



‘I hear it’s the closest to breast milk’

A review of the discussions of parents,
and parents-to-be, around formula and
formula feeding on web discussion sites

The report can be downloaded free from the CWT website www.cwt.org.uk

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Executive summary and recommendations

Introduction

Breast milk is the ideal diet for the vast majority of babies, and the only food necessary for the first six months of life. However, few women in the UK exclusively breastfeed their infants, and the majority use some type of infant formula during their infant's first year. The reasons for this have been explored previously, including in the bi-decadal national infant feeding surveys conducted on behalf of the UK health departments. This report intends to contribute to the debate about feeding practices by taking a different approach. It offers an analysis of written conversations about formulas and formula feeding conducted between parents, and parents-to-be, on website discussion forums. It therefore offers new perspectives on formula feeding, developed through an examination of what parents say to each other, on these informal networks, rather than through the agency of a more formal study on infant feeding.

It is not within the scope of this report to fully elucidate the tangled interactions of company marketing of and government restrictions on formula products. However, it is clear that parents are presented with a range of information sources, including companies', to make choices between formula feeding and breastfeeding and between formulas. Online discussion forums are one place where parents are free to share their thoughts and experiences about how they are negotiating a fundamental aspect of their babies' survival – what they eat.

Aim and objectives

The aim of the research was to examine discussions by parents and parents-to-be on how they make their formula-feeding choices, the sources of information they use, and the concerns that drive them to the formula choices they make for their babies. The intention was to deliberately look for evidence in the chat forums around the way baby food companies have influenced choices, both directly and indirectly, and evidence of feeding choices that go against health recommendations.

Methodology

Data collection

Free registration was taken on the following 13 websites hosting informal discussion networks: Ask a Mum (a site of *Mother & Baby* and *Pregnancy & Birth* magazines), Ask Baby, Baby and Bump, Baby Expert (a site of *Baby &*

Pregnancy magazine), Emma's Diary (a site of the Royal College of General Practitioners), Gurgle, Home Dad, Mum Knows Best, Mumsnet, Mumszone, Netmums, Parentline Plus (a registered charity) and The Answer Bank. Registration on a site allows a user to visit site chat forums, and to post entries to chats. Posts to chat forums entered during December 2008 and January 2009 were examined.

Analysis of findings

Chat forum posts were categorised into topic areas with the key themes determined by the amount of conversation in chat forums relating to particular topics, with particular attention drawn to ideas mentioned repeatedly in discussions. The key information sources employed by chat forum users in making their decisions about feeding were categorised as: company sources; family and peer sources; and healthcare professionals.

The research analysis considered the key themes arising in parental conversations on the chat forums, and categorised these as either social opinion-drivers (ones relating to quality of life and feeding experience) or health opinion-drivers (ones relating to physical concerns). The analysis includes samples of conversations that indicate the range of issues under discussion within those social and health categories, and considers the information sources used in choice-making and opinion formation, including that of companies. Issues specifically sought in conversations were feeding practices that go against official recommendations, such as weaning before six months, the early introduction of follow-on milks, the use of goodnight milks, and the role companies might potentially play in supporting these practices.

Findings

The websites varied considerably in the amount of conversational activity related to formulas and formula feeding, with seven having no activity at all relevant to this study. The busiest three sites were Netmums, Mumsnet and Baby and Bump. The sites with no relevant activity were Ask a Mum, Baby Expert, Home Dad, Mum Knows Best, Parentline Plus and The Answer Bank.

The overall impression from the chat forum conversations detailed in this report is that it was women who were discussing formula-feeding issues. The greatest level of conversational activity about formula feeding was among those who were caring for infants of approximately six months of age or younger.

Information sources

Family and peers

The chat forums were used as supportive, advisory sources. Many of the users posting comments had posted thousands over the course of a year, and some of the sites actually listed the number of times they had thanked people, or been thanked by others. In general, users seemed broadly happy to

consider advice from one another regardless of 'expertise'. Some conversations on forums showed tension, particularly over the issue of breastfeeding versus formula feeding, and around the acceptability of formula marketing and advertising. Family and peers were reported as giving advice contrary to recommended feeding practice, and at times this did repeat company marketing messages.

Healthcare professionals

Overall, the impression of health professionals projected on the sites was a negative one. Chat forum users most frequently reported unhelpful comments, and incorrect advice, with health visitors being the most frequently criticised professionals. According to posts on the site, health visitors, and other healthcare professionals, did the following: worried parents about weight gain and the amount of formula intake; advised inappropriate feeding, such as weaning prior to six months for reasons such as 'inadequate weight gain'; and recommended specific brands of formula, repeating company information in doing so. The comments are not verifiable in that they are secondhand; it could be that the chat forum user was misreporting or misunderstanding advice.

Companies

Comments about company information cropped up in discussions on all of the viewed chat forums. The extent of actual participation from company representatives was unclear as direct advertising onto the forums was not allowed. Overall, the impression of companies, and company information sources, on the sites was a mixed one. Many postings on the forums refer to helpful company websites, helplines and packaging. Many postings repeated what they suggested was independent information about brands but was actually from company marketing. However, there were also some site users, expert and not, who were more mistrustful of such information.

Social and health opinion-drivers

For each of the themes within both the social and health opinion-driver categories, users looked for answers about what type of formula, and what type of formula feeding regime, would meet their needs and expectations with regard to the lives of themselves and their babies.

The key themes within the social and health opinion-drivers categories were as follows:

- **Social opinion-drivers: ones relating to quality of life and feeding experience**

I would like my baby to sleep more / cry less / be more settled / eat less frequently.

I think all babies are different, but I would still like to know that mine is doing what is 'normal' for babies of her age.

I want my baby and myself to be happy with my feeding choice, but there is so much information out there about feeding, and so many different opinions, that it can be quite difficult knowing who and what to trust.

- **Health opinion-drivers: ones relating to physical concerns**

I think my baby has digestive / excretory problems such as vomiting / reflux / constipation / diarrhoea / lactose intolerance.

I had a baby that was premature / low birth weight, and I want to be sure I feed her correctly.

I am not sure my baby is gaining the right amount of (usually not enough) weight.

I want to know what type of formula is best for my baby as she gets older, and begins weaning.

I want to know which formula is best for the health of my particular infant, and I am trying to figure out how to judge that.

Feeding practices contrary to health recommendations

Babies of all ages

There was evidence of: early weaning; the introduction of formula, by health professionals, to newborn infants when a parent might have chosen otherwise; the introduction of solids to bottles; and a switch from breastfeeding to various formulas to deal with issues such as perceived inadequate weight gain or self-diagnosed lactose intolerance.

Chat forum users also expressed a mix of ideas about the properties of formulas that are not supported by independent evidence, such as: that feeding guidelines, particularly the six-month weaning recommendation, relates to babies in the developing world; that some formulas are very close to breast milk, particularly Aptamil; that formulas with prebiotics / fibre / long chain proteins / fish ingredients are especially good; that thick and creamy formulas help upset stomachs, and constipation, by sitting heavily on the stomach; that feeding regimes (regulating by time and/or ounces) help a baby's digestion / excretion; and that brands were all different and that one could be found that meets your baby's needs perfectly.

Babies at weaning age / six months

There was some confusion over specific products for babies from approximate weaning age. Goodnight milks were raised in some conversations, and were viewed with curiosity. Some users did state an intention to try the products and had received free samples or marketing material. Follow-on formulas were raised in many conversations, but the posts were mainly negative about these products. There was no real evidence that they were being used or discussed by parents of babies much

younger than six months. Vouchers, lower prices and free gifts were cited repeatedly as reasons for choosing these formulas.

Company influence

The search for solutions to the needs and expectations expressed within the social and health opinion-drivers provides opportunities for companies to market formula products as solutions to expressed needs. Certainly there was a high level of brand and product awareness, with repeated mentions of the wide variety of products available.

Feeding 'normalcy' clearly provides opportunity for companies to promote products. Very simply, there were frequent discussions on chat forums that consisted of little but users discussing brands and reassuring one another that babies responded normally when fed these brands. This developed into categorisation for babies in terms of how they fed. So, there were hungry babies or babies with delicate tummies – and the answer to how to feed babies in these categories could be found in a type of formula. Indeed, the attitude was expressed that a baby could be brought to a state of 'normalcy' if the right formula for her could be found. In other words, a baby that fed frequently, or in large amounts, perhaps could feed at a more 'normal' level if fed a hungry milk formula. A baby who did not seem to digest well (wind / reflux) could be helped to not vomit / burp so much if the right formula could be found.

Throughout the postings on the chat forums, it was clear that company marketing messages, and product awareness, came through a range of sources – from healthcare professionals, company information, and family and peers.

Conclusion

There is very high awareness of formula products, formula-feeding practices, and formula brands on chats forums on the websites visited. The main drivers of discussions around these issues essentially all relate to normalcy, with particular interest in normal sleep / settling / weight gain / digestion / excretion. Chat-room users are interested, but unclear, about what normal babies do and are eager to find solutions to what they perceive to be 'problems' around feeding.

Recommendations

The Caroline Walker Trust suggests that the following would help to tackle the low rates of breastfeeding uptake:

- **Restrict advertising of infant formula products in all media.**
- **Only allow comment on ingredients in infant formula on the nutrition information panel.**
- **Train health professionals, particularly health visitors, to better understand the full range of feeding issues and to understand the difference between company and independent evidence sources.**
- **Tackle particular myths that exist around formula, and which are frequently disseminated by trusted healthcare professionals, such as: formula helps best with weight gain; or formula can help a baby sleep and settle better.**
- **Ensure that all advice to parents is non-judgemental.**
- **Ensure high-quality antenatal and postnatal support is given to allow mothers to establish exclusive breastfeeding. CWT supports the recommendations made in the NICE guidance on maternal and child nutrition (NICE, 2008).**
- **Parental website chat forums should consider having site moderators who are trained breastfeeding counsellors, to advise on infant feeding discussions.**

Glossary and definitions

Glossary

ATM	At the moment
BF	Breastfeeding
DD	Dear daughter
DR	Doctor
DS	Dear son
DGS	Dear grandson
HCP	Healthcare professional
HTH	Hope this helps
HV	Health visitor
IMO	In my opinion
LO	Little one
LOL	Laugh out loud
MW	Midwife
OH	Other half
PFB	Precious first born
PG	Pregnant
ROFL	Roll on the floor laughing
SAHM	Stay at home mum
TBH	To be honest

Definitions

Infant formula

For babies up to 12 months; contains a range of ingredients, with cow's milk being the most frequent base; can be soy or goat milk based; comes in a range of formulations which are suggested to be suitable for babies with particular needs including lactose-free, hungry milk for babies who seem to particularly hard to satisfy, staydown, easy digest or comfort milks for babies who seem to have unsettled stomachs.

Follow-on milk

For babies from 6 months of age; contains ingredients suggested to be suitable for infants who are beginning to eat solids or who may be moving on from breastfeeding; also called growing up milk.

Goodnight milk

A blend of follow-on milk and cereal which companies suggest can be used for infants aged from 6 months to 3 years, and which companies suggest can be used for settling babies in the evening.

<p>Please note: In all recorded conversations the spellings have been left as they were posted by chat-room users.</p>

1. Introduction

1.1 This report

Breast milk is the only food needed for the vast majority of babies for the first six months of life. Yet, the majority of mothers in the UK fail to achieve feeding practices in line with this wisdom. The reasons for this have been explored previously, including in the bi-decadal national infant feeding surveys conducted on behalf of UK health departments (Bolling et al., 2007). This report offers an analysis of written conversations about formulas and formula feeding conducted between parents, and parents-to-be, on website discussion forums. It therefore offers new perspectives on formula feeding, developed through an examination of what parents say to each other, on these informal networks, rather than through the agency of a more formal study on infant feeding.

Discussions on website chat forums have been studied with the intention of finding out what parents of infants are saying about formulas and formula feeding. The research has particularly sought out evidence about how parents make their formula-feeding choices, the sources of information they use, and the concerns that drive them to the formula choices they make for their babies. The majority of information gathered is from parents of infants from birth through to approximately one and a half years of age – those most likely to be using either infant formulas or one of the so-called follow-on formulas. The research has also deliberately looked for evidence in the chat forums around the way baby food companies have influenced choices, both directly and indirectly, and evidence of feeding choices that go against health recommendations. The role the website chat forums play in that choice-making has also been considered.

The UK health departments have targets for increasing rates of breastfeeding initiation, and health professionals in the UK are tasked to support mothers to breastfeed (Scientific Advisory Committee on Nutrition (SACN), 2008). It is clear from breastfeeding rates, however, that the messages about breastfeeding are failing to influence enough of the population, with some sectors particularly failing to be convinced of its efficacy. This research aimed to find out what parents are saying to each other about formula feeding and infant milks – to uncover reasons for their choices, and the information sources used to come to those decisions – in order to make a positive contribution to practice, policy-making and campaigning which supports breastfeeding.

1.2 Background

The World Health Organization recommends exclusive breastfeeding for the first six months of an infant's life, with breastfeeding continuing alongside complementary food for the first year, and beyond, if the mother so desires.

Yet, despite the endorsement of these recommendations by UK health departments, the UK languishes near the bottom of European breastfeeding league tables. According to the most recent *Infant Feeding Survey* (IFS) (Bolling et al., 2007), which includes analysis of information gathered up to 2005, 45 percent of UK babies were exclusively breastfed at one week, 21 percent at six weeks, 7 per cent at four months and 3 per cent at five months. The Scientific Advisory Committee on Nutrition (SACN) issued a position statement on the IFS in its role as official advisor to the UK health departments and the Food Standards Agency, and noted its concern that more mothers do not breastfeed, for longer, when studies show clear benefits for the health of mothers and infants, in both the short and long term (SACN, 2008).

A range of reasons was given from parents about why they chose formula over breastfeeding in the IFS (Bolling et al., 2007; SACN, 2008). Confidence, peer influences, family tradition, convenience (including return-to-work issues) are just some of the explanations offered. It is clear that class and age are key factors, with mothers from managerial professions, and those aged over 30, with the highest levels of education, being the most likely to breastfeed. It is also clear that awareness of health benefits, and high-quality antenatal and postnatal support for breastfeeding were influencing factors (Bolling et al., 2007; SACN, 2008).

In its position statement, SACN made a number of recommendations to increase the incidence of breastfeeding, and one of its recommendations was directed at the restriction of all forms of marketing of formula and so-called follow-on formula. The formula market was worth approximately £200 million in the UK in 2007 (Mintel, 2007), and a number of products are sold aimed at babies from birth to three years of age. Despite the fact that no independent evidence exists to support the merits of one formula over another, companies offer a range of products in the infant, follow-on and goodnight milk categories, which purport to offer tailored, high-quality nutrition for different types of baby. For example, there are formulas which suggest support for tackling perceived health or social problems in babies. So-called staydown or comfort milks offer support for babies who seem to have sensitive stomachs and perhaps suffer with colic or reflux; so-called hungry milks suggest help for formula-fed babies who are extra hungry; and goodnight milks claim to help babies to settle. SACN has further noted that the so-called follow-on milks, sold as nutritional support for babies over six months, were used by high percentages of mothers despite being nutritionally unnecessary (Bolling et al., 2007; SACN, 2008), and has recently ruled that goodnight milks (see *Definitions*) may have negative health effects, but these have not been withdrawn from the market. A report on infant milks currently available in the UK market and their composition will be published by The Caroline Walker Trust in 2009 (see www.cwt.org.uk).

It is not within the scope of this report to fully elucidate the tangled interactions of company marketing of and government restrictions on formula products. However, it is clear that parents are presented with a range of information sources, including companies', to make choices between formulas, and

between formula feeding and breastfeeding. Online discussion forums are one place where parents are free to share their thoughts and experiences about how they are negotiating a fundamental aspect of their babies' survival – what they eat.

2. Aim and objectives

2.1 Aim

To examine the issues under discussion by parents, and parents-to-be, around formula feeding and infant milks on web-based discussion networks (chat forums).

2.2 Objectives

- To visit 13 websites with parent chat forums, and to collect data from the chat forums on the following topics: parental opinions about the properties of infant formula, follow-on formulas and goodnight milks; formula-feeding practices; and methods used by parents to make decisions about formulas and formula feeding.
- To search out data from the chat forums that illustrate the role of companies in promoting the use of formulas including the use of incentives and marketing messages (including deliberate dispersal of messages by company representatives on websites).
- To identify key issues relating to formula and formula feeding raised by parents in order to offer recommendations to support Government targets to increase breastfeeding rates.

3. Methodology

3.1 Website chat forums visited

Free registration was taken on the following 13 sites hosting informal discussion networks: Ask a Mum (a site of *Mother & Baby* and *Pregnancy & Birth* magazines), Ask Baby, Baby and Bump, Baby Expert (a site of *Baby & Pregnancy* magazine), Emma's Diary (a site of the Royal College of General Practitioners), Gurgle, Home Dad, Mum Knows Best, Mumsnet, Mumszone, Netmums, Parentline Plus (a registered charity) and The Answer Bank. Registration on a site allows a user to visit site chat forums, and to post entries to chats. See Appendix 1 for web addresses.

None of the websites chosen for research were specifically baby food or formula company sites. The websites chosen were identified through word of mouth. It was not intended to visit every available website that hosts a chat forum available to parents, but merely to visit a range of sites.

3.2 Data collection

3.2.1 Gathering information from conversations on chat forums

All of the websites were visited in the period December 2008 to January 2009, with research concentrated upon the informal discussion networks hosted on the sites. Discussions about formula and infant feeding are stored on the sites by date, and topic, and stored chats from as far back as January 2008 were examined.

On each site, parental discussions are posted by date, and topic, with user pseudonyms. The posts on each site are generally organised into topic areas, with all posts about infant formula feeding generally stored in a specific topic area. The topic areas relating to infant formula feeding were searched. Other specific searches were made using the search box using the following terms: formula, baby milk, Aptamil, SMA, Cow & Gate, Heinz, HIPP, formula feeding, bottle feeding, goodnight milk, follow-on formula, follow-on milk, and weaning. The chat strands on formula feeding were the focus of research and consequently the majority of chats sought out parents using, or seriously considering the use of, formulas. On some of the websites there were separate strands which were devoted to breastfeeding; chats on these were not specifically searched.

