



Managing lactose intolerance:

A patient information leaflet

a guide for families

Lactose is the sugar in milk. It is present in all animal milks, including cow, goat and sheep. Lactose intolerance occurs when the body is unable to digest lactose due to a deficiency in the enzyme that breaks down lactose sugar, called lactase. This information leaflet provides advice on diagnosis and treatment of **secondary lactose intolerance**.

Symptoms include: abdominal bloating, passing lots of wind and smelly, green, watery stools. These symptoms occur as undigested lactose is fermented in the lower bowel.

There are 3 types of lactose intolerance

Secondary lactose intolerance. Usually occurs when the gut has been injured, such as after an episode of gastroenteritis and can last between 2-8 weeks. The body is temporarily unable to produce enough lactase to breakdown lactose due to this gut injury.

Primary lactose intolerance. A common condition that usually develops in older children or adults. The deficiency in lactase is gradual and brought about by a developmentally regulated change in the lactase gene expression.

Congenital lactase deficiency. This is a very rare condition, likely to be picked up within the first few days of life, caused by a mutation in the lactase gene which results in the absence of lactase.

Please note that there are currently no tests available to diagnose secondary lactose intolerance in children.

Diagnosis & treatment for secondary lactose intolerance

If lactose intolerance is suspected, a diagnosis is usually made by removing lactose from the diet and monitoring symptoms to see if they resolve.

Breastfed infants

Continue being fed as normal if secondary lactose intolerance is suspected. No change to maternal diet is required as lactose levels cannot be altered in breast milk.

Formula fed infants

If symptoms have persisted longer than 2 weeks a GP or health visitor may recommend a short trial of a lactose free infant formula (up to a maximum 8 weeks). This can help control symptoms while the gut is able to recover. Lactose should slowly be reintroduced back into the diet after symptoms have resolved. NB: Lactose free milk is available in the pharmacy or supermarket.

For infants who have started solids

Breastmilk or a lactose-free formula can be used in conjunction with a lactose free diet of solid foods. Lactose should slowly be reintroduced back into the diet after symptoms have resolved.

Lactose intolerance is not the same as a cow's milk allergy!

An allergy is caused by an immune response to the protein in cow's milk. The symptoms are different as they can affect the skin, respiratory system and gut.

Following a lactose-free diet for treatment of secondary lactose intolerance

| Suitable milks for under 1 year | Breastmilk, Lactose-free infant formula or Soya infant formula (only from 6 months) - available in supermarkets or pharmacies. |
|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Suitable milks for over 1 year | Lactose-free cow's milk (cow's milk with the addition of the lactase enzyme) Calcium fortified soya, oat, pea, coconut or hemp milk alternatives. NB: Rice milk is not suitable for children under 5 years |
| Dairy food substitutes | Lactofree TM , Vitalite TM or Pure TM spread Lactofree TM yoghurts, soya, coconut or oat-based yoghurts or desserts Soya or vegan cheese Soya, coconut or oat ice-cream |

Reintroducing lactose back into the diet

After 2-8 weeks on a lactose free diet it is likely that the gut has recovered and your child will be able to tolerate small amounts of lactose. A gradual introduction of lactose is recommended.

If formula feeding a suggested plan is as follows:

Day 1 & 2: Add 30mls (1oz) standard formula to each bottle of lactose free formula.

Day 3 & 4: Make up each bottle with half lactose free formula and half standard formula and mix together.

Day 5: Make up all feed as standard formula.

If eating solids, introduce a few teaspoons of plain yogurt and gradually increase the amount each day e.g. ½ pot, ½ pot, ¾ pot. If tolerated, offer other lactose containing foods such as custard, rice pudding, soft cheese or cheese sauces.

If you notice that symptoms reappear on the re-introduction of lactose, return to the lactose free diet and try again in 1-2 months' time.

If the symptoms are not improving after 8 weeks or there are concerns with your child's growth arrange an appointment to see a GP.

Further information

NHS Choices: Lactose Intolerance

targeting adults with primary lactose intolerance but does contain some good information on secondary lactose intolerance.