduce the crying time of children who are not breastfed

Medicinal products are **not effective** and can produce serious side effects.

Recommendations on how to handle constipation²

Clarification and reassurance for parents

- Information on normal infant stool behaviour
- Breastfed children rarely experience constipation. Some breastfed children have bowel movements less than once a week.

Nutritional measures

- Continue breastfeeding; evaluation after 2-4 weeks
- Correct preparation of formula for bottle-fed infants
- A cows' milk protein allergy may be the reason for constipation in some children. However, constipation as the only manifestation of a cows' milk protein allergy is extremely rare.
- Children who are not breastfed can benefit from a formula with hydrolysed protein, prebiotics and β -palmitate.

In the case of children who are not breastfed and have functional constipation, nutritional recommendations may not be sufficient, thus **medicinal products** (laxatives) can have top priority in terms of treatment.