Posts in some cases include more detailed information from the poster's biography including location, age, gender, number of posts, occupation, and baby's age and gender. Information about the poster was not gathered, except in instances where the poster noted a specific role as an official moderator for the chat forum, or a role as an infant feeding professional, or if it was suspected that the poster was acting on behalf of a baby milk company.

Information on the age of the infants under discussion was gathered where this was available. No information was verifiable, in that users post their own details without need for formal verification.

Information was gathered from the chats about the topics under discussion, with posts specifically copied in some instances. Not all relevant conversations were copied, nor were all answers to each posted question copied, where subject matter was repetitive of other conversations, but effort was made to note in a research notebook that a subject had arisen in order to enable comment on the level of discussion on topics. Generally, posts began with a question or plea for advice from one poster, which then elicited comments from other users. Information was gathered from initial posts, and answers to these posts. No posts to chats were made by this report's author, and visits were made anonymously under a pseudonym.

Website chat forums do have codes of conduct, and discussions can be pulled or blocked if discussions breach these. Direct advertising or promotion of a formula could fall foul of these guidelines and be pulled. The website forums are places where users post information freely, and so while they are moderated, they are not policed in terms of ensuring that information is 'correct'. However, some sites do have moderators with specific responsibility for topic areas such as infant feeding, and some of these moderators have qualifications relating to infant feeding. Some sites also have 'expert' users who have no official connection to the site, but who are pulled into discussions. Site moderators, and these more informal experts, can play a role in conversations, particularly if worrying information arises in conversations.

Appendix 2 contains further information about the organisation of chat forums.

3.2.2 Sample conversation

A conversation posted on a website chat forum on 23 December 2008 is detailed below in order to give an idea of how sites are organised. A chat user posts a question under a conversation header, or topic name, so people have some idea of what a conversation is about, and can judge whether they wish to enter it. Other users who choose to can come in and reply or comment. Spellings and phrasing have not been changed in the conversations. Formatting has been changed: symbols were removed (including smiling / sad faces); colour removed; and paragraphs altered to remove spaces in some cases. Entries to conversations have not been copied in full in all instances.

The conversation started as follows:

Conversation header: *Mum has me confused (Note: baby is six months old)*

Question: *DD is now on complete formula milk after having to give up breast feeding. I use Aptamil. Her poos have always been quite loose but I know this is normal in a breast fed baby. Any way her poos are still loose and really*

smelly! Mum has said its cos of the formula I use cos its for babies who are being breast fed as well as formula fed and not babies who are exclusive formula fed

Replies:

1) think you're right Tracie, sorry Tracie's mum. Everyone always told me Aptamil is the one that is probably the closest you get to breast milk, I use Cow and Gate and have also used SMA and Hipp Organic.

Basically the container usually says something along these lines, "for those that can not or choose not to breast feed" Which suggests to me that it is being used as an alternative to breast milk. With Aptamil being so close to breast milk I guess it would be the better choice for those combination feeding, which might be why your mum is getting confused.

2) Yes they do contain more or less the same ingredients (apart from organic as there is not an organically produced LCP and something else tho I can't remember) However there are basic nutritional levels all formula's have to adhere to (Government Guidelines), as long as they meet the levels, they are ok, but there are differences, some only slight with the different levels of various contents they have. Even though these differences may not be massive, from my own experience they can really affect babies in different ways, for example, Luke was constipated all of the time with SMA Gold, He had runny nappies with HIPP Organic first milk, but was just right with Cow and Gate. Isabelle had SMA Gold and was absolutely fine with it.

3) Aptamil can be for babies that are just formula fed, its just advertised as the closest to breast milk so mums who cannot breastfeed think they are giving baby closest thing

4) yeah tracie ur mums wrong, andrew was completely fed on aptamil for a while, tbh maybe her poos are still loose because its so close to breastmilk? im no good on the poop status because andrew went so long being allergic to cows milk. perhaps the smell is from the baby rice? lol andrews has always stank but maybe the baby rice makes it worse in 'normal' formula fed babies? maybe her poops will get firmer as she starts eating more solids

5) breast fed my little boy and changed on to formula, I finally settled on Aptamil and he still is on Aptamil. Anyway to get to the point his poo was always very loose and even after he was settled on aptamil was the same for quite some time only really changed when he started to have something solid. And like the others aptamil is not for mums who are mixed feeding it was recommended to me as the best.

3.3 Analysis of findings

Chat forum posts have been categorised into topic areas relating to the research objectives with key themes then drawn out. The key themes were determined by the amount of conversation in chat forums relating to the themes, with particular attention drawn to ideas mentioned repeatedly in discussions. Key information sources employed by chat forum users in making their decisions about feeding have also been identified, and commented upon in terms of chat forum user views.

The research analysis considers the key themes arising in parental conversations on the chat forums, and categorises these as social or health opinion-drivers. The analysis includes samples of conversations that indicate the range of issues under discussion within those social and health categories, and considers the information sources used in choice-making and opinion formation, including that of companies. All of the analysis was done specifically looking for issues of particular concern within those conversations as follows: feeding practices that go against official recommendations, such as weaning before six months and the early introduction of follow-on milks. In addition we were interested in the use of goodnight milks and the role companies play in providing advice and information. Note that it is accepted by the author of this report that breastfeeding is recommended as the feeding choice for infants from birth, but this is not specifically mentioned in sections outlining feeding practices out of step with best practice guidelines. As almost every post relates to people who are formula feeding, the problematic feeding practices highlighted are those that go beyond simply giving one's infant formula.

Where entries to posts are included in this report, they are provided without detail of posting date, website, or of user. The intention is not to identify specific users of the chat forums, even by pseudonym. No overall analysis of the profile of site users has been conducted, as reliable, detailed information is not available on the sites. However, some comment has been made about the overall impression gathered about the profile of site users. Information about the age of the posters' infants was gathered where available in order to examine themes of interest to parents feeding infants of varying ages. No overall analysis has been conducted of age-related issues, but attention has been drawn to age-related feeding issues in certain instances. Hence, some of the analyses in Section 4 of this report have been divided by age category if this was deemed useful.

4. Findings

4.1 Website chat forums

4.1.1 Chat activity on sites

Registration was taken for 13 websites. The websites varied considerably in the amount of conversational activity related to formulas and formula feeding, with seven having no activity at all relevant to this study. Table 1 broadly ranks the sites, in descending order, with the busiest listed first. Table 1 also includes information about the number of pages of stored chats that have been analysed, and indicates whether additional research notes have been kept. The busiest three sites were: Netmums; Mumsnet; and Baby and Bump. The sites with no relevant activity were: Ask a Mum, Baby Expert, Home Dad, Mum Knows Best, Parentline Plus and The Answer Bank.

The busiest three sites recorded dozens of conversational strands started each week on formula feeding, each strand beginning with a comment or question, and often with numerous replies from other chat site users. This means the majority of comments in this report were gathered from three sites. Notes were also kept of some conversations which were not copied.

Table 1

Websites ranked in descending order with pages of saved conversations

Websites	Number of pages of copied conversations	
Netmums	22	There are also additional notes.
Mumsnet	16	There are also additional notes.
Baby and Bump	10	There are also additional notes.
Ask Baby	5	There are also additional notes.
Mumszone	4	There are also additional notes.
Emma's Diary	2	There are also additional notes.
Gurgle	0	There are brief written notes.
Ask a Mum	0	
Baby Expert	0	
Home Dad	0	
Mum Knows Best	0	
Parentline Plus	0	
The Answer Bank	0	

4.1.2 Site users

The overall impression from the chat forum conversations detailed in this report is that it was women who were discussing formula feeding issues. This

impression was gathered from the following: specific comments that show gender; the pseudonyms in use; and the photos posted on some of the sites that go with the user profile information. The greatest level of conversational activity about formula feeding was among those who were caring for infants of approximately six months of age or younger.

4.2 Parental ideas about formulas and formula feeding

4.2.1 Information sources used in opinion formation

Users of the chat forums mentioned a range of information sources that came into play in the formation of opinions, and decisions, about formulas and formula feeding. These have been categorised as: health professionals; company information; and family and peers. The degree to which each information source was trusted varied considerably among users in viewed discussions. Discussions are also required to be polite, so users are discouraged from making overly disparaging comments about one another's ideas. However, it was clear that key issues arose with regard to user views of sources. None of the sources took absolute precedence over another; almost all were regularly and frequently discussed in conversations. The exception was formal, independent, written advice material and reports; these were much less frequently mentioned. Chat forum users seemed happy to consider that opinions from a range of sources could be 'expert' and useful. In fact, users occasionally reacted quite angrily to interjections by anyone who suggested particular expertise.

The most commonly mentioned information sources have been categorised as follows:

Health professionals

This included health visitors, midwives, infant feeding counsellors, nurses, general practitioners, health locations such as hospitals, and government information sites including the Department of Health and SACN (Scientific Advisory Committee on Nutrition).

Comments about health professionals of varying types crop up in discussions on all of the viewed chat forums. Health professionals, except for breastfeeding counsellors, participated in the viewed conversations only rarely. Overall, the impression of health professionals projected on the sites was a negative one. The conversations on websites most frequently dealt with problems, and requests for advice, so it could be that they were more likely to be negative. Chat forum users most frequently reported unhelpful comments, and incorrect advice, with health visitors being the most frequently criticised professionals. According to posts on the site, health visitors, and other healthcare professionals, did the following: worried parents about weight gain, and about the amount of formula intake; advised inappropriate feeding such as weaning prior to six months for reasons such as 'inadequate weight gain'; recommended specific brands of formula, repeating company information in doing so. The comments are not verifiable in that they are

secondhand; it could be that the chat forum user was misreporting or misunderstanding advice. The negative comments were not universal.

Company information

This includes company websites, helplines, advertisements, information on packaging, give-aways, and branding of items / printed material not directly owned by the companies. Comments about company information cropped up in discussions on all of the viewed chat forums. The extent of actual participation from company representatives was unclear as direct advertising onto the forums was not allowed. Overall, the impression of companies, and company information sources, on the sites was a mixed one. Many postings on the forums refer to helpful company websites, helplines and packaging. Many postings repeated what they suggested was independent information about brands but was actually from company marketing. However, there were also some site users, expert and not, who were more mistrustful of such information.

Family and peers

This includes partners, parents, other site users, site moderators, and friends.

Comments about family and peers cropped up in discussions on all of the viewed chat forums. The chat forum has also been considered as a peer information source as the discussion forums were aimed at parents and parents-to-be. On balance, the impression of family and peers was a positive one.

The chat forums in particular seemed to be used as supportive, advisory sources. Many of the users posting comments had posted thousands over the course of a year; and some of the sites actually listed the number of times they had thanked people, or been thanked by others. Conversational guidelines encourage supportiveness, and the call to supportiveness was repeated in conversations if disagreements became too strong, with site moderators entering some conversations if tension arose. However, the overall positive impression was not universal, with some chat forum users suggesting that family and friends gave confusing, unkind, and unhelpful advice. Some conversations on forums showed tension, particularly over the issue of breastfeeding versus formula feeding, and around the acceptability of formula marketing and advertising. Family and peers were reported as giving advice contrary to recommended feeding practice, and which at times did simply repeat company marketing messages.

Some of the sites had official moderators, with varying levels of feeding expertise, who occasionally interjected into conversations. In general, users seemed broadly happy to consider advice from one another regardless of 'expertise', however, one site (National Childbirth Trust trained breastfeeding counsellors) was particularly notable for expert users being called into discussions to clarify issues. These moderators were viewed with a mix of

thanks and dislike – with particular problems arising if someone was viewed as a know-it-all.

4.2.2 Ideas and emotions that drive the search for answers

The prevalent themes from the specific ideas, and emotions, raised in discussions between forum users talking about formulas and formula feeding have been drawn out, and categorised into ‘opinion-drivers’: social and health. Social opinion-drivers were those that related to quality of life and feeding experience, and health opinion-drivers were those that related more to physical concerns. People on the chat forums used the range of information sources outlined in Section 4.2.1 to inform themselves within these social- and health-related drivers.

Themes are also inter-related, with chat forum users making posts that cut across these. For example, a person may have been concerned over a baby that fed frequently because this was harmful to quality of life in terms of sleep; the problem may also have been medicalised, with a health reason looked to as the answer for the frequent feeding. For example, people may choose hungry baby formulas for social reasons (wanting the baby to sleep and eat less frequently) and for health reasons (wondered if level of hunger is normal, or if weight gain was enough).

For each of the themes within the social and health opinion-driver categories, users looked for answers about what type of formula, and what type of formula-feeding regime would meet their needs and expectations with regard to the lives of themselves and their babies. The ways in which the needs and expectations of users were configured, and the types of information sources used, led to examples of feeding practices that went against health advice.

For example: A mother wanted her three month old baby to sleep through the night. A post on a chat forum elicited a range of comments – some said that this was an unrealistic expectation, others suggested a range of formula brands and types (hungry milk if hunger was the problem, staydown milk if unsettled digestion was waking the baby) which purported to deal with the perceived problem. Some posts even suggested feeding solutions that contradicted health advice – such as early weaning, perhaps with the introduction of solids to bottles.

The key themes within the social opinion-drivers and health opinion-drivers categories were as follows:

- **Social opinion-drivers: ones relating to quality of life and feeding experience**

I would like my baby to sleep more / cry less / be more settled / eat less frequently.

I think all babies are different, but I would still like to know that mine is doing what is normal for babies of her age.

I want my baby and myself to be happy with my feeding choice, but there is so much information out there about feeding, and so many different opinions, that it can be quite difficult knowing who and what to trust.

• **Health opinion-drivers: ones relating to physical concerns**

I think my baby has digestive / excretory problems such as vomiting / reflux / constipation / diarrhoea / lactose intolerance.

I had a baby that was premature / low birth weight, and I want to be sure I feed her correctly.

I am not sure my baby is gaining right amount of (usually not enough) weight.

I want to know what type of formula is best for my baby as she gets older, and begins weaning.

I want to know which formula is best for the health of my particular infant, and I am trying to figure out how to judge that.

4.3 Social opinion-drivers in conversations

4.3.1 I would like my baby to sleep more / cry less / be more settled and eat less frequently

• ***Conversation posts referring to babies six months or younger***

Key themes in conversations about babies six months or younger

The ideas raised within this driver were common across all of the website chat forums that were viewed, and were particularly of concern to parents of infants under six months. The conversations used for illustration (see below) make it clear that many people had the expectation that young infants should sleep for much longer than they do, that they should be more cheerful when they are awake, and that they should feed less often. The idea that there must be a solution which allowed one to avoid frequent infant feeding was the most commonly expressed idea about feeding. The range of expectations varied, but some posters expected that infants should not be waking in the night even during the first few months of life (conversation 5). There was also concern and confusion over how much crying, possetting and grumbling were to be expected. Some posters also expressed concern over what amount of ounces was best for a feed in terms of providing satisfaction (conversation 5); and some expressed worry that breastfeeding was not satisfying or filling (conversation 6).

It is clear that people were concerned for their infants and for themselves in terms of loss of sleep, and quality of life. Those who posted entries to chat forums sometimes began to look for health reasons for perceived problems

with sleep and settling – to give a specific health cause – in which case this will be discussed in Section 4.4.

Feeding practices in conversations about babies six months or younger

There was evidence from the chat forums that the needs and expectations within this driver led to examples of / recommendations for feeding practices out of step with best practice guidelines, in particular: early weaning (conversation 4), and introduction of solids to bottles (conversation 7). There was some suggestion of healthcare professionals recommending feeding systems, such as not feeding young infants more than every few hours (conversation 9).

Information sources in conversations about babies six months or younger

A range of information sources were used in forming ideas around meeting the needs and expectations expressed within this driver. Healthcare professionals were reported to offer a mix of advice, including some that directly contradicted government feeding advice, and some for which there was no evidence one way or another. For example, health visitors recommended early weaning to deal with perceived problems of sleep and settling – a direct contravention of health advice (conversation 1); or to delay the introduction of hungry milk due to issues of constipation or stomach upset (conversation 7) – a piece of advice for which there is no independent evidence one way or another. Family and peers were also involved as information sources, again with a mix of advice, both useful, random and contra to government feeding advice. Some of this advice was given in relation to family and peers' own personal feeding experiences, such as a grandmother recommending early introduction of solids as that was what she did (conversation 3).

This research is unable to identify what final choices chat forum posters did make, and it was clear that many were taking a considered view, collecting advice from a range of sources. All posts to conversations have not been copied; for example, the person who suggested giving baby rice in bottles to a young baby (conversation 7) did get strongly warning replies which have not been included here. Chat forums acted to reinforce inappropriate feeding messages, but also blocked these.

Company influence referring to babies six months or younger

The driver clearly provided ample opportunity for companies to promote products that purported to help babies sleep, settle, and feel satisfied. For example, hungry milks were seen to be offered as options in conversations as products that could take over from 'normal' infant milk from birth to help settle babies that seemed to be hungrier – ie eating often, waking up to eat (conversations 5,7,9). The themes that arose within this driver also tied into the development of categorisation for babies in terms of how they fed – in particular, the idea of the hungry baby (conversations 5,7,9). Formula was

discussed in terms of it being a satisfying product, including as more satisfying than breast milk (conversation 6). Throughout the postings on the chat forums it was clear that company marketing messages, and product awareness, come through a range of sources – from healthcare professionals, company information, and family and peers.

For babies under six months there was particular discussion of the role of formula indigestibility in helping babies to sleep (conversations 4, 8, 10). There was a sense, raised by some chat forum posters, that company messages about properties of particular formula types (such as hungry milks) had become more widely interpreted in something akin to the following way: hungry formula equals thicker/ heavier, equals slow digestion, equals sleep (conversation 4).

