

## CORRESPONDENCE

## Maybe South Italy maternity units are doing it right: Do we know the benefits of dietary preventive measures for atopic diseases?

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Editor,

I have read with interest the recent report of Passariello et al. (1) concerning the low adherence of maternity units in South Italy to the recommendation of detecting and feeding not breastfed babies at risk of atopy with hydrolyzed formulas. They claim for a campaign to promote such interventions in the maternities. But, are they really useful? Which is the cost/benefit ratio?

The recent report of the Committees on Nutrition and Section on Allergy and Immunology of American Academy of Pediatrics states that 'there is modest evidence that atopic dermatitis may be delayed or prevented by the use of extensively or partially hydrolyzed formulas' and that 'the higher cost of the hydrolysed formulas must be considered in any decision-making process for their use' (2). The last version of the Cochrane Collaboration review concludes 'there is limited evidence that feeding with a hydrolysed formula compared to a cow's milk formula reduces allergies in babies and children, including cow's milk allergy. Concerns regarding quality of the evidence and consistency of the results indicates further studies are needed' (3). A recent EuroPrevall paper concluded

that 'there is little evidence supporting current recommendations on infant feeding with the objective of reducing the prevalence of allergic disease' and that 'the use of milk based hydrolysates is also widely recommended although the evidence supporting this is weak' (4). As a result, clinical practice in this field is not too compliant with that recommendation, as shown in the work of Passariello et al., and other papers (5, 6).

We have calculated that, in Spain, more than 50,000 healthy babies should be fed every year with a hydrolyzed formula to prevent some (only those at risk) of the 2500–5000 foreseeable cow's milk allergy patients (and achieve some reduction in atopic dermatitis) (7). Are the costs of a universal program to detect and use hydrolyzed formula in babies at risk, and of the proposed promotion campaign worth it? This is a question for a cost/benefit analysis but we still have not the answer.

Luis Moral

*Servicio de Pediatría. Hospital General Universitario de Alicante.  
Spain*

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