**ALLSA Position statement on Relations with Formula Milk Companies**

Breastfeeding (BF) is the best nutrition for infants and exclusive breastfeeding significantly reduces the risk of infant otitis media, lower respiratory tract infections, gastroenteritis, and vertical HIV transmission compared with partial (breast-feeding with other fluids or solids) or predominant (breastmilk with nonnutritive liquids) breast-feeding\(^1\).

BF is recognized as the most cost-effective intervention to improve child health and survival and has been a critical component of Primary Health Care for the past 40 years. The WHO therefore recommends exclusive breastfeeding for the first six months of life, followed by the addition of appropriate complementary feeds with continued BF for two years or more. ALLSA is unequivocal in its support of breastfeeding.

For allergy prevention, exclusive breastfeeding for the first 4 months has been widely recommended as being protective, although data are mixed. For individuals at high risk of allergy, introduction of peanut, egg and possibly wheat between the ages of 4 months and 11 months of age is associated with lower rates of food allergy than individuals exposed after the age of 11 months\(^2\). Although the introduction of solid foods does not promote supplanting breast-feeding with a diverse set of foods early on, it will shorten the duration of exclusive breast-feeding, replacing it with “partial breast-feeding,” the combination of breast-feeding with other fluids or solids, and most likely lead to a reduction in overall duration of breast-feeding. Thus strategies for the introduction of solid foods to reduce allergies should be individualized and recommended only where a strong risk-benefit ratio is present\(^3\).

ALLSA acknowledges that formula feeding is necessary for some normal children whose mothers cannot breastfeed, and for children with conditions where feeds of special medical composition are required, particularly those with IgE mediated and non-IgE mediated food allergy. In addition, it recognises that blanket and uncritical condemnation of entire companies on the basis that they manufacture and market infant formula is not supportable ethically or practically. These companies provide many pharmaceutical and non-pharmaceutical products along with infant formula feeds and feeds for special medical purposes.

ALLSA is committed to upholding the International Code of Marketing of Breast Milk Substitutes and associated WHO resolutions, as well as Regulation 991.\(^iv\) ALLSA undertakes not to engage in any relationships that breach the regulations.

As such, ALLSA has established an ethics and compliance committee and tasked it to assess current and new relationships, whether individual or collective, with the formula milk industry, including offers of financial support for education, service, research or policy development. Involvement of these companies in ALLSA congresses will also be vetted by this committee. The compliance committee comprises the ALLSA chair, vice chair and heads of the education and research portfolios. The committee will be empowered to provide guidance on the suitability of such projects with their mandate governed by this position statement.

ALLSA will require all existing relationships to be disclosed openly in academic articles, conference presentations and annual reports.
References