Sample conversations

1) Health visitor recommends weaning at 4 months for hungry baby.

Summary: For this chat forum member, her 4 month old son's frequent feeding during the day was making her life difficult. The poster does not express health concerns about this, and suggested that her older son was similarly hungry. However, her health visitor has recommended early weaning, a direct contravention of government feeding advice. The chat forum member suggested that she will instead opt to move onto hungry milk.

Feeding practice: early weaning

Information source: family and peers (chat forum users); healthcare professional (health visitor)

Company influence: brand named; formula product (stage milk); marketing opportunity for hungry milks

• *I changed my son over at 4months as he was taking 7 x7oz bottles of c&g stage 1 a day and it was constant round of feeding and winding him as he sleeps for around 10hours a night there werent many waking hours he wasnt without a bottle in his mouth lol. My health visitor advised to start weaning however my older son was much the same and changing to hungrier baby milk helped me put him off weaning till he was 6months and with several teeth which meant after a few days i gave him our food mashed up rather than weeks of pureed food like i did my daughters.*

2) Company website address provided for information on hungry baby milk.

Summary: This poster replied during chat about hungry milks, and took the opportunity to suggest that a particular SMA formula was useful for helping her son to feel full, and to settle better. The poster provided a weblink for a company site.

Feeding practice: none

Information source: family and peers (chat forum users); company (weblink provided by chat forum user)

Company influence: brand named; formula product (hungry milk); marketing opportunity for hungry milks; weblink

- *Sma white is for a hungrier baby. I had to use it for ds as he was a gannet and wanted feeding every 2hours. IS it not a 'thicker' formula SO by giving him this he lasted 4hrs max. DS wasthe skinniest baby i had seen but he just was not happy with the normal formula. HE never put weight on any quicker with it but it settled him more having a fuller tummy. I found this <http://www.smanutrition.co.uk/Home/products/white.aspx>*

3) Grandmother encourages introduction of solids for baby under two months.

Summary: This chat forum poster suggested a desire to get her young baby to wake less frequently in the night. The grandmother's advice on early introduction of solids contradicted government feeding advice, and the poster asked other users what they recommended. In this instance, some posters who replied did call attention to the extreme youth of the baby in suggesting rice was not appropriate.

Feeding practice: early weaning

Information source: family and peers (mother-in-law, chat forum users)

Company influence: none

- *When did you start or going to start giving baby rice to your little one? My OHs mum gave OH baby rice at 6 weeks because he was a hungry baby and settled better with it through the nights. She has suggested it to me but I'm not sure. What are your opinions*

4) DH suggests giving up breastfeeding for formula to help baby sleep; chat users discuss evidence over formula digestibility and sleep including company information.

Summary: This chat forum poster was finding it tiring to exclusively breastfeed her nine week old son, and her OH suggested formula so he could help, and as he felt it would aid sleep. The poster wanted a solution, but was unsure this would work. Other forum users replied, including a breastfeeding counsellor who regularly interjected on this site, with discussion ensuing about what information sources were at the root of ideas about formula aiding sleep. It turns out that this may have been a feeding expert on a hospital training course.

Feeding practice: giving up breastfeeding so baby will sleep longer

Information source: Family (OH) and peers (chat forum users); healthcare professionals (feeding counsellor); company

Company influence: formula products (staydown, easy digest, comfort); confusion of messages about the different properties of formula, with suggestion that digestibility messages are being interpreted in terms of improvement of sleep

- *Just curious as DS is exc bf, 9 weeks, and this is what he is doing and I am utterly exhausted especially have 2yr old DD to look after too. DH suggests I give up bf so he can help me at night and also with the thought that DS won't feed or wake as frequently. I don't really want to stop but I can't go on like this indefinitely. Pretty sure formula feeding woldn't change things too much anyway.*

- *This is perfectly normal at 9 weeks. The formula thing is a myth. It used to be more true because formula was so hard to digest but in recent years it has become easier to digest so there is no real difference sleep-wise.*

- *(NCB counsellor) VS - 'in recent years formula has become easier to digest' and this means babies sleep less....when did this happen???? The major change in digestibility of formula happened when the manufacturers brought out whey-dominant formulas, and I think (without checking, sorry) this was at least 30 years ago. Is this what you mean?*

- *I don't know when, it's something we were told on a training day last week. I can try and find out for you though.*

- *(NCB counsellor) VS: Who did the training? I would worry that whoever did the training is an HCP who has been informed by formula manufacturers about how great their products are, at a conference, or a workshop, or by a mailshot. There are some newer speciality formulas - like 'easy digest' and 'stay down' and 'comfort' but their marketing has been around issues of constipation and throwing up, not sleep. It may be that they were referring to whey dominant formulas, of course, but they should know this change is really not 'recent'.*

- *(Note: person comes back to say it is breastfeeding expert who works at Chipping Norton Hospital.) I should have it written down somewhere actually, I'll see if I can find it, it was part of a true/false questions/answers thing. One of the questions was whether breastfeeding/formula feeding affected sleeping and that was the answer.*

5) Six week old baby feeds every 2-3 hours, why isn't hungry milk satisfying her so I can sleep more?

Summary: Poster found feeding six week old baby every 2-3 hours tiring, and felt her current hungry formula might not be satisfying her baby, and wondered if another brand might work.

Feeding practice: none

Information sources: family and peers (chat forum users)

Company influence: brand mentioned, with request for other brand suggestions

• *My baby is on Heinz Nuture Milk Hungry Baby formula and she just seems to want more and more. She is almost 6 weeks old and already on the hungry baby formula and polishing off 6 and 7 oz feeds every 2-3 hours. It is murder on the night as I don't have a lot of sleep feeding her. Is there any advice on how I can satisfy my little baby. Is there another hungry baby formula which I can try which will satisfy her more to what Heinz does. I originally put her on hungry baby formula because she got the same with normal newborn formula but now even hungry baby formula is not satisfying her*

6) Breastmilk just didn't seem to satisfy my baby because I do not think she got enough. Is it ok to do bit of both?

The chat forum poster suggested that breastfeeding took up a lot of time, and that this meant her daughter was not satisfied. She wondered if mixed feeding is acceptable.

Feeding practice: none

Information sources: Family and peer (chat forum users)

Company influence: none

• *all know I wasn't going to, but when she was there, I just had to try it. I loved it. I loved how close we were and the way she looked at me. But, it did get too hard and I gave in one night and gave her a bottle. (She was fed 6pm-8pm 9pm-10pm 11pm-12pm then 1am-4.30am before I gave in. She was so upset and it was making me upset. I just wanted to be able to make her satisfied and I couldn't. So yeah, that's when the bottle feeding began.) Since then I've been so upset. I miss her and how close it made us. Anyway, I was feeding her last night because I was so upset and I needed to be that close again. I topped her up with a bottle after. It's alright to do both, right? She's happy and I'm happy. I love feeding her but it doesn't fill her up. She needs more.*

7) Four week old baby wakes at least every two hours to feed, shall I start hungry formula, or add baby rice to the bottle so I can sleep more?

Summary: A chat forum user has a four week old baby and was not getting enough sleep due to frequent feeding and wants a solution. The health visitor says hungry milk formula will constipate the baby; the chat forum user suggested she was considering adding baby rice to the bottle.

Feeding practice: suggestion of adding baby rice to bottle for four week old

Information sources: family and peers (chat forum users); healthcare professionals (health visitor)

Company influence: brand mentioned; formula product (hungry milk); hungry milk formula as possible sleeping aid

• *My baby is 4 weeks old on Friday and I'm having real problems feeding him. At first he would wake, have a bottle and go straight back to sleep again which was really good for me, but the past week he has been what seems like constantly hungry. Yesterday he woke at half past 5 and was awake until oneish and I fed him 4 times because he was crying for it. My health visitor said not to give him the white milk for hungrier babies as it would give him tummy ache and constipation but hes hungry all the time. He only goes 1 and a half - two hours sometimes. Does anyone know if the white milk would be okay? Also, a few people have suggested that we put some baby rice in his feeds, maybe just at night to satisfy him. I have been reading up on this in the internet and some people say its okay and some say its not, I was wondering if anyone had tried this with a baby so young? Im worried that I'll make him ill if I stick to the sma gold as he doesnt seem to get enough, if i swith to the white milk or I add baby rice. Its getting a problem because I don't sleep on a night and hes awake most of the day so I can't catch up. Any suggestions will be greatly appreciated.*

8) Chat forum user recommends formula over breastmilk to help baby sleep, as formula is less digestible.

Summary: A chat forum user suggested that it was fact that formula digested more slowly than breast milk, and that this indigestibility aided sleep.

Feeding practice: none

Information sources: family and peers (chat forum users)

Company influence: none directly, but suggestion that messages about hungrier milks and satisfaction are being interpreted as aiding sleep

• *Also, breastmilk takes about 2 hours to digest, formula takes considerably longer. Imagine how you feel after eating a good easy to digest meal, vs. one eaten during a holiday (ie Christmas turkey dinner). A heavy meal makes us sleepy and satisfies us a lot longer*

9) Chat forum user worries another poster's baby, age under ten weeks, is feeding too often.

Summary: A question about frequency of feeding led to one reply that said that a baby under ten weeks should not be feeding every two hours. The reply further noted that the poster was told by a health visitor not to feed her baby, from birth, more than every 3-4 hours. The reply suggested hungry formula.

Feeding practice: suggestion to use hungry milk for baby under ten weeks

Information sources: company (packaging); family and peers (chat forum users); healthcare professionals (health visitor)

Company influence: formula product (hungry milk)

- *he shouldn't be feeding every two hours. Is your health visitor not concerned? My dd was taking 4oz every 3hrs and our HV told us to up her to 5oz to see if she'd go 4hrs between feeds. Since she was born I was advised to not feed her more than every 3-4hrs. Talk to your HV about maybe switching your son to hungrier baby milk, I know that the tin doesn't advise it before 10weeks but he really doesn't sound like he's full if he's feeding every two hours.*

10) I love my hungry milk brand as it helped my baby sleep through the night; I think the milk works by being harder to digest.

Summary: A chat forum poster suggested her baby fed too frequently at three weeks of age, and that a hungry milk formula sorted this out, leading to night-time sleeps of up to 12 hours. The poster suggested that the indigestibility aided sleep, and strongly praised the brand.

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (health visitor);

Company influence: brand named; formula product (hungry milk, stage milk); suggestion that hungrier milk helped baby sleep through the night as it makes baby feel fuller for longer

- *went on aptamil hungrier baby from aptamil 1 when LO was about 3 weeks old. she seemed to be hungry all the time and HV worried me about her putting on too much weight, so we made the decision to change and since then she feeds wonderfully, she is now on 5, 6oz bottles a day, which seems perfect for her and since we changed to hungrier baby she has slept through the night, from 8/9pm to 7/8am. when i asked the HV about the difference i was told there is no difference in calories the hungrier baby just sits in their tummy more heavily and makes them feel fuller for longer. hope this helps, and i can only praise aptamil hungry baby*

- **Conversation posts referring to babies older than six months**

Key themes in conversations about babies older than six months

This ideas raised within this driver were common across all of the website chat forums that were viewed, but were of less concern to parents of infants older than six months as compared to parents of younger infants. The conversations used for illustration (see below) make it clear that there were some people who had the expectation that older infants should sleep for longer than they do, particularly that they could ideally sleep through the night

without waking to feed (conversations 1,2). There was some discussion of goodnight milks in terms of help with sleep, including among those whose babies did sleep well, in terms of the milks perhaps offering a very sound sleep (conversations 1,2,4).

It is clear that people were concerned for their infants and for themselves in terms of loss of sleep, and quality of life. Those who posted entries to chat forums sometimes began to look for health reasons for perceived problems with sleep and settling – to give a specific health cause – in which case this will be discussed in Section 4.4.

Feeding practice in conversations about babies older than six months

There is evidence from the chat forums that the needs and expectations within this driver led to examples of / recommendations for feeding practices out of step with best practice guidelines, in particular: the introduction of goodnight milk (conversations 1,2, 4).

Information sources in conversations about babies older than six months

Peer advice was given in relation to chat forum users' own experience of the milks. The advice was mixed, with some users suggesting goodnight milks worked (conversations 1,2). However, one user suggested that goodnight milks are a way for companies to get around advertising restrictions on formulas – as they can be advertised and infant milks cannot (conversation 3). The user further noted that that the milks are based on a false premise – babies naturally wake at night, there is no evidence that a product stop them from doing so.

Company influence referring to babies older than six months

The driver clearly provides opportunity for companies to promote products that purport to help babies sleep, settle, and feel satisfied. Goodnight milks are seen to be offered as options in conversations as products that can take over from 'normal' infant milk from the age of six months to help settle babies through the night. It is clear that company marketing messages, and product awareness, come through peers, and company information, including free samples (conversation 4).

Sample conversations

1) Will goodnight milk help my seven month old son sleep through the night?

Summary: A chat forum user said her seven month old was waking frequently in the night and wondered if goodnight milk could help. Replies suggested it could be useful in the night, or during the day. Replies discussed the merit of goodnight milk from different brands, and the value for money.

Feeding practice: use of goodnight milks; mixing goodnight milk into daytime bottles

Information sources: family and peers (chat forum users)

Company influence: brands mentioned; formula products (goodnight milks); messages about goodnight milks and sleep; price mention

- *Does anyone give their LO the Cow and Gate Goodnight milk or anything similar? My LO is almost 7 months old and keep waking in the night and I am wondering if his normal formula (SMA Gold) isnt filling him up enough. I have seen the goodnight milk in the shop but unsure whether to give it a go or not*
- *We use Hipp goodnight milk for our dd. If honest on the days when we haven't had any she still doesn't wake. One thing to note is that the Hipp on is very thick and even on the biggest teat she struggled. What we do know is mix it 50:50 with her daytime milk*
- *use the goodnight milk on my ds and i have done since he was 7 months old. I think it does make a difference to his sleep and he seems to really enjoy it. I've tried him on the hipp equivilant but he refuses to drink that one. I think a tub is about £4 and it lasts a couple of weeks or so so its not bad value for money either.*

2) Will goodnight milk help my nine month old sleep through the night?

Summary: A chat forum user wished that her nine month old would sleep for 10 ½ hours a night and wondered if goodnight milk could help. One replier suggested that the milk helped her daughter who sleeps for 12 hours; and the original poster suggested she would give it a try.

Feeding practice: introduction of goodnight milk

Information sources: Company (packaging); Peers (chat forum users)

Company influence: brands mentioned; formula product (goodnight milks); information from the packaging mentioned

- *My little Milo is 9 months and is on Cow and Gate 6months plus milk. He sleeps really well, but wakes up at 4 for a bottle then goes back to sleep until his big borther wakes him up at around 6. I just saw this milk today? It says it's thicker and settles the tummy more. Do you think this milk would fill Milo up a bit more and help to get him to drop that 4am feed... or is it just another way for cow and gate to make money?*
- *hi my DD2 has been using this for the past month and its brill we give her a 6oz bottle of it at 7pm and she sleeps through bare in mind the other bottles she has through the day are 9oz lol and she eats real food too lol*

- *my 7 month old has been using the night time milk for a few weeks now and seems to be sleeping better. She is on Aptamil hungry during day (15ozish) and She has a 7 oz bottle of nighttime milk sometime between 6.30 and 8 and then doesn't wake for 12 hours lately!!!, could be coincidence though!!!*
- *well..deff worth a shot then... as he won't have more than 6oz in a bottle... he gets too full. and he eats well through day, he goes to bed at around 7.30, same as big brother... and he has a 6oz bottle, then wakes at 4.. be nice just to keep him going hour or so longer until big bro wakes him up..looks like it may be worth a shot then*

3) A user says goodnight milk is rubbish, and a way to get around advertising.

Summary: A post asked if Cow & Gate goodnight milk was useful for getting a baby to sleep at night and another poster replied that babies need to be fed at night, and that these formulas were a way to get around advertising restrictions which apply to infant formulas.

Feeding practice: none

Information sources: Peer (chat forum user)

Company influence: advertising for goodnight milks seen as a way to advertise formulas

- *It's all crap, I'm sure it's just a way to get round advertising!! Babies need feeding at night time, and they need milk, not these weird added things!! We'll be drugging our babies to get them to sleep through next!!*

4) Goodnight milk drink free sample received in the post, and user wonders if it is worth trying.

Summary: A chat forum user received a free sample of a goodnight milk drink in the post, and had vouchers for some other brands. She wanted to know if the milk was worth trying – her baby slept through the night, but perhaps this would mean even better sleep. Another poster replied to say they were not a good idea.

Feeding practice: goodnight milk drinks as a sleep aid

Information sources: family and peers (chat forum users); company (free samples)

Company influence: brands named; formula products (goodnight milks); promotions (free samples, vouchers); message that goodnight milks are useful for sleep

- *Has anyone who bottle feeds tried this milk. Had a sample come in the post and wasn't sure if I should try it? I've got vouchers for the HIPP and Cow & Gate ones.*

My only worry is that as he already sleeps through is it necessary or will it work like adults have malted milk drinks and put him into a deeper better quality sleep? (BABY 9m)

- *do be carefull with them. If he already sleeps through that give him his usual milk. I once heard that babies are not meant to sleep tighter because their natural instinct will wake them up when there is something wrong. Its not as easy to wake up when they sleep tighter. Its said that it therefore can lead to SIDS. Besides, have a look at a package, I think they are loaded with sugar.*

4.3.2 I know that all babies are different, but I would still like to know that mine is doing what is normal for babies of her age.

- **Conversation posts referring to babies six months or younger**

Key themes in conversations about babies six months or younger

This ideas raised within this driver were common across all of the website chat forums that were viewed, and were particularly of concern to parents of infants under six months. All of the conversations used for illustration (see below) concerned infants of under six months. The conversations made it clear that many people were seeking reassurance that the feeding behaviour of their infant was within the bounds of what was considered normal. It was clear that many people have been worried by the comments of health professionals (conversations 1,5) or by information on formula packaging (conversation 5), that concern the amount of formula that infants should be taking in. Amount of intake was a theme repeated across conversations on the sites, with posters listing intakes and timings – and asking to be reassured from others who had had similar experiences. Some were worried about overfeeding (conversations 2,4) and some about underfeeding (conversations 1,5). Concerns about normal feeding practice existed even cases where there was an absence of a health concern (conversations 4,5,6).

