

Updated recipe

SMA[®] ALFAMINO[®]

DESCRIPTION

Alfamino[®] is a hypoallergenic amino acid based powdered formula with added medium chain triglycerides and structured lipids. An infant food for special medical purposes.

PRESENTATION

400g tin (with a 4.4g scoop).

INDICATIONS

ACBS approved, prescribable on FP10 (GP10 in Scotland). Alfamino[®] is for complete nutritional support from birth or supplementary feeding from 6 months and up to 3 years of age for the dietary management of infants with cows' milk allergy, multiple food allergies and other conditions where an amino acid formula is recommended.

INGREDIENTS

Glucose syrup, vegetable oils (sunflower, rapeseed, structured palm oil), amino acids (L-Lysine, L-Leucine, L-Proline, L-Glutamine, L-Arginine, L-Valine, Glycine, L-Isoleucine, L-Threonine, L-Serine, L-Phenylalanine, L-Tyrosine, L-Aspartic Acid, L-Histidine, L-Alanine, L-Cystine, Magnesium L-Aspartate, L-Tryptophan, L-Methionine), MCT, starch, minerals (calcium glycerophosphate, potassium chloride, sodium citrate, calcium citrate, potassium citrate, sodium phosphate, magnesium oxide, ferrous sulphate, zinc sulphate, copper sulphate, potassium iodide, manganese sulphate, sodium selenate), emulsifier (E472c), Crypthecodinium Cohii oil (DHA), Mortierella Alpina oil (ARA), choline bitartrate, vitamins (C, E, niacin, pantothenic acid, riboflavin, A, thiamin, B₆, folic acid, K, D, biotin, B₁₂), acidity regulator (E330), taurine, inositol, L-Carnitine.

Packed under a protective atmosphere.

FEEDING TABLE:

Age of infant	Quantity per meal		Meals per day
	Water (ml)	No. of scoops*	
1-2 weeks	90	3	6
3-4 weeks	120	4	5
2 nd month	150	5	5
3-4 months	180	6	5
5-6 months	210	7	5
From 7th month**	210	7	3-4

*Note: Use only the enclosed scoop (4.4g).

**A healthcare professional should be consulted before introducing other food to a baby's diet.

SHELF LIFE AND STORAGE

Shelf life of 24 months from date of manufacture when stored at room temperature. Once opened, reseal & store in a cool dry place and use within 3 weeks.



For healthcare professional use only

PREPARATION INSTRUCTIONS

The standard dilution of 13.3% is made by adding 1 level scoop of Alfamino® (approx 4.4g) to 30ml of water (approx 1 fluid oz). Incorrect storage, handling, preparation and feeding can eventually lead to adverse effects for the health of a baby.



1 Wash hands well.



2 Wash bottle, teat and cap thoroughly.



3 Sterilise equipment (by boiling for 5 minutes or with a cold water sterilising solution).



4 Boil drinking (tap) water. Allow to cool for no more than 30 minutes.



5 Pour exact amount of water (see feeding table), into the sterilised bottle, carefully to avoid scalds, the water is hot.



6 Add exact number of level scoops for age of baby (see feeding table), levelling off each scoop with the back of a clean dry knife. Store the scoop in suspension inside the tin and replace the lid.



7 Place the sterilised teat and cap on the bottle and shake well until powder is fully dissolved. Cool bottle under cold running water until lukewarm. Test the temperature by shaking a few drops onto the inside of your wrist.



8 Close tin tightly after each use and store in a cool dry place.

IMPORTANT NOTICE

Mothers should be encouraged to continue breastfeeding even when their infants have cows' milk allergy. This usually requires qualified dietary counselling to completely exclude all sources of cows' milk protein from the mothers' diet. If a decision to use a special formula intended for infants is taken, it is important to give instructions on correct preparation methods, emphasising that unboiled water, unsterilised bottles or incorrect dilution can all lead to illness. Formula for special medical purposes intended for infants must be used under medical supervision.

For oral/enteral use only. Complete nutritional support from birth or supplementary feeding from 6 months and up to 3 years of age.

IMPORTANT FEEDING INFORMATION

Do not add any extra powder or water to make feeds stronger or weaker. Using too much or too little powder can make a baby ill. We recommend preparing each feed in individual bottles when required, feed immediately. If there is any unfinished infant milk left after feeding, throw it away.

Always hold the baby while feeding.

Never leave the baby alone during feeding as there is a risk they might choke.

NUTRITION INFORMATION

	Per 100g	Per 100ml (standard 13.3% dilution)
Energy kJ/ kcal	2093/500	278/66
Fat (44% kcal) g of which:	24.6	3.3
Saturates g	8.5	1.1
MCT g	6.0	0.80
Monounsaturated g	9.4	1.2
Polyunsaturated g	5.2	0.69
α-linolenic acid mg	400	53
DHA mg	135	18
Linoleic acid mg	4000	532
ARA mg	135	18
Carbohydrate (45% kcal) g of which:	56.3	7.5
Sugars g	4.0	0.53
Protein (11% kcal) g	13	1.8
Salt g	0.49	0.065
Minerals		
Sodium mg/mmol	195/8.5	26/1.1
Potassium mg/mmol	570/15	76/2
Chloride mg/mmol	420/12	56/2
Calcium mg/mmol	530/13	70/2
Phosphorus mg	350	47
Phosphate mmol	11	1.5
Magnesium mg/mmol	45/1.9	6.0/0.2
Iron mg	5.0	0.66
Zinc mg	5.0	0.66
Copper mg	0.43	0.057
Manganese mg	0.068	0.009
Fluoride mg	<1.0	-
Selenium µg	26	3.4
Chromium µg	<50	-
Molybdenum µg	<70	-
Iodine µg	110	15
Vitamins		
A µg	500	66
D µg	12	1.7
E mg	11.0	1.5
K µg	45	6.0
C mg	80	11
Thiamin mg	0.51	0.068
Riboflavin mg	1.0	0.13
Niacin mg/mg NE	7.0/12	0.93/1.6
B6 mg	0.40	0.053
Folic acid µg	75	10
Folate µg DFE	125	17
B12 µg	1.5	0.20
Biotin µg	12	1.6
Pantothenic acid mg	3.3	0.44
Other nutrients		
Taurine mg	40	5.3
L-Carnitine mg	8.5	1.1
Choline mg	145	19
Inositol mg	35	4.7

NE – Niacin Equivalent

Osmolarity 294 mOsm/l

DFE – Dietary Folate Equivalent

Osmolality 327 mOsm/kg

EASY TO USE AND STORE SCOOP

Easy to store scoop is an innovative and unique tin design with a separate storage compartment for the scoop - bringing added safety, hygiene and convenience to caregivers and patients.



1. Pull the safety peel and open the lid.



2. Hold the spoon and pull open the foil.



3. Scoop and level the powder.



4. After use, store the spoon in suspension inside the tin as shown.



5. Close the tin tightly with the lid.

CLINICAL EVIDENCE

1. Nowak-Wegrzyn, A. et al, Clin Pediatr. 2015; 54(3): 264-272.
2. Corkins, M. et al. Medicine Insights: Pediatrics. 2016; 10: 3-9.
3. Vandenas, Y. et al. JPGN. 2019; 68: 996, May 15, 2019.