Chat forum users also posted general appeals for information about which were the best formula brands (conversations 3,6). This seemed to be a check to see that the poster's choice could be made within the context of what was acceptable and normal to others.

Feeding practice in conversations about babies six months or younger

There is some direct evidence from the chat forums that the needs and expectations within this driver led to examples of / recommendations for feeding practices out of step with best practice guidelines, in particular: feeding systems which relied on ounce calculations rather than the observed needs of the baby (conversation 5). One health visitor was reported to have told a user that a method for calculating ounces was to half the baby's body weight and to feed that amount as follows: 8 pound baby gets 4 ounces of formula (conversation 5).

Information sources in conversations about babies six months or younger

A range of information sources was used in forming ideas around meeting the needs and expectations expressed within this driver. Healthcare professionals were reported to offer a mix of advice, some of it viewed negatively by posters (conversations 1,5). It was clear that health professionals worried people about the amount and frequency of baby feeding, including in the absence of any direct evidence of any health problem. One health visitor was reported to suggest an ounce calculation system, not related to government feeding advice. Family and peers were also involved as information sources, with other chat forum users sought out for advice and reassurance (conversations 3,5,6). Some of the advice took the form of one formula brand being recommended over another, as the advisor had had a positive experience with the product. Some posters took care to reassure others that all babies are different – and that a parent just needed to find the formula that was right for her baby (conversation 6). Company information on product packaging about the number of ounces recommended for babies of particular ages was cited by users, with confusion and concern when a baby took more or less than the amount recommended on the tin (conversation 5). It was clear that people compared their own babies directly with packaging information, and worried if their babies did not eat as packaging information suggested they might.

Company influence referring to babies six months or younger

The search for feeding ‘normalcy’ clearly provided opportunity for companies to promote products. Very simply, there were frequent discussions on chat forums that consisted of little but users discussing brands and reassuring one another that babies responded normally when fed these brands (conversations 3,5,6). The themes that arose within this driver also tied into the development of categorisation for babies in terms of how they fed. So, there were hungry babies (conversation 2) or babies with delicate tummies (conversation 6)– and the answer to how to feed babies in these categories can be found in a type of formula. Indeed, the attitude was expressed that a baby could be brought to a state of ‘normalcy’ if the right formula for her could be found. In other words, a baby that fed frequently, or in large amounts, perhaps could feed at a more ‘normal’ level if fed a hungry milk formula. A baby that did not seem to digest well (wind / reflux) could be helped to not vomit / burp so much if the right formula could be found (conversation 6).

Throughout the postings on the chat forums it was clear that company marketing messages, and product awareness, came through a range of sources – from healthcare professionals, company information, and family and peers.

Sample conversations

1) Two day old baby not drinking as much as midwives say she should and mum wants to know what is normal?

Summary: Midwives worried the mother of a two day old baby that she was not formula feeding the baby enough. The mother wanted advice from other chat forum users about how much formula their new babies drank, and how often they fed.

Feeding practice: none

Information sources: healthcare professionals (midwives); peers (chat forum users)

Company influence: brand mention

• *I'm really worried about how much my baby is taking in milk. She is only 2days old, but the midwives are making a massive issue on how much she is drinking. She is bottle fed on aptimal, and is only taking about 2oz max every 3-4hours. I'm trying to get her to take more as the midwife says this is not enough, but she is a really really sleepy baby, and either won't wake for feeds, or falls asleep while being fed and will just refuse the bottle. I've read that pethidine during labour can make the baby really sleepy and can cause problems feeding, and I had two injections, but the last one was about 5-6 hours before the birth and I've been told it would've been out of her system by then? I had a bit of a nightmare during labour, and am in alot of pain from it, and this is causing me so much extra worry at the moment I just feel completely useless, has anyone else had a problem with really sleepy babies or not taking enough milk? Is it something that'll just come in time? Please*

2) My four week old baby seems to eat a lot, is the amount he takes in normal?

Summary: Chat forum user wanted reassurance that the amount of formula her four week old baby was eating was normal. User also noted that introduction of hungry milk formula had not reduced feeding frequency or quantity, and wondered why this was the case.

Feeding practice: none

Information sources: family and peers (chat forum users)

Company influence: brand named; formula products (hungry milk, infant milk)

• *I am using Aptamil baby formula and changed my lo onto the extra hungry baby as he was always wanted to be fed, he still takes the same amount and at the same times as if there is no difference, has anyone else had this or got any advice? Is it normal for a baby to want feeding 150ml of hungry baby formula every 3 hours?? He is 4 weeks old*

3) What formula do you feed your babies, I want to choose a good one, perhaps Aptamil?

Summary: A chat forum user looked for reassurance about formula brand choice by asking other users what they chose. One reply suggested that babies are different, and different brands suit different babies.

Feeding practice: none

Information sources: family and peers (chat forum users)

Company influence: brand named; idea that formulas are significantly different from one another and can suit particular babies

- *The type of formula you buy really depends on your LO, some love aptamil and others hate it. To be honest i think it is trial and error and what sits best with your LO's tummy....*

4) Baby on hungry milk formula is sleeping well, happy, but what is right amount of ounces?

Summary: A four month old baby was happy, healthy and sleeping well but chat forum user was worried that he was eating too much – even though he had moved onto hungry baby formula. Wanted reassurance from chat forum users that she was not overfeeding him.

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (health visitor)

Company influence: formula products (hungry milk, infant milk)

- *My 4 month old was drinking 5 8oz bottles in 24 hours and doing fine and then started to wake in the night and would only settle with another feed of 8oz. Spoke to the hv who suggested hungry baby formula as he was draining all bottles so gave it a go and he now has his last feed at 10pm and sleeps till 7am so all good. What has worried me is he is still draining 8oz bottles at every feed even though it is the hungry baby formula!!!!and i expected him to be taking less of it as its more filling but am i wrong? So far he seems quite satisfied but when he wants more shall i just up it to 9oz or is this too much!!. He currently weighs 15lb 10 so he is not huge either. Am i overfeeding him*

5) Chat forum users discuss various ways of figuring out how many ounces of formula is best.

Summary: A chat forum user sought reassurance that her five week old baby was eating enough ounces, as he was not eating as much as the formula tin recommended. Other chat forum users replied with their own experiences of calculation of ounces and feeding frequency, including one who suggested that her HV gave her a method for calculating ounces by halving baby's body weight. Another user upped feeding quantity at recommendation of midwife, but results were mixed, with baby vomiting frequently.

Feeding practice: method for calculating number of ounces for feed is not recognised method; judging feeds by ounce and frequency rather than by baby needs

Information sources: family and peers (chat forum users); healthcare professionals (health visitor, midwife)

Company influence: brand named; information about amount of baby feeds on packaging

- *Just wondered for those who formula feed how much your LO was/is taking at 5 weeks old? It says on the tin it should be 5oz now so im putting 5oz in the bottle but Tye is only taking 3oz but one week ago he would take 4oz! He really really doesnt seem to want to take anymore than 3oz, iv tryed and tried*
- *did you change his formula? i know when i was using aptamil lexi would take the full 5 oz but now i've switched and she only takes 3/4oz but she seems more content. or could just be that he's happy enough with the 3 and will maybe want fed more often*
- *Ollie has between 3.5-5oz and feeds every 2.5-3 hours. My HV told me that to work out how much they should be having at each feed is to half their body weight and that's the amount of ounces they should be having. Ollie weighed 7lb 4oz last week so he should be on roughly 3.5oz(ish) per feed which he has minimum anyway. Hope that helps*
- *My baby girl is 2 weeks and 4 days old. At 5 days old we were feeding her (aptimal) 1oz every 4 hours. The midwife said that wasn't enough so we increased it to 2oz every 3 hours. Since then she seemed more hungry so now she is on 3.5oz every three hours. Is this too much? The thing is the past few days she has been vomiting like 7 times a day. Am i overfeeding her? Should i reduce her milk?*

6) My baby is fine just sometimes does not burp, what do chat forum users think is the best brand of formula? Chat users recommend variety of brands for various reasons.

Summary: A chat forum user just asked what brand of formula people liked. She had used one brand with her first baby, and had slight problem with baby not burping as much as she thought it should. Replies suggested a range of brands that worked for others' babies. Various reasons were mentioned including suggestions that some formulas helped digestion, or had better ingredients.

Feeding practice: none

Information sources: family and peers (chat forum users)

Company influence: brands mentioned; formula products (stage milks, staydown (for reflux); idea that different brands are fundamentally different and can help particular babies; mix of messages about quality of ingredients

- *hello ! am having my second baby and not sure which baby milk to use . i used sma with my dd but she had a little problem with winding , no pain or sick or anything just sometimes she did not burp. am wondering was it the milk ? i always thought this was the best brand . what do you ladies think ?*

- *aptamil won hands down for me, had more to offer in way of nutrients and jemma had no problems whatsoever with it, ill be using it with my second which is due at end of january*
- *Aptimal for me aswell. We did use SMA but it made her really constipated so switched and never looked back*
- *we had farleys which is now heinze nurture but I THINK its the same stuff we then went to sma staydown for reflux*
- *Aptamil - used it for both my LOs (first refused to breastfeed and second was switched to formula at 8 months) and i'd recommend*
- *think it depends on the baby some get on well with a milk another will reject - we used Premilac with my daughter was the only one she would take but its off the shelves now. She did second best on Cow and Gate - SMA and Aptimil made her very sick*
- *My little man had trouble with winding and constipation on SMA Gold but we've recently switched him to Aptimil and he is pooing and burping like a dream*
- *I would agree that every baby is different but mine got a bit bunged up on SMA but both have been fine on Aptimil. I'm told there's really not much difference in the contents its just how they process it. Good luck*

4.3.3 I want my baby and myself to be happy with my feeding choice, but there is so much information out there about feeing, and so many different opinions, that it can be quite difficult knowing who and what to trust

- ***Conversation posts referring to babies of mixed ages, both younger and older than six months***

Key themes in conversations about babies of mixed ages

The ideas within this theme are not separated by age of baby, although the majority of posts that directly raise age are from people with infants six months or younger. The posts have not been separated because many take a broader perspective about the issues, making reference to ideas that cross baby age boundaries.

This ideas raised within this driver were common across all of the website chat forums that were viewed. The conversations used for illustration (see below) make it clear that chat forum users had high expectations with regard to the quality of their feeding experience. They did not want themselves, or their babies to suffer, and they searched for solutions to how to make the right choices. However, it was also clear that chat forum users varied in how they approached this choice-making: who did they trust to go to for information; how worried were they about formula feeding as a choice; were they angry at

companies for their sales pitches, or at health campaigners for worrying parents unduly?

Feeding practice in conversations about babies of mixed ages

There was evidence from the chat forums that the needs and expectations within this driver led to examples of / recommendations for feeding practices out of step with best practice guidelines, in particular: early weaning (conversation 3); and the introduction of formula, by health professionals, to newborn infants when a parent might have chosen otherwise (conversation 4).

Chat forum users also expressed a mix of ideas about the properties of formulas that are not supported by independent evidence, such as: the best breast milk is in the first couple of days (conversation 1); that feeding guidelines, particularly six month weaning, relate more to the third world (conversation 3); that some formulas are quite like breast milk, including Aptamil (conversations 1,2,6,7); that and those with prebiotics are of especially good (conversation 7).

Information sources in conversations about babies of mixed ages

A range of information sources were used in forming ideas around meeting the needs and expectations expressed within this driver. There were many heated debates between chat forum users about the quality of information from different sources, and the extent of manipulation of parents by the different information sources.

Healthcare professionals were reported to offer a mix of advice, including some that directly contradicts government feeding advice, and some for which there is no evidence one way or another. Some of the users treated information from healthcare professionals as trustworthy, and used the power of such professionals to back up viewpoints about formulas and formula feeding. For example, one doctor was reported to have suggested that early weaning was fine, as guidelines relating to this had evolved out of the needs of third world babies (conversation 3). Although healthcare professionals rarely chipped in directly into conversations, a website moderator, whose profile stated that she was a trained breastfeeding counsellor, chipped in to reassure someone that Aptamil was especially gentle on a baby's stomach (conversation 6). Some users were very angry that healthcare professionals purported to offer independent advice while actually repeating company information gathered from so-called educational materials (from company sources); and advertorials from companies in health professionals' journals (conversation 14). A teen mother was very angry that nurses had given her baby a bottle without permission, assuming she would not breastfeed (conversation 4).

Family and peers were also involved as information sources, again with a mix of advice, both useful, random and contra to government feeding advice. Some of this advice was given in relation to family and peers' own personal

feeding experiences, such as the grandmother who was reported to recommend introduction of formula as she felt breast milk was inadequate for a hungry baby (conversation 5). There was much discordancy about the quality of formula feeding, and the formula feeding experience. Some users actively, and adamantly, declared variously that: life was too short to worry about the type of feeding you did (conversation 1); that formulas would not be on the shelf if they were not high quality (conversations 8,11); that formula was just as good as breast milk (conversation 8) and that medical evidence supported their view; and that do-gooders should worry about something useful like poverty (conversation 8).

Company influence referring to babies of mixed ages

The driver clearly provides ample opportunity for companies to promote products. The strong drive from parents to ensure that they and their babies had good quality feeding experiences clearly led to a search for the right product to meet those needs.

Conversation posts are included below that indicate active debate around advertising restrictions placed upon formula companies (conversations 8,9,14). People were not all suspicious of formula companies. Some noted useful company websites and helplines (conversation 13), and were keen to assert that formula was a highly regulated, high quality product (conversations 8,9,14). Some repeated as fact that Aptamil was like breast milk (conversations 1,2,6,7). One user noted that advertising was very helpful in terms of choosing between products, further noting that breast milk did not need advertising as there was only one type, as opposed to formula which came in many varieties (conversation 14). Some chat forum users expressed anger that other chat forum users could be so suspicious of companies, and so judgemental about their products (conversations 8,9,14). One poster was very aggrieved that Heinz had not been able to advertise with regard to their infant milk reformulation, thus denying the world the opportunity to hear about its high quality (conversation 9). The view was expressed that all formulas, including infant milks, should be advertised (conversation 14).

Others were clearly of the opinion that formula companies' first priority was to make money, and that the odds were stacked in companies' favour. One poster was outraged that her baby's birth certificate had been packaged in a folder branded with formula company information (conversation 10). Another was concerned that companies were allowed to get around advertising rules by advertising follow-on formulas (conversation 14). Another was concerned that this avoidance of regulations also happened through dispersal of so-called education materials and articles to health professionals (conversation 14).

There was some indication in posts that price was seen by some as a marker of quality (conversation 9); while for others the cheapest products were recommended (conversation 12). There was a consciousness about price across websites with a sense that people did not necessarily want to spend more, but wanted to be sure that cheaper did not mean of inferior quality.

There was a mix of views on whether cheap did in fact mean lower quality or not.

Throughout the postings on the chat forums it was clear that company marketing messages, and product awareness, came through a range of sources – from healthcare professionals, company information, and family and peers.

Sample conversations

1) Chat forum user loves to formula feed and reassures another mum about it, noting that the best breastmilk is in the first couple of days.

Summary: A chat forum user replied to a post about feeding methods to note that she loved formula feeding, and that babies were happy with formula, so long as the mum is happy too. The poster suggested that the best breast milk was in the first couple of days.

Feeding practice: chat forum user told to give up breastfeeding in favour of formula (it is not clear by who); chat forum user said best breast milk is in the first couple of days

Information sources: company; healthcare professional (unclear where advice mentioned originated)

Company influence: none directly, but the post is very formula supportive in the way it suggests that it is somewhat a waste of time to worry about feeding method because life passes so quickly, the best breast milk is in the first couple of days, and a baby just wants the mum to be happy when she is feeding, and does not care if that means formula or breast milk

• *sympathise! We were instructed to move DS over to have formula top ups at 2 weeks and then I've gradually reduced his breastfeeds to practically nothing but I know he is happy on formula and I feel so much better for giving him formula and I am so much more relaxed now! I don't believe you can overfeed a little one, even with formula. Chances are he will keep going with the 4 ounces and then realise that it's not going away and he'll settle down. Alasdair took 7 ounces very early on and then went down to 4. Seriously, at Finlay's age he won't be overfeeding and he'll only take what he wants. Don't worry! Also, the best breastmilk is in the first couple of days, you've done so well even to get to now! Some people manage 1 or 2 feeds and that's all and that's brilliant too. I honestly believe that Finlay will benefit more from you being happy with how you're feeding him than what he would benefit from your breastmilk if you aren't happy bfing. Enjoy your boy while he's at this stage - I know it won't help me saying it but it goes far too quickly*

2) Chat forum user loves to formula feed, notes high quality of formulas, including that Aptamil is close to breastmilk.

Summary: Chat forum poster loved formula feeding, liked others to be able to help with feeding. Noted that formulas were good products, and that Aptamil was very close to breast milk.

Feeding practice: none

Information sources: company (information about Aptamil being close to breast milk)

Company influence: brand named; assertion that formulas are very good, and that Aptamil is very close to breast milk

- *from the offset with both my children that I wanted to FF. I did have a go once BF with my daughter when she was born but I didn't like it, don't ask me why but I just didn't and continued to FF. For me I enjoy the fact other people can feed my baby and I can have a break from it so to speak. I know you can express milk but I honestly just feel for me it was easier to FF than BF. Plus the formulas these days are very good and I feed Ollie Aptamil which is very close to breastmilk, although I appreciate it's not the "real" thing x*

3) Chat forum user mistrusts official health advice, and also misunderstands it.

Summary: A chat forum user had read many posts and thought people needed to go with their own gut instincts about how best to feed their babies. Suggested that feeding advice was based on statistics more relevant for the third world, and that a doctor had confirmed this to her.

Feeding practice: suggestion that not weaning until six months advice is less relevant for the UK than in the developing world

Information sources: family and peers (chat forum users); healthcare professionals (health visitor, doctor)

Company influence: suggestion that government guidelines on feeding are more relevant for third world countries

- *After reading posts on here about formula and problems people have had (constipation appears to be a problem with some formulas)... i think the best thing is to go with gut instinct, if your baby is suffering and you think a change in formula will help then why not... at the end of the day a HV can only offer us advice or guidelines according to goverment statistics and as my dr informed me alot of guidelines have to take into account 3rd world countries(as in weening at 6 month...apparently its due to their sanitation and not what babies actually need)*

4) Nurses in hospital gave teen's baby a bottle without asking permission.

Summary: A teen mother is breastfeeding, but in hospital her baby was given a bottle without permission, and she received no other support to continue with breastfeeding. Teen noted formula pushed in the UK and said her experience proved that.

Feeding practice: newborn baby given bottle in hospital without mother being asked; lack of support for teen mother to breastfeed

Information sources: healthcare professionals (hospital)

Company influence: healthcare professionals give formula without first supporting breastfeeding

- *Actually, formula IS pushed in the UK. They gave DD a bottle without even asking me. If you are struggling they do not push you to breast feed they just say "why don't you give them a bottle then?" I'm a teen and I breast feed. People are suprised but I'm proud of myself*

5) Grandmother encourages formula feeding.

Summary: A chat forum poster said her mother kept pressuring her to start formula feeding by saying her daughter's baby was feeding too frequently. The new mum said it was very sad, as her mother had wanted to breastfeed, but was undermined by the views of health professionals in the past. The new mum noted that things had still not changed enough, and that she received very poor support for breastfeeding.

Feeding practice: none

Information sources: family (mother) and peers; healthcare professionals (NHS feeding specialists)

Company influence: none

- *I had a conversation with my mum about bf a couple of weeks ago as I have always felt that my mum has undermined my efforts to bf "oh, is that baby feeding again?", "Surely you should only be feeding every 4 hours" that sort of thing...The sad thing is that she means really well but is so ignorant and it's obviously typical of her generation.*

I was staying with my parents when i had DS1 and my mum went on and on about him still being hungry when i bf and made comments like "give him some real milk" i.e. formula As a result, i totally lost confidence and gave up quite early on (although in the end managed to mix feed until he was about 15 mo). I suppose deep down I feel really, really angry about this as DS1 was a great feeder and there was no reason on earth why I shouldve failed at bf apart from ignorance and crap support from not all around including NHS professionals.

Anyway, when my mum had me, I apparently refused to latch on (was very premature for the time) so was given cows milk inexplicably so no wonder I was a sickly baby... My mum managed to bfeed my brother until he was 6 wks old and then was told by her doctor to stop as she didnt have enough milk. It's so, so sad. When I pointed out to my mum that she did have enough milk but that my brother had merely hit a growth spurt and hence needed to feed more in order to up supply. My mum looked like she wanted to cry. It's despicable really, how HCPS have let women down.

6) Chat forum moderator (profile notes person claims to be Association of Breastfeeding Mothers [ABM] counsellor) recommends formula brand.

Summary: A chat forum poster who was actually a site moderator, with a profile that suggested she was an Association of Breastfeeding Mothers trained counsellor, reassured someone about mixed feeding by suggesting that Aptamil was a good choice for mixed feeding as it was kinder on little ones' stomachs.

Feeding practice: none

Information sources: company (information about Aptamil being close to breast milk); family and peers (chat forum site moderator); alleged healthcare professional (site moderator who claimed she was a trained breastfeeding counsellor)

Company influence: brand named; assertion that Aptamil is close to breast milk

- *A lot of mums complement breastfeeding with Aptamil as its kinder on llo stomachs (skye29 ED MODERATOR PM ANYTIME Joined: 19 Jan 2006 Posts: 21585 Location: *** ABM trained breastfeeding counsellor*** DURHAM AKA Lacey)*

This advice contravenes the ABM code of practice and highlights the importance of parents going directly to organisations such as ABM for advice and support around breastfeeding (www.abm.me.uk)

7) Doctor recommends probiotics in formula.

Summary: A chat forum poster shared her view that Aptamil is a good formula to use because her doctor said to choose one with probiotics, and because she heard it tasted like breast milk.

Feeding practice: idea that formula is better if it contains probiotics

Information sources: healthcare professionals (doctor)

Company influence: brand named; assertion that Aptamil is close to breast milk; idea that formulas with probiotics are different from formulas without probiotics

- *We used Aptamil as a paediatrician said to make sure whichever formula you choose it should have probiotics. Anecdotally it's also supposed to be the closest to breast milk in taste*

8) Chat forum user raises issue of advertising ban, and many users write in to say it is patronising do-gooders criticising perfectly acceptable product.

Summary: A discussion between chat forum users about a possible change to formula advertising rules, with issue raised about follow-on advertisements being a way of more generally promoting formulas. There was a mix of replies, with many suggesting that they did not support advertising bans. Posters suggested that formulas are not a problem or they would not be sold, and that women do not make decisions about feeding based on advertisements.

Feeding practice: none

Information sources: family and peers (chat forum posters); healthcare professionals (Food Standards Agency, children's charities)

Company influence: product mention (follow-on milk, infant milk); idea that there is proof of formula safety and quality

• *coalition of charities is demanding baby milk be treated like tobacco and subjected to a total advertising ban. The National Childbirth Trust, Save The Children and Unicef blame adverts for many mothers abandoning breast feeding before the recommended six months. They want the government to extend a ban on infant milk adverts to include "follow-on" milks for older babies. England's policy on the promotion of formula milk is currently being reviewed by the Food Standards Agency. At present, companies are not allowed to advertise formula milk for babies under six months. But they are allowed to promote so-called follow-on milks, a range for children aged between six months and two years. The charities accuse baby milk companies of using their follow-on milks to promote their products for younger infants by giving them the same name and logo so as to make them "virtually indistinguishable" to parents. "In similar ways to how tobacco companies found their way through loopholes in legislation restricting the advertising of cigarette promotion, formula milk companies are finding ways to exploit ambiguity in the law and to continue aggressively marketing their products to parents," says Belinda Phipps of the NCT.*

Do you agree with the banning of these adverts?

• *I also think it is ridiculous ! In fact one could be quite offended by the fact that they don't think women can think for themselves and advertisements rule how they will feed their baby ! If someone decides to bottle feed then they will have to buy formula milk and if someone decides to breastfeed they will not simple isn't it ? Maybe these "do-gooders" really want to be poking their noses into children being abused and children in poverty etc. At least they will be doing something useful.*

• *I bottlefed my children as I couldn't breastfeed them, not because I saw an ad on tv and thought "Ooh, that'd be good!" - how small do they think our minds are? Yes, ban tobacco advertising because smoking KILLS! - I know they say "Breast is best", but when did formula milk become a health hazard?*

• *dont think its right to judge people on which method they have chosen, which you clearly do. If you are going to say formula is unsafe please expand on why you think so. If it were that unsafe that it would not be available on a supermarket shelf to buy particularly as it is being fed to newborn babies!*

9) Chat forum poster asserts Heinz reformulation is not a gimmick but has led to a product that is the best on the market.

Summary: A chat forum poster had suggested that the reformulation of a Heinz formula was just an excuse to raise the price. Another poster replied and said that in fact the reformulation had been all about quality, but that the company was prevented from telling people about this due to the advertising ban on infant milks. The poster noted others could buy cheap and inferior products if they wanted to. Note that this

poster was reported to the site moderator as the post was thought to be from a company representative.

Feeding practice: none

Information sources: family and peers (chat forum users); company (poster might be from a company)

Company influence: brand named; poster accused of being a company representative; idea that formula companies are prevented from sharing information with the public; idea that price is related to quality

• *They _have not_ just changed the name. Heinz have taken a big risk by totally reformulating this milk to a far superior product than the others on the market.*

*Trouble is, legally they are *NOT ALLOWED* to tell you this, by adverts or any other way, as you cannot be seen to be promoting formula above breast milk.*

It is totally unrecognisable from the old milk, and if you want the best out there then that's what you should buy. I used Farley's when my lad was a baby, I'd use Nurture now. If money is all you are interested in, then of course you'll swap to a cheaper inferior one. Each to their own I suppose

10) Chat forum user notes that her newborn's birth certificate came in folder branded with formula company information.

Summary: A chat forum poster noted her outrage that she had received her newborn's birth certificate in a folder branded by a formula company. The poster wanted government to do something about this.

Feeding practice: none

Information sources: healthcare professional (local government); company (branding government information)

Company influence: brand name mentioned; formula brand promotion to parents of newborns

• *Did you get your newborn's birth certificate packaged up in a Folder from Hipp Organic formula or C&G? I surely did! They are using taxpayer's money in order to make their brand known to parents. How the hell can't people in local gov'ts not see through this?*

11) Chat forum posters writes that hungry formula would not be on sale if it caused many problems.

Summary: A chat forum user wrote that there was scaremongering around about hungry baby milk, and that it would not be on sale if it caused problems.

Feeding practice: none

Information sources: family and peers (chat forum users); company (product)

Company influence: formula product (hungry milk)

- *p.s don't let anyone scare monger you about hungry baby milk, if it caused the amount of problems as this lot always let on it wouldn't be on the market, would it?*

12) Mum says formulas are all the same, and that companies just try to convince us they are not through advertisements.

Summary: A chat forum user asserted that all formulas are the same, and that price differentials are only to do with company advertising spend. The user believed that all formulas give proper nutrition.

Feeding practice: none

Information sources: company (advertising)

Company influence: brand named; advertising; product reformulation and price rise suggests quality improvement

- *As far as price and which is the best etc, they are all the same, they all give proper nutrition to baby and it tends to come down to how much advertising each company use to how expensive the milk is, what confirmed it for me is Heinz Nurture used to be Farleys a few months ago and was about £5 a tin, never saw any adverts on tv for it etc, Heinz have bought them out and now its one of the most expensive about £8 and lo and behold tv commercials have started to appear on tv They are very clever and we felt exactly the same if its more expensive it has to be better, well in our case it wasnt*

13) Chat forum poster knows formula choice is a personal one but recommends company website and helpline for brand she likes.

Summary: Chat forum poster convinced of the quality of Cow and Gate formula, but noted that choice comes down to personal feelings. The poster recommended the very helpful company website and helpline.

Feeding practice: none

Information sources: company (packaging; website; helpline; family and peers (other parents))

Company influence: brand named; formula products (milk for different stages, comfort)

I used Cow and Gate with my ds. He was originally on Comfort 1- it helps with windy babies- its supposed to be easier to digest and did seem to agree with him. I then moved onto the normal stage 1. They changed the packaging from when I started using it but I'm not sure about the organic one- I don't think I've seen that one. I've had no problems with Cow and Gate and my ds has thrived so I would use it again. That sais, I'm sure others would say the same about other brands! It seems to me that it just comes down to personal choice- a lot of people seem to use one because someone else they know uses one in particular and recommends it. You can always change if it seems not to agree with your lo. The cow and gate website has all their milks on it so it might be worth a look for you. I've also phoned their help line a few times and they've been very helpful. I hope this has helped a bit. If you want to know anything else just pm me if you like!! Let me know how things go for you

14) Debating whether formula advertising restrictions are a good idea or not.

Summary: A chat forum user wanted to know why infant milks cannot be advertised, and suggested this could make mums feel bad about not breastfeeding. Replies to the post varied, with some suggestion that advertisements should be allowed, and that it was unfair that supermarket reward points cannot be collected for infant formula purchases. One noted that advertisements are important to show people what formulas are available, as when her son was diagnosed as lactose intolerant, she was not aware of all of the products on the market. Others noted their support for the ban, and felt it should be extended to follow-on milks as they are used to more generally promote formula feeding. One poster noted the range of information sources by which supposedly independent information was distributed – with advertorials from formula milk companies in HV publications, and so-called educational materials from such companies sent to HVs.

Feeding practice: none

Information sources: company (advertisements, give-aways, packaging); healthcare professionals (health visitors, government)

Company influence: brands named; formula products (follow-on, infant milk, products for lactose intolerance); advertisements for follow-on milk; follow-on milk give-aways; advertorials and educational materials aimed at health visitors and their professional publications

- *always been a bit confused by this (not overly important i know) why is advertising geared to breastfeeding and all milk adverts are for follow on and all followon milks advertise say afer breast feeding I feel it could make some mums feel down for not breastfeeding*

- *It isn't very fair at all. Obviously the government think we can't make up our own minds and the power of advertising will woo us all away from BF-ing!*

(Just for the record, I'm not in anyway anti BF or FF, I've done both)

Ever noticed, you can't get reward points on formula either

- *Just remembered, that SMA advert with the little tiny baby had a tin of follow-on milk in the background due to the rules on advertising baby milk. It never actually said about either of them, but I often wondered if someone might have gotten the wrong information from it?.(That advert made me cry!)
xx*

- *Wel I am glad that there is a ban on first milks, personally I would like to see it extended to follow on milk too. The trouble is that formula companies have a lot of money they can spend on advertising and marketing, who could spend that amount promoting breastmilk- the government? I would not be happy at my taxes being spend advertising breast milk simply to compete with big formula companies. It is not a level playing field it terms of available funding to promote either type of feeding. In terms of being grown adults making informed choices, then it would be good if this were true. Why then is advertising such big business? - because it works, it influences peoples choices, and not simply because they are in the business of making information freely available. The ban exists for very good reasons, the truth of the matter is that we have the nations health to consider, and the overwhelming evidience is that breastfeeding makes for a healthier population.*

- *They used to be able to advertise, and yes they did used to claim it was preferable to breastmilk and are responsible for a lot of people still believing this to be true (and a lot of other mis conceptions about breastfeeding which came from it).*

Advertising and marketting companies don't give 2 hoots about the health safety and welfare of anyone, adverts are very rarely actually completely true, even if they can't tell outright lies (though some do, some get caught and done for it, some get away scot free, and even when they are caught they don't have to do anything to correct the mis information they have given out so anyone who saw the initial lies can carry on believing it to be true) they can embellish and flower, leave out very important information which puts a whole different slant on their products, and distort the information they give. The purpose of advertising isn't to inform and educate but to sell - and so companies use what ever methods they can to do so, normally remaining only just within the law and always only making any statements that are not favourable to them if the law requires them to and then doing so only in the tiniest print possible in the most obscure, and least likely to be seen, way they can get away with.

Adverts aren't factual, they are glossy presentations showing how wonderful a product is but none of the negative - for anything. An advert for a car tells you what a wonderful lifestyle you'll have if you buy this car, it doesn't tell you about the carbon emmissions, the running costs, or the safety testing they subjected the car to and where it didn't actually perform very well. An advert for a burger chain tells you how wonderful the burger tastes and how cheap it is, it doesn't tell you the fat content, the nutritional value (or lack of it), or the effect they can have on your health if you eat too many. 93% fat free makes something sound wonderful, and people fall for it so they use it a lot on food -

but think about what it really means (and read the other packs which don't have it all over them but actually contain only 4% fat hence being 96% fat free

They already use subtle, or not so subtle depending how well you understand and see through adverts, tricks with follow on advertising - using tiny babies to illustrate a product only to be used for 6+ months old, the gurgles of a tiny baby as the sound track - it plants an image in your head of a tiny baby and their brand name milk, sticking sachets of follow on milk in freebie packs given out to mums who haven't even given birth yet, lots of images of rolling fields and sunshine to imply the naturalness of it all. And it works, advertising does work because many many people don't 'see through' it and do believe that adverts are sharing factual and helpful information and don't actually look any further than what the advert says - there is invariably a lot more to be known than is included.

- *They're not allowed to advertise first milks because the government have got this 'breast is best' campaign going on.*

...I do think it is slightly unfair that you aren't allowed to advertise Formula, of course we all know the formula is there but there's lots of different types of formula that I certainly didn't know about, it was only when DS was diagnosed with lactose intolerance that I knew SMA LF or SMA Soya existed! and DS was lucky enough to get that on prescription otherwise I would've had no idea where to get that from!

Everyone bangs on about 'breast is best', so you don't need to advertise it as such because there is only one type of breast milk....from your boobies!! Every woman knows this (well at least I hope!) and yeah of course formula manufacturers are going to want to produce adverts to sell their product (well their not allowed but in principle) but so what? People who choose to FF know they will have to buy the milk!

I think they should be allowed to advertise Formula so that people know what different types of milk are out there and where they are sold. I don't think they should be allowed to claim formula is preferable to breast milk though, just to keep it informative

- *I completely agree with Sharron regarding the insidious nature of follow on milk. Also a worry to me is that many HVs receive " educational material" that is prepared by formula companies. I have seen articles in HV professional magazines which are nothing more than adverts at pushing formula. For example one of the features of formula milk is that it is heavily supplemented with iron. Formula companies have used this feature to suggest to health professionals that breastfed babies over the age of 6 months need iron supplementation. This is complete nonsense. Of course breastmilk contains a lot less iron than formula, but is far better absorbed. Many HVs will continue to insist on iron supplementation. This combined with the fact many HVs have poor training to support breastfeeding, especially when it comes to poor weight gain or failure to thrive. Many health professionals have a poor understanding of breastfeeding management and are too willing to suggest*

formula supplementation. (Less work for them also). It is extremely rare for a woman to be able produce adequate amounts of milk, and yet the number of women who think this is the case is

4.4 Health opinion-drivers in conversations

4.4.1 I think my baby has digestive / excretory problems such as vomiting / reflux / constipation / diarrhoea / lactose intolerance

• Conversation posts referring to babies of mixed ages, both younger and older than six months

Key themes in conversations about babies of mixed ages, both younger and older than six months

This ideas raised within this driver were common across all of the website chat forums that were viewed, and were particularly of concern to parents of infants under six months. The conversations used for illustration (see below) all relate to infants up to the age of six months. This driver was one of the most significant in terms of level of conversation on all website chat forums.

In many ways the needs and expectations within this driver were similar to those expressed in Section 4.3.1. Digestive and excretory health issues tied closely into social issues around wanting babies to sleep more, cry less, be more settled and eat less frequently.

The conversational posts made it clear that many people were very concerned that their infants were either suffering due to digestive / excretory issues such as constipation, diarrhoea, flatulence, wind, reflux, colic, and possetting and / or that the infant's health might be at risk due to these conditions. Most users below were unclear whether their infants digestive / excretory behaviour was within the bounds of normal or whether it was cause for genuine worry. Concerns arose even among those whose infants were not unhappy, or losing weight. The idea that there must be a solution which enabled one's infant to digest and excrete harmoniously was expressed across all of the website forums.

Feeding practices in conversations about babies of mixed ages

There was evidence from the chat forums that the needs and expectations within this driver led to examples of / recommendations for feeding practices out of step with best practice guidelines, in particular: introduction of solids to bottles (recommended by a doctor for a one month old baby with upset stomach) (conversation 2); early weaning (recommended for stomach upset) (conversation 2) and switch from breastfeeding to lactose free formula for baby with diarrhoea (a doctor's recommendation) (conversation 3).

A mix of ideas about the properties of formulas, that are not supported by independent evidence, were also shared on forums: thick and creamy formulas help upset stomach, and constipation, by sitting heavily on the

stomach (conversations 7,8,10,11); reflux formulas work by thickening on contact with stomach acids, thus settling the stomach (conversation 9); and feeding regimes (regulating by time, ounces) help a baby's digestion / excretion (conversation 4). The whole issue of lactose intolerance was also raised, and it was unclear how this diagnosis was made (conversations 3,5,12), yet it had led in one case to a mother being encouraged to give up breastfeeding her young infant (conversation 3). These views were formed through the use of a mix of information sources.

There was also some evidence of people receiving advice that bordered on the medical from company sources, such as: a Cow & Gate helpline reassuring someone that runny poo was due to the special ingredients in their formula (conversation 17), similarly the Aptamil helpline (conversations 6,15).

Information sources in conversations about babies of mixed ages

A range of information sources was used in forming ideas around meeting the needs and expectations expressed within this driver. Healthcare professionals were reported to offer a mix of advice, including some that directly contradicted government feeding advice, and some for which there was no evidence one way or another. For example, a doctor was reported to have suggested the introduction of solids to a bottle for a baby who had seemed to have digestion problems (conversation 2). As the baby was under a month old, this was not simply very early weaning, it was also a choking hazard. Healthcare professionals were also reported to interfere consistently, creating worry in parents about whether their babies digestion / excretion was working as it should (conversations 2,3,4,10). Health visitors were reported to have repeated information from company sources, as if it were independent advice (such as Cow & Gate's assertion that it gives babies runny poo due to special ingredients).

Family and peers were also involved as information sources, again with a mix of advice, both useful, random and contra to government feeding advice. Some of this advice was given in relation to family and peers' own personal feeding experiences. Many asserted that particular brands were great because they had been great for their baby (conversations 7,8,10,13,14,15,16,18). Some suggested that formula types or brands were known to help with constipation or diarrhoea (conversations 1,7,8) or upset stomach (conversation 4). Some passed on useful websites, or company helpline information as if these offered independent advice about potential reasons for babies being either constipated, or with diarrhoea, or with upset stomach (conversations 6,13,15,17,18).

Company influence referring to babies of mixed ages

The driver clearly provides ample opportunity for companies to promote products. The strong drive from parents to ensure that their babies had good quality digestive / excretory experiences clearly led to a search for the right product to meet those needs.

Chat forum users posted general appeals for information about which were the best formula brands to deal with babies who seemed to have particular excretory or digestive problems (1,4,10,11). Thus, a whole range of formula types, brands and products were endorsed across sites. Some users just noted that their baby had responded well to a certain brand, or type of formula (staydown, easy digest etc). The names of these formula types clearly relate them to digestion / excretion, and many users were happy to endorse their characteristics (conversations 7,8,10,13,14,15,16,18). Some reported having concerns allayed by company helplines and websites. Some users had clearly noted 'special' ingredients, such as probiotics, that were also mentioned by company representatives (conversation 6,17).

According to the chat forum posts, health professionals of various types had also been convinced by messages about the utility of formula in aiding digestion and excretion. The issue of thickness and digestibility was again raised (conversations 7,8,10,11), with health professionals reported suggesting such products as aids (conversation 11).

Sample conversations

1) Chat forum user wants to change formula as has heard some brands could help constipated baby, but health visitor does not recommend it.

Summary: A chat forum user wanted to know if changing formula brand would help her five week old baby who was constipated. Her health visitor had advised against this, but she had heard that some brands help with this.

Feeding practice: health visitor suggested changing formula brand was a problem

Information sources: family and peers (chat forum users); healthcare professionals (health visitor)

Company influence: brands named; formula products (stage milks); messages about certain formulas being good for combating constipation

• have noticed that our 5 week old son has been quite constipated in the last few days (currently using Cow and Gate Stage 1 for newborns) and so thinking about changing his formula. However, our HV has advised against this as his tummy is stil developing and has recently had to cope with breast milk and forumla and now just formula. Has anyone else experienced any side effects or upsets in their LOs on changing formulas? I keep reading how Aptamil and Heinz are good for combating constipation so just getting frustrated that we 'cant' switch to something that will help him out (its horrible seeing him in pain, with clenched fists and going stiff with straining....). He has gone from several dirty nappies a day to 1 - though not had one now since Monday.....He weighs 11lb 3oz and takes between 4-5oz per feed, roughly feeding every 3-4 hours.....

2) Doctor recommends adding cereal to bottle for baby under a month old; site moderator interjects.

Summary: A chat forum user said her one month old son had had problems with digestion, and was put on soy formula by a doctor. This helped the digestion, but the baby cried relentlessly. The doctor had now recommended putting cereal into the bottle, and the user was doing this, but was worried. The moderator intervened mildly and said the mum should speak to the doctor again.

Feeding practice: early weaning; adding cereal to bottle for one month old baby

Information sources: family and peers (chat forum users, site moderator); healthcare professionals (doctor)

Company influence: formula product (soy)

• *soo last mon my sons doctor changed him to soy formula..so his poop got better but all he did was CRY..for a week straight all he did was cry, i think im gonna go nuts..so i called her back yesterday and she said to put him back on the old formula just add cereal to it...so i been doin that and so far *knock onwood* its been workin (its only been a day tho lol)...anyways, he isnt even a month old yet, it just dont seem right to me to give him cereal with every bottle...will it hurt him if i do? or just make him fat*

• *(Moderator) Hi crystal, I would assume since its doctor's advice he should be fine - however, I understand what your saying here and to be fair I think I'd have similar concerns. I think if I were you I'd book an appointment as ask the doc to explain the reasons etc for it, and specify how long he stays on the added cereal etc etc. Its always good to be clear on these things*

3) Doctor recommends formula over breastfeeding for two month old.

Summary: A chat forum user said her breastfed baby had diarrhoea for a week, and her doctor tried medication before now suggesting a move to feeding with lactose free formula. The baby had been gaining weight, and still was while having diarrhoea.

Feeding practice: doctor has recommended a switch from exclusive breastfeeding to lactose free formula to solve perceived problem of intolerance in two month old

Information sources: family and peers (chat forum users); healthcare professionals (doctor)

Company influence: formula products (lactose free milk)

• *hi, need a little help/advice. my 2mo exclusively bf baby has had diahorea for a week. doc first put him on anti-diahrrea med. it didn't make any differernce. today he said lo was lactose intolerant and wants me to put him on lactose free formula. anyone have any experience of this? i'm reluctant to take him off bf incase he wont go back. but obvs desperate to cure the explosive diahrrea...he has been gaining weight really well up until last week - 300-450gr per week, but this week just 50gr... help!*

4) Two week old baby gaining weight fine, eating well except for the past two days when waking frequently, crying and vomiting. What is wrong?

Summary: A chat forum user was concerned about her two week old baby's feeding because although she ate well, and was gaining weight, she had been vomiting frequently for a couple of days. She had had various bits of advice about feeding since the baby was born, including from a midwife who suggested more frequent feeding. She now is uncertain about how much and how often to feed her baby, and how worried she should be about her baby's vomiting. The baby's feeding is now disrupting the parents' sleep. Might a new brand of formula, or hungry milk help (friend suggested this).

Feeding practice: midwife set predetermined length of time between feeds

Information sources: family and peers (chat forum users); healthcare professionals (midwife)

Company influence: brand named; formula products (stage milk, hungry milk)

• *I'm a new mum with my first baby who was born on 28/11/08- so she is just over 2 weeks old. Initially she was feeding great, started on 40/50ml every 4 hours. The midwife then said we should not let her go longer than 3 hours between feeds, so we started waking her for feeds. This was working out ok, although she started bringing a bit back up and the first week she was up to 70/80ml per feed. She was weighed on day 5 and was back to her birth weight. We decided to go back to demand feeding where she was going 4-5 hours as her weight gain was good. Her intake then increased to what is now 120-140ml per feed. She was weighed again on day 12 where she had gained 8oz. She's still going about 4 hours, but the past couple of days she seems to be wanting more food sometimes only 2 hours apart, but then shortly after she brings it all back up again. She has been suffering a little with what I think is wind so we have tried her on infacol and that seems to help with bringing up the wind but she still occasionally brings milk back up, maybe 2-3 times a day. I feel like we're doing something terribly wrong, she cries for the milk then brings it back up, and this is mainly at night. For some reason during the day she seems to snack more and takes 50/60ml sometimes half an hour apart. I'm not sure if she is crying for more food cos she's hungry and bringing it back up cos her little tummy is too small to hold it all or because she has more trapped wind. It's really hard to get her wind up sometimes even with the infacol, I don't know what to do really. If we don't give her more milk she screams the place down and will not settle, but sometimes after she has brought it back up she will then settle!! My friend suggested we put her on hungry baby milk but I'm a little cautious about doing this, she's only 2 weeks old. She's currently on cow and gate number 1 and has been since birth and we've had no problems with it, she has plenty of wet and dirty nappies and is gaining good weight. Please can anyone give me any advice as it's distressing with her bringing up milk and some nights we are getting little sleep as she wants more food every 2 hours but then we're cleaning up the vomit and starting all over again. For example here is what she had last night:*

She took near enough a full feed at about 11pm - 130ml

*By half one she was hungry again but only took 60ml
3am she was hungry again and took another full feed of 140ml
4am she took another 50ml as was hungry again- she finally settled at 4.30am
She then woke again hungry at 7.30 and took another full feed of 140ml and
went straight off back to sleep. She's just woke hungry again at 10am*

5) Have tried reduced lactose and soy formulas for colicy, cranky, not sleepy baby under six months, what else can I do to get her to sleep?

Summary: Baby under six months seemed to have colic, and various solutions tried including reduced lactose formula (worked for awhile, but baby seemed to still have diarrhoea, spitting up). Switched to soy formula which seemed to get baby to sleep more and settle more at first. However, baby returned to frequent pooing, wakefulness, and crying. This was hard work, upsetting, what was the answer?

Feeding practice: use of soy formula without doctor's advice; self-diagnosis of lactose intolerance

Information sources: family and peers (chat forum users)

Company influence: formula products (soy, reduced lactose)

• couple weeks ago I changed DDs formula to a reduced lactose formula which seemed to help her colic symptoms. Though it didnt last, she was on it for almost 2 weeks and ended up with diahreach and would only eat little bits at a time and started gagging and spiting up more. So i've put her on a Soy formula, the first night she was amazing, slept longer, and the next day she was very good too. We went to a welcome party for her and she slept the entire day, it was pretty warm in my OH's house. So last night she did not want to sleep AT ALL!!! And today she has been really cranky and not wanting to sleep... Shes had little on and off naps, but not actual sleep. Shes pooped 3 times so far, and its started going back to a yellowy color... but she has been a nightmare all day, screaming on and off and having been able to put her down...I dont know if its because she slept the entire day yesterday and is overtired... Or if it is the formula... Or both

6) Baby has loose poo, but Aptamil helpline says this is due to pro biotic.

Summary: Chat forum user posted reply to question about formula and loose stools by noting that her Aptamil fed baby had the same issue, but the company helpline assured her that her this was normal, and due to the probiotic in the milk.

Feeding practice: none

Information sources: family and peers (chat forum users); company (helpline)

Company influence: brand named; helpline offering advice on possible health issues; helpline trusted as independent source; probiotics linked to loose stools and this viewed in a positive light

- *My LO has been on Apamil since she was born with no problems. She has always had loose nappies and when I asked Aptamil if this was normal they said it was due to the pro biotic in the milk.*

7) Chat forum user wants to know why easy digest milk packaging recommends chat with health professional, but is reassured by another user that the formula is excellent, and no advice needed.

Summary: A chat forum user switched to easy digest milk for her nine week old due to concerns about possetting, but ignored the advice on the packaging to speak to a doctor. A reply was posted from a user that suggested that Aptamil easy digest was a great product that helped her daughter's digestion. The user recommended no doctor's advice necessary, that that was just to cover themselves legally.

Feeding practice: use of easy digest formula without medical advice as suggested on the packaging

Information sources: family and peers (chat forum users); company (packaging)

Company influence: brand named; formula products (easy digest, first, hungry); messages about thick and creamy textures and reduction of wind

- *Does anyone know why it says on the pack that it should only be used on the advice of a Doctor / MW / HV etc? I bought it off the shelf on Sainsburys and have started giving it to my 9 week old in the hope that it helps reduce possetting and perhaps reflux and then saw the this statement on the box. Shoud I stop giving it to her until i speak to someone? Thx*
- *I've had my DD on Aptamil easy digest for the last couple of weeks. She was on Aptamil 1st but used to scrunch herself up after a feed and cry sometimes inconsolably. We initially put her on the the hungry stuff & infacol as we thought she might be hungry but this didn't really seem to make her any happier so thought we would try the easy digest. She was like a different baby - stretched out & relaxed after her feed, we were amazed... also changed her to a slower flow teat. The aptamil easy digest formula is a slightly thicker & creamier texture (but no more calories) which apparently means they get less wind with it. We add 5mls of gripe water to her bottles. It has a different taste to the 1st formula & I don't think it tastes very nice, but my daughter seems to like it! Didn't take any advise re changing her to easy digest - just did what we thought was best - I think this statement is on the Aptamil 1st milk as well - its probably just part of what they're told to put on them to keep themselves right. ps dd 11 weeks old.*

8) Chat forum user recommends formula brand to help with constipation, notes easy digest is thicker and should help with wind.

Summary: A user replied to a post about constipation with a suggestion about the brand and type of formula that helped her infant. Post suggested that Cow and Gate Comfort (easy digest) is thicker and will therefore help with wind.

Feeding practice: none

Information sources: family and peers (chat forum users)

Company influence: brand named; formula product (easy digest); messages about thick and creamy textures and reduction of wind

- *We tried Cow and Gate Comfort and it really helped with my little boys constipation. He used to scream to the point of choking when he finally managed to go and it was very distressing because we couldn't do anything to comfort him. Once we started the easy digest formula we didn't notice he was having a poo until we smelt it (they got smellier but looser). If you think it is becoming a problem for your daughter then I would say try it. Also it is thicker so the wind problem should improve*

9) Doctor prescribes reflux formula, chat user notes it thickens in the stomach when coming into contact with acid.

Summary: A chat forum user posted a reply to suggest that reflux could be helped by a prescription formula. The replier noted that the formula worked scientifically by thickening in the stomach when it came into contact with acid.

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (doctor)

Company influence: formula product (prescription milk for reflux); message about how formula worked scientifically to help with reflux

- *got prescribed 'enfamil' formula by the dr. It is for reflux and is very good, it is the same consistency as ordinary formula but thickens in the stomach when it comes into contact with acid therefore staying down! Genuis eh*

10) Chat forum user worried over two month old baby's digestion, not sure what is wrong, gets range of advice on brands from others users.

Summary: A chat forum user was worried about how to help her two month old baby who was feeding frequently, and constipated. The health visitor suggested lactose intolerant formula which helped with sleep but not constipation. Then mum switched to comfort (easy digest) formula but the baby's digestion still did not seem good – with sickness and windiness. Wondered if new brand might help, heard some brands were good. Replies suggested brands that had worked for other people, including some that seemed a good price.

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (health visitor, doctor); company (price)

Company influence: brands mentioned; formula products (stage one, stage two, comfort – easy digest, organic, hungry, lactose free); price

- *My baby is 8 weeks old. He was originally on cow and gate stage one but was wanting food every hour so HV said to move him to stage 2. He became*

extremely constipated and unsettled and in pain but HV said to keep him on it. She then decided he was lactose intolerant (I didn't agree) so he went onto SMA lactose free. He was even more constipated but was sleeping for 4 hours at a time. I have now tried cow and gate comfort which has solved the constipation but he seems to have a sore tummy constantly and is sick and very windy. What should I try next? I was thinking of trying Aptamil or HippOrganic as I have heard they are good? He takes 4-5oz at a time.

- *Try Heinz nurture hun, worked for us, tried loads before this one but it seemed to agree with him the most, good luck xx*
- *Hi we use Hipp and have had no problems with any thing and it's cheaper than most*
- *we used farleys but charlie was being sick alot after feeds so we changed to sma staydown which was great she started to go longer between feeds*
- *Our dd is on aptamil easy digest which we find is great. the doc prescribed sma lactose free at one point as she was crying & windy & not comfy but she was v constipated & cried constantly on it. (we didn't think that was problem either). now on easy digest & infant GAVASCON FOR SILENT REFLUX now happy baby*
- *Aptamil is great. But if hes got colioc get colief from doctor it breaks down the milk prior to digestion so easier on tummy. Also he won't be constipated with it*

11) Could one formula for hungry baby be upsetting stomach, might another brand be better?

Summary: A poster with a baby under six months worried about various issues to do with her son's feeding – he ate frequently but vomited, so switched to hungry milk but that seemed to lead to flatulence. Poster loved her baby, but he smelled, and she did not know what to do in terms of switching between brands and formula type. A chat forum user replied to say what brand and formula type worked for her baby, and noted that health visitor had suggested hungrier formula worked by being thicker, digesting slower, and so leaving baby more satisfied.

Feeding practice: none

Information sources: family (OH) and peers (chat forum users); healthcare professionals (health visitor)

Company influence: brands named; formula products (stage milk, hungrier); message about milk thickness relating to digestibility and satisfaction

- *This is a weird post but I need peoples experience and opinion. My baby was on SMA Gold, but he was drinking loads and couldnt hold it all down so about a month ago I switched him to Aptimal Hungrier babies, Though he now seems satisfied for longer - He has now got really bad wind all the time - It smells so strong and honestly I love him but I feel sick He also seems grumpier like its bothering his stomach, MY OH reckons its the Whey and*

wants to put him back on SMA gold - but im wondering if maybe its an aptimal thing andl could put him on SMA White. Is his stomach bigger now and could he handle sma gold plus is it ok to chop and change. Sorry this makes me sound like a right weirdo but i dont know what to do

- hi ruth, just to let you know i used sma white and my son was fine but afer he was on it for awhile the health visitor told me its not extra calories or anythin that keeps them satisfied for long its just an igredient that keeps it iun there digestive system longer and makes it heavier, i wish i would have known this first as i don't like the thought of it.

12) Chat forum user wonders if son is allergic to cow milk based formulas, and is advised by another user to talk to a doctor because some alternative formulas have bad effects, one changed her son's personality.

Summary: A chat forum user was breastfeeding her son, but wanted to formula feed occasionally. However, formula made her son vomit and she thought this might be because it was cow milk based, so thought of soy. Another user replied to note that she should get doctor's advice before switching, that that it might not solve the problem. The replier noted that her infant had become very aggressive on one formula brand, so she had had to switch.

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (doctor)

Company influence: brands mentioned; formula products (soy)

- *Is anyone using soy formula? My son is breastfed but I need to give him formula occasionally. I tried a few cow milk based formulas and he throws up right after having them (projectile vomitting) and his face gets dark red in contact with the formula milk. I'm considering trying soy formula and I was wandering if anyone is using it and if yes, are you happy with it???*

- *Firstly, if you want to use soy formula and think he might have problems with cow's milk then probably best to speak to your GP initially as it isn't advised to use a soy formula unless there are reasons to do so. My son was on soy formula for as he can't have dairy. Wysoy didn't agree with him at all. It made him extremely aggressive, angry and totally changed his personality so we were put onto a Cow & Gate one, I think it was. However, it's common for children who have cow's milk intolerances or allergies to also develop an intolerance to soy products which is what happened to Max. That's the other reason it's probably best to speak to a GP. Also, if there is a medical reason for him not able to have cow's milk then you will be able to get a soy formula on prescription.*

13) Two mums say Hipp organic is wonderful, cheap, better for the environment and also helps with colic.

Summary: Two mothers had a discussion about how Hipp organic formula is a wonderful products. The posts are very pro Hipp suggesting that: it helped with colic; it is organic and gentler on the stomach; it is more environmentally friendly; cheaper and can also be delivered.

Feeding practice: none

Information sources: family and peers (chat forum users); company (website, supermarkets)

Company influence: brands named; formula products (organic, stage); price

- *We really liked Hipp Formula. My DS was on Aptamil first, but he was suffering badly with colic, and on a whim, I changed to Hipp and the colic disappeared ... We stayed on that until he finally outgrew his bottles. Hipp is organic milk, so it should be good for easily upset tummies, and you can buy it online with free delivery*
- *switched my lo to Hipp Organic too, from Heinz Nurture as he was beginning to take 6/7oz, like Claudia said it did take a little while before he settled on it but now he's fine and taking 5oz without being hungry after. Its also suprisingly £2 cheaper than the other formulras in my local Tesco and the packaging is more enviromentally friendly*

14) Person mentions many brands tried in effort to alleviate vomiting, finally decided upon Heinz.

Summary: A chat forum poster wrote to reassure another mum that a solution can be found to vomiting in a baby – you may need to try many brands in effort to see what works, but you will find one. This poster strongly recommended Heinz.

Feeding practice: none

Information sources: family and peers (chat forum users); company

Company influence: brands named; formula products (staydown, stages); message that all formulas are different and right one can be found for your baby

- *had this problem with ds but from day one. I tried loads of different formulas, SMA Gold, SMA Staydown, Aptamil (which made him have the runs after every feed), we finally tried Heinz Nurture (used to be Farleys). He has been alot less sick on this (is still sick occasionally), he was on that till a couple of weeks ago and have just swithced to the hungrier baby one as we are trying to delay weaning as long as poss. Definatly worth trying Heinz imo*

15) A four week old was constipated, and parent has tried different formulas to solve this, taking advice from company helpline.

Summary: A chat forum poster noted that her four week old was constipated, and has tried different formula types to solve this problem. The poster was advised about brands by a health visitor and also by the Aptamil company helpline. The poster was very positive about the helpline, despite the fact that there has as yet been no

evidence of the formula change working. Also, the helpline recommended another brand to try (owned by the same company).

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (health visitor); company (helpline, supermarkets)

Company influence: brands named; formula products (stage milk, easy digest / comfort); use of helpline to promote products; cross promotion of brands – Aptamil helpline recommends Cow and Gate, in fact they are owned by the same company

- *My 4 week old daughter screams for an hour every night, always at 9pm/9.30pm (I know, I'm lucky it's only for one hour as I know a lot of mums have their LO's crying for hours). She also gets constipated, pulls up her knees in pain, hits and punches, scratches and twists her face, and goes stiff. She manages one poo a day.*

I switched from SMA Gold to Aptamil 1, and now I've switched again to Aptamil Easy Digest as recommended by my health Visitor. The Easy Digest isn't that easy to find, I had to order from a small chemist as I couldn't find it in Tesco, Boots etc. I would definitely change the milk, I haven't seen any results yet as only been on the new milk for 2 days and it can take up to two weeks before you see a difference (that's what the lady at Aptamil told me when I called them direct for advice). They also told me that if you can't find the Easy Digest, that the Cow and Gate Easy Comfort is almost identical.

16) Parent says new formula constipates her son.

Summary: A chat forum user noted that her baby was pooping fine on Aptamil, but a switch to Heinz led to constipation. Noted that Heinz had recently been reformulated and claimed to have an ingredient that helped constipation. Poster said it was rubbish.

Feeding practice: none

Information sources: family and peers (chat forum users); company (packaging)

Company influence: brands named; formula ingredients; price

- *LO has been on Aptamil since he was born and has always been "regular" in the nappy department!! A few weeks ago my local supermarket ran out of Aptamil, so I bought some Heinz Nurture (reluctantly) to try. It contains the ingredient Betapol which is a natural oil that has been scientifically proven to help reduce constipation.*

What a load of crap - or not should I say. After a few weeks of trying the Nurture formula my LO has never been so bunged up and uncomfortable - apologies for the description. I went back to Aptamil when it was back in stock and now we are back to being regular and a lot happier. Sod Heinz for saying that the price increase of their formula is because of the new ingredients and that it is now the best thing since sliced bread. It don't work

17) Baby has runny poo at two weeks old, but formula brand says that is normal – and down to its special ingredients.

Summary: A fifteen day old baby had terrible flatulence; a formula change led to less wind, but to an upset stomach with gas, and smelly poo. The user wanted to know if this was normal. Another poster wrote in to reassure her that the Cow and Gate helpline told her this was normal, and due to its special ingredients. Another post to a different conversation suggested that a health visitor told a parent the same thing – information directly from the company.

Feeding practice: website gives advice which borders on the medical

Information sources: family and peers (chat forum users); healthcare professionals (health visitors); company (website)

Company influence: brands named; formula products (comfort); helpline giving advice bordering on the medical and also suggesting that formula product had special ingredients

- *Hi, due to terrible wind and our baby being unable to tell when she was full we changed her milk to cow and Gate comfort, this is great for feeding now but she seems to have an upset stomach (alot of smelly gas and discomfort) she had a horrible poo two days ago and this helped but she hasn't been able to have on since. She has been on this four days and is only 15 days old, is thios normal, any advice? Thanks*

- *I found i had the same problem with my DS, when i posted on here for advice someone really helpful looked into it for me and found this on the Cow and Gate website, hope it helps*

Changes to expect in your baby

When you start using Cow & Gate Comfort Milks you may notice a change in your baby's nappies. Sometimes stools can be very loose and may also be greenish in colour. Don't worry! This is because of the special ingredients in Cow & Gate Comfort Milks and it's perfectly normal.

You might also notice your baby has increased wind – especially when you first start feeding with Cow & Gate Comfort Milks. Again, this is nothing to worry about – it's just a sign that your baby's digestive system is beginning to get used to the milk.

- *NOTE see above this entry is from another time, but it is health visitor apparently repeating something straight from company website. We used SMA Gold with our DD but we did consider changing as she had a lot of problems with wind but in the end we didn't as she grow out of it. When we were thinking of changing our HV advised Cow and Gate Comfort but she did say that it does make the baby's poo's very runny and green in colour so what your describing sounds normal for that milk*

18) Baby with reflux can be helped by formula switch.

Summary: Chat forum user recommended SMA Staydown for reflux, suggested that it was expensive, but worked. Gave company helpline in the post.

Feeding practice: none

Information sources: company (website, supermarkets)

Company influence: brand mentioned; formula product (staydown); website link given; price

- *get a prescription for SMA Staydown it works a treat. my DS had it til his reflux calmed down at 7mths. it's expensive without a prescription but it does stay down and helps them put on weight. can't recommend it enough. NOTE – person provides link to SMA website for this product. Later offers to send unopened tin to person.*

4.4.2 I had a baby that was premature / low birth weight, and I want to be sure I feed her correctly

- ***Conversation posts referring to babies younger than six months***

Key themes in conversations about babies younger than six months

This ideas raised within this driver were raised to a limited extent across all of the website chat forums that were viewed. As they related to premature infant feeding, they were particularly of concern to parents of infants under six months. The two conversations used for illustration (see below) both relate to infants up to the age of six months.

There were some reports that people had been recommended to formula feed on special care units. The reports suggested that health professionals referred specifically to formula brands, and suggested that some had much better quality ingredients than others (conversations 1,2).

Feeding practices in conversations about babies younger than six months

There is some evidence from the chat forums that the needs and expectations within this driver led to examples of / recommendations for feeding practices out of step with best practice guidelines, in particular: formula feeding of low weight infants (conversations 1,2).

Information sources in conversations about babies younger than six months

Healthcare professionals were the main sources referred to, and these were reported to clearly recommend brands of formula. The health professionals clearly repeated company marketing information.

Company influence in conversations about babies younger than six months

Healthcare professionals should not recommend particular brands of formula, yet these chat forum users clearly report that they have. The information repeated by healthcare professionals related to company related marketing information such as: Aptamil being closest to breast milk (conversation 2), and Cow and Gate containing vital nutrients (conversation 1). There was also a suggestion that formula was recommended for babies of low weight.

Sample conversations

1) Nurses recommend Cow and Gate for premature baby.

Summary: A chat forum poster said nurses recommended Cow and Gate for her premature baby. Poster said the nurses claimed that the formula had more vital nutrients for a new baby. The mum also suggested that others tried different milks, and at a weighing clinic months later, her baby was biggest – which meant the formula must have worked.

Feeding practice: nurses said one formula brand had more nutrients

Information sources: family and peers (chat forum users); healthcare professionals (nurses); company

Company influence: brand named

- *had this dilemma as my baby was 8 weeks early and the stress made me unable to breast feed for long. i asked the nurses on the special baby unit and they advised cow and gate as it has more of the vital nutrients needed for a new baby. there were several other babies on the hospital unit all the same age and weight and we all went with different milk, it was only when we were all at the clinic a few months later that i noticed the difference. my daughter was alot bigger than the rest and i feel i made the right choice. hope this was helpful x*

2) Formula brand recommended on special care unit .

Summary: A chat forum user was told by staff on the special care unit that Aptamil was the closest formula to breast milk and the best choice for her premature baby.

Feeding practice: special care unit notes Aptamil closest to breast milk

Information sources: family and peers (chat form users); healthcare professionals (hospital staff)

Company influence:

- *I've used Aptamil with both my children, was told by the special care unit when I had Emma it was the closest thing to breastmilk, I never found any problems with it*

4.4.3 I am not sure my baby is gaining right amount (usually not enough) of weight

• Conversation posts referring to babies of younger than six months

Key themes in conversations about babies younger than six months

This ideas raised within this driver were common across all of the website chat forums that were viewed, and were particularly of concern to parents of infants under six months. The conversations used for illustration (see below) all relate to infants up to the age of six months.

It was clear that many conversations on website chat forums related to concerns about normal weight gain in babies. Most concerns related to what was perceived as too little weight gain (conversations 1,2,3,6), but there was some concern about weight gain that was too great (4). Concern arose from parents and healthcare professionals, and arose in cases where there were no stated concerns about a baby's liveliness, or general wellbeing (conversations 1,3,4,6). There were related feeding concerns about what was too much, too little, too often in terms of consumption.

There was a clear, and frequent expression of the idea that formula provided for better weight gain than breast milk (conversations 1,2,3,6). It is clear that some chat forum users had experienced considerable pressure from health professionals about their babies' weight gain (conversations 1,2,4,5,6,7).

Feeding practices in conversations about babies younger than six months

A range of feeding practices out of step with government feeding guidance arose in relation to meeting the needs and expectations within this driver including: early weaning to support weight gain (conversations 1,5); giving up breastfeeding in favour of formula to support weight gain (conversations 1,2,3,6); and feeding an infant with cool boiled water to reduce weight gain (conversation 4). In conversations 1,2,4,5,6 it was reported that it was health professionals who were applying the pressure towards such feeding practices.

Some posters wondered if particular formulas, such as hungry milks, were of use to support weight gain (conversation 7).

Information sources in conversations about babies younger than six months

Healthcare professionals were the main source of information discussed in chat forum posts. They were reported to offer a range of information, often contrary to recommended feeding practice (conversations 1,2,4,5,6). They were often mentioned very negatively, in that they actively worried parents about the size of their babies (conversations 1,2,4,5,6). Healthcare professionals clearly offered information supportive of formula in terms of its utility in weight gain (conversations 1,2).

Company influence in conversations about babies younger than six months

There was clear opportunity for formula products to be promoted. Formula was clearly mentioned in posts as being supportive of weight gain (conversations 1,2). It was recommended over breastfeeding for babies who were perceived to be not gaining enough weight (even in the absence of other health effects) (conversations 1,2). Hungry milk was recommended for a big baby, with the suggestion that infant milk was not enough for particular size babies (conversation 7).

Sample conversations

1) Health visitor recommends formula tops up or weaning for 19 week old breastfed baby due to weight gain concerns.

Summary: A chat forum poster noted that her nineteen week old daughter has lost bit of weight over the past two weeks. At a weighing clinic she was told by a health visitor that formula top ups to breastfeeding might help. The mum was not keen as the baby seemed happy, so the health visitor recommended weaning onto fruit and veg. When the poster noted that that was low calorie, the HV recommended baby rice.

Feeding practice: early weaning

Information sources: family and peers (chat forum users); healthcare professionals (health visitors)

Company influence: message that formula promotes proper weight gain

• *I've posted over the past few weeks about DDs lack of weight gain. In the past fortnight she has lost 3oz. She is now 19 weeks old.*

I took her to be weighed this morning. It was a drop in clinic with several HV. I overheard one advising several Mums to wean their babies on fruit/veg - one I know was only 17 weeks. She weighed DD and noticed the weight loss.

She said I should try topping DD up with formula. I said I wasn't keen to as DD is very content and I actually have to wake her for extra feeds as she will sleep through the night given the chance. DD is my third baby, she has been the most chilled out of the three.

She said that DD needs something more high calorie so I should try her with some veg. I questioned this, I said surely veg is very low cal. 'Ok then', she said, 'try her with baby rice'. I never weaned my other two with baby rice, I used homemade purees.

2) Chat forum user notes friend has three week old, breastfed daughter but health visitor insisting on formula feeding due to weight gain issues.

Summary: A person posted a chat about her friend's three week old, breastfed daughter. The poster noted that the health visitor was concerned about the baby's weight, wanted her to go on formula, said the breastfeeding mother probably did not have a let-down reflex, and warned of hospitalisation for the baby. Friend was concerned that the mum was being given incorrect information (about let-down) and that the worry over weight loss could be wrong too. Wondered what could be advised.

Feeding practice: breastfeeding undermined in favour of formula to support weight gain

Information sources: family and peers (friend); healthcare professional (health visitor)

Company influence: message that formula better supports proper weight gain

• *Her DD has lost about a fair bit of weight (not sure how much but he is 3 weeks old)since birth. She is BF but 'ordered' more or less by HV to put her on formula or have to have her admitted to hospital! I think this is just awful. She has of course felt obliged to go on to FF but wants to keep trying with BFing. She describes her as unsettled and snacking on and off but TBH - my DD was like that and I think it is normal for a BF baby! She tried to express but got hardly anything but I guess at 3 weeks her supply is probably not sorted. She was advised by HV that she probably hasn't got a 'let down' reflex. I am amazed by this 'advice'. I know BF babies don't gain weight the same as FF ones and the issue about expressing should have been explained I think and to suggest she may need hospitalised is shocking. I suggested she should just keep going with the BF and 'top up' with FF for a bit to get a bit of weight on but if she perserveres with BFing it will probably all come right.*

3) Chat forum user is breastfeeding 13 week old son, does not seem to be gaining enough weight according to the charts but is perfectly happy. Wants to know if she should top up with formula, if so, what brand?

Summary: Three month old baby was being exclusively breastfed, and was happy and active. He fed well, and digestion seemed to work well. However, was referred to the doctor because of concern over weight gain over most recent two week period. Poster wondered if supplementing with formula would be a good idea, and the best brand to use.

Feeding practice: breastfeeding undermined in favour of formula to support weight gain

Information sources: family and peers (chat forum users)

Company influence: brands mentioned; message that formula better supports proper weight gain

• *Hi all, My baby is 13 weeks old and I have exclusively breast fed him so far. However, he has plateaued with his weight and dropped down the 'centiles'*

on the growth charts to the extent that we have been referred to the doc who has now referred us to the hospital. He was 7lb 11 when born, and is now 10lb 1. He has yo-yo'ed slightly in weight over the last couple of weeks and overall has only gained 100g in weight since 6th Nov! before then he was following the charts fine. I really don't understand it - he is happy, healthy, alert, doing the right number of wet/dirty nappies and seems to be feeding well, but per above, he isn't gaining weight! He feeds about every 3 hours during the day and at night, it varies between every 3 and 8 hours between feeds - often a longer stint early on then every 3-4 hours after. I am thinking about giving him one bottle of formula per day to supplement his feeds - does anybody have a view on this? Any ideas on the best timing for this and the best brand to use? I have some cartons of SMA gold in the cupboard, but I have also been recommended Aptamel.

4) Chat forum user tired of being told off by HVs who say her formula-fed baby is gaining too much weight.

Summary: A chat forum user was tired of being told off by health visitors who said her six week old baby was gaining too much weight. She started giving water between feeds because the baby cried if he was not offered something, and she did not want to starve him or make him unhappy. She was uncertain about what to do.

Feeding practice: giving water to baby instead of formula due to health visitor worries over what is seen as six week old baby's excessive weight gain

Information sources: family and peers (chat forum users); healthcare professionals (health visitors)

Company influence: none

• Sorry for not replying sooner.... The HV's moan at me when I get him weighed sayikng I am feeding him too much, he is 6 weeks on Monday and has 180ml of Hungry Baby Aptamil milk, he is still having 6 bottles in 24 hours, he weighed 7lb 15 at birth and now weighs 11lb 14, he hasnt got rolls of fat or anything. If he is hungry I have to feed him, I cant starve him and he knows if he has had enough. I have tried the cooled boiled water and sometimes he takes it and other times he doesnt. I guess I have to do what is best for him although I dont think I will be going to get him weighed so often now as I am fed up with being told off

5) Health visitor recommends weaning at 20 weeks for big baby.

Summary: A post suggested that a mum with a baby that seemed big for its age (20 weeks) had been told by her health visitor that the baby should be weaned onto solids. A reply suggested that the mother checked out information on feeding from the NHS, as the health visitor was wrong. The original poster replied suggesting that the health visitor had got her information from leaflet about weaning, but had misunderstood its message about possible reasons for early weaning. The post also discusses iron needs in babies.

Feeding practice: early weaning with suggestion that this is appropriate for 'big' babies

Information sources: family and peers (chat forum users); healthcare professionals (health visitor, NHS website, NHS leaflets)

Company influence: none

• *Oh dear....HV needs to be asked (politely, if she is as you say, lovely!) where she has her info from? (NOTE: removed active weblink that was included here) breastfeeding.nhs.uk/en etc) is the current guidance, and she should be following this. Where she has '20 weeks' from, I have no idea, and maybe you can say to her 'I'm a bit confused...I have been doing my own reading on this, and I can't find anywhere where they say 20 weeks. Have I missed something, or is this a local thing, and if so, why does the local policy differ?' There is no reason at all why big babies need weaning earlier - again, if she thinks that, she needs to justify it. The nutritional reason for '6 mths' is not really calories (ie 'filling' the baby) at least not for a bf baby who can easily take sufficient calories by bf more often, but iron - and it's not a 'deadline', just that in the 2nd half of the first year, the baby will start to need more iron and intro'ing solids about now does mean he will get the iron he needs when he needs it...gradually building up to more solids is fine, as long as the bf baby continues to bf often. Can you feel brave enough to ask her where she got her info??*

• *I did wonder if I misheard 20 weeks but she was talking about avoiding Gluten and when I questioned that, she said it was only until 6 months, so she was definately in the pre 6 month area. I know where they get their local guidelines from, the local breastfeeding NHS expert explained to me last year (when I was complaining about our local breastfeeding support group) that weaning was recommended to start 'around the middle of the first year' and the NHS leaflets including the one you quoted, says there is flexibility for introducing solids if a medical professional thinks it necessary. They are allow to interpret this as 20 weeks, if they think it is necessary. I assume this flexibility was included for rare medical needs for solids, not for normal stuff like 'big' babies etc.*

6) Chat forum user tired of being told off by HVs who say her breastfed baby is gaining too little weight, and has had considerable intervention when nothing was wrong.

Summary: A long post from a chat forum user, in reply to question about weight gain and breastfed babies, who had considerable involvement with healthcare professionals in her daughter's early months of life due to concerns over weight gain. The replier noted that she breastfed, and had a happy, healthy daughter. However, she had a health visitor that insisted on regular weigh-ins, who demanded a move to formula; also doctors suggested she was obsessed with breastfeeding at the expense of her baby's health. Nothing was wrong, the baby was small.

Feeding practice: breastfeeding undermined in favour of formula to support weight gain

Information sources: family and peers (chat forum users, network of friends); healthcare professionals (health visitors, doctors)

Company influence: message that formula better supports proper weight gain

- *I have just had a look in little Ff's red book, and at 19 weeks she was 10lb1oz. I had no end of hassle from my HV, insisting I took her to be weighed every week, treating me like a moron for 'still' breastfeeding her, and telling me that I should be topping her up with formula, even when I explained that I had plenty of milk, wasn't too tired to feed, and was eating well. She basically accused me of lying on more than one occasion, seeming incredulous that a baby as small as Ff would sleep as well as she did, suggesting that she was sleeping at night because she was too weak to wake up. I came to dread the weekly weigh ins, but had to go, because if I didn't she would turn up at my house. Little Ff used to take a good hour to take a feed, and to try and make her gain weight faster I was expressing milk after each feed so I would have a bottle of EBM to give to her with her last feed at night, as well as an hour at the breast. I honestly felt as though I was doing nothing apart from feeding or expressing.*

I eventually took her to the GP, not because I had any concerns about her, but to shut the HV up. He referred little Ff to a paediatrician (after telling me I should get over myself with my obsession with breastfeeding, because formula milk nowadays is exactly the same as breastmilk) and we had to take her to the hospital for three separate appointments, not because they found anything wrong with her, but 'just in case'. At the second appointment they insisted on taking blood to check her for anaemia...again, not because she seemed ill, but because she looked pale skinned. (I have red hair, my husband has red hair...neither of us is exactly olive skinned!) At the third appointment, the paed finally conceded that they could find nothing the matter with her. She is small, that's all.

I've never been concerned about her. She is a happy, bubbly little baby, full of energy and always on the go. She eats an extraordinary amount for such a small person, and eats and sleeps like clockwork. I haven't had a broken night with her since she was four months old.

She will be 40 weeks old tomorrow, and is still in size three nappies, and is just wearing 6-9 month clothes. I say you should trust your instincts - you would know if your baby was unhappy and hungry, and would do your best to solve the problem. It sounds as though she's fine. Enjoy having a little one - you get much more time with a 'baby', IYSWIM. I don't take her to be weighed anymore, and if the HV EVER comes to my house again she will be getting the sharp edge of my tongue. I am considering making an official complaint about the way that I was treated, and hate to think how that sort of pressure might make someone who wasn't as --bolshy and arrogant-- self-confident and well supported as I am feel. If you are happy with exclusively breastfeeding, then stick with it, and feel free to shout at me for a chat if it starts to get to you

7) Hungry baby formula recommended by HV who says three month old baby is too big for regular formulas.

Summary: A chat forum user has been told that her three month old is too big, and needs to go on hungry formula. The user suggested her baby did feed quite frequently. Wanted to know if hungry baby formula worked.

Feeding practice: idea that 'big' baby of three months needs special formula

Information sources: family and peers (chat forum users); healthcare professional (unclear which)

Company influence: formula product (white – hungry); message that formula is linked to sleep

- *have been advised to put lo on this as he is getting "too big". He is 11 weeks and 15lb. He only goes 3 hours during the day and this reduces to 2 hours in the evening but then he stretches out at night to 5/6hours. I never had to use White with ds1, he was never hungry! Lo is quite the opposite! Has anyone else used White?*

4.4.4 I want to know what type of formula is best for my baby as she gets older, and begins weaning

- **Conversation posts referring to babies who were weaning**

Key themes in conversations about babies who were weaning

The ideas raised within this driver were common across all of the website chat forums that were viewed, and were particularly of concern to parents of infants of approximately six months, ie the recommended age for weaning. However, there were examples of weaning at younger ages expressed in conversations.

Conversational posts were sought out that related particularly to the use of follow-on milks, although posts relating to other weaning issues have been included.

Feeding practices in conversations about babies who were weaning

No posts were found that indicated the use of follow-on milk in babies significantly younger than six months of age. No posts were found that indicated serious consideration of the use of these milks in babies significantly younger than six months of age. Posts were found on all sites that clearly stated that follow-on milks were for babies from six months of age.

The role of follow-on milks as part of the diet of infants from approximately six months of age seemed to give rise to more confusion (conversations 5,15). There were posts that indicated that parents were confused about the fact that follow-on milk packaging suggested it can support babies who are weaning, but also that it is for babies older than six months (conversations 5,15).

However, the posts that indicate this confusion were from users whose babies were nearly six months old.

There was a mix of opinion about the dietary role of these milks, with some parents suggesting that they had heard that they provided extra nutrients for weaners who had poor consumption of, variously, iron, meat, fruit and veg (conversations 3,6,7,8,9,10,12,14). Some posters suggested that the milks could give extra support in those cases, although not all people were not exactly clear on the role or type of nutrients in the follow-on formula. However, the greater weight of posts expressed the opinion that follow-on formulas while not necessarily bad, were unnecessary (conversations 2,3,4,5,6,7,8,9,12,14,15), and a marketing gimmick (conversations 4,5,7,12).

Conversational posts were found, in this driver and others (Sections 4.3.1, 4.3.3, 4.4.1, 4.4.3) that indicated a lack of understanding of / support for six month weaning. Health professionals were culpable in this regard. A post is included below, an extreme example, in which a mother planned to give her baby boiled marrow bones at three months (conversation 13).

Information sources in conversations about babies who were weaning

Although healthcare professionals, and family/peers were reported to have recommended early weaning in many conversations, there were no examples of recommendations for follow-on milk use at a young age. Chat forum posters more often stated that they had been told that these formulas were not to be used for younger infants. Healthcare professionals were reported to have a mix of opinions regarding their utility after six months of age (conversations 7,8,10,14). There were many posts where people noted having been told that this formula was not necessary, with health visitors occasionally suggesting that the milks could support babies that seemed to be poor weaners (conversations 7,8,10). The definition of a poor weaner was not exactly clear, and varied between health visitors (conversations 6,7,8).

There seemed to be great awareness of the products on the chat forums. Posts show that some people were concerned that follow-on milk is just a gimmick to allow companies to advertise, with many posts aware that infant milks could not be advertised, while these milks could (conversations 4,5).

Company influence in conversations about babies who were weaning

Companies were reported as the main source of information about follow-on milks. In particular, it was noted repeatedly that the milks were cheaper (conversations 1,2,3,4), that people had received free samples of the products (conversation 1), and that supermarket bonus points could be gained with

their purchase (conversation 2). Some posts suggested that users would move to the milks for these reasons. Some suspicion of company information was reported, one user noted having been told that glucose syrup was not sugar (conversation 11). One post is included that is not typical of what was found, but that suggests that formula is necessary until the age of two years, due to the likelihood of anaemia in babies (conversation 12). The poster who replied to that felt this type of information was typical of what company marketing had brought so many people to believe – that formulas have wonderful nutritional properties.

Sample conversations

1) Mum wants to know which follow-on milk to use.

Summary: A mum had a free sample of a follow-on milk sent from Tesco, and liked it. She thought she might choose that brand, and another poster had suggested it too.

Feeding practice: use of follow-on formula

Information sources: family and peers (chat forum users); company (free sample)

Company influence: formula product (follow-on milk); use of free sample to promote follow-on milk; formula product (follow-on milk, stage 1); message that follow-on formula is at all necessary in terms of nutrients needed to support weaning

• *Funny you should recommend that one. Tesco sent me a free sample thru the post of the nurture follow on milk and suprisingly other than a slight posset there was no sick. I just put it down to coincidence. Think i might definitely give it a try now thanks again*

2) Follow-on milk cheaper, and you can get supermarket points.

Summary: A chat forum user wrote in to note that follow-on formula was not necessary, but that it was generally cheaper, could be found on promotion, and could be used to get reward points.

Feeding practice: none

Information sources: family and peers (chat forum users); company (supermarket)

Company influence: promotions (price, reward points)

• *Although you don't need to use follow on, it is cheaper!! You can get tesco / boots points etc and it is often on offer, whereas they can't do price promotions on the first stage milk. I tend to order several at a time from boots online when they have the bonus points offers on.*

3) Is follow-on formula necessary, it does seem cheaper?

Summary: A chat forum user wrote in to ask if follow-on formula was necessary, she had noticed it was cheaper. A user replied to note that follow-on formulas have higher levels of important nutrients, and were often cheaper.

Feeding practice: idea that follow-on formulas are necessary

Information sources: family and peers (chat forum users); Company (supermarkets)

Company influence: brands named; formula products (follow-on); idea that follow-on formula is necessary and contains more vitamins and minerals; promotions (offers, price)

• *Has anyone used it? DD is 6 months old this week and I was thinking of switching over to this. We use Aptamil at the moment but Hipp Follow On Milk is about a billion pounds cheaper... Has anyone had any problems or anything with it? xxx*

• *We moved over to SMA progress not long after DD turned 6 months. It contains increased levels of important nutrients such as the minerals iron & zinc and the vitamins C & D but it is really down to personal choice whether you move over from stage 1 milk.*

*Also, you sometimes get offers on **follow** on milks (ie Boots are doing 2 free cartons with every 900g tin bought just now) which you can't get with stage one milks so can occasionally work out cheaper*

4) Follow-on milks are a marketing gimmick to get around advertising, but I would probably use them as they are cheaper.

Summary: A chat forum user reassured another that follow-on milk was not necessary, but that she would probably use it as it was cheaper.

Feeding practice: idea that follow-on formulas are necessary

Information sources: family and peers (chat forum users); company

Company influence: formula product (follow-on); price; marketing

• *I don't think you need to change to follow on milks as they're more a marketing thing thought up by formula manufacturers. They're not allowed to have special offer or advertise of first stage formulas so they have follow on milk. It is cheaper though (I think) so if I were a mummy I would probably switch.*

5) Discussion of company helplines, promotions and advertising in relation to follow-on milk.

Summary: A chat forum user asked for advice about whether to stay with infant milk as her baby got to six months, or to move onto follow-on formula. The Aptamil helpline suggested moving on, but the poster's friends were staying with infant milk. Other forum users replied, with two noting that follow-on formulas were unnecessary, and just a way of getting around the formula advertising laws. Another noted that

she had had information from the manufacturer that follow-on milk was to be used with weaning, while an NHS leaflet said it was unnecessary.

Feeding practice: idea that follow-on formulas go with weaning (possibly problematic if weaning is early); message that follow-on milk is necessary

Information sources: family and peers (friends who are parents, chat forum users); company (helpline)

Company influence:

- *My little one's nearly 6 months old and i'm wondering whether i should use Aptamil first or follow on for her? The aptamil helpline person said to use follow on as she'll be 6 months old on saturday but all my friends are using aptamil first with their babies who are the same age. i'm confused!*

- *information I have on follow milk from a manufacturer says it should be used as part on a mixed weaned diet i.e when weaning. But then NHS booklet says you can use first milk until 1 so I suppose its up to you. I personally changed when my daughter appeared to struggle with her first milk due to having just eaten a full baby size meal. Hope that helps*

- *No need to ever move to Follow on milk as its just a companies way round the advertising laws. In the UK we do not allow companies to promote formula and formula feeding (hence the breast is best messages plastered all over the formula packs), so to get round this and make sure you are aware of their companies existence they make follow on milks. Follow ons can be advertised and promoted to mums.*

- *There is no reason to switch to follow-on - it was only a way of getting round advertising laws! You could just keep your DS on normal formula. You also have the added risk with follow-on that they put loads of iron in it, which is a breeding ground for bacteria! (Note from another post 11.12.08)*

6) Confusion over follow-on milk for ten month old with suggestion of health visitor offering incorrect advice.

Summary: The parent of a ten month old wrote in to note that her health visitor had said follow-on formula was only necessary for babies older than six months if they had poor diets, in particular if they did not consume enough fruit and veg.

Feeding practice: recommendations around need for follow-on milk in diet

Information sources: family and peers (chat forum users); healthcare professionals (health visitor)

Company influence: brands named; formula products (follow-on); message that follow-on formula is necessary

- *Hi - My 10 month old DS is still on Aptamil Stage 1 - my HV only recommends babies have Stage 3 milk if they are not very good eaters or*

there diet doesn't contain a lot of fresh fruit/veg. If you babies are eating well and putting on weight then I would leave them as they are

7) Confusion over follow-on milk for seven month old with health visitor offering mix of correct and incorrect advice.

Summary: A health visitor replied to a post to note that companies' first priority was to make money, and that follow-on milks could be a part of that. However, the HV then noted that a seven month old baby might need follow-on milk if the baby was a fussy eater or not getting enough meat.

Feeding practice: message that follow-on milk is necessary if baby does not eat sufficient meat

Information sources: family and peers (chat forum users); healthcare professionals (health visitor); company

Company influence: brand named; formula products (follow-on, infant); message that follow-on formula is necessary

- *Hi Maresa, I`m a cynical health visitor who always finds the need to highlight that baby nmilk companies first priority is to make money, so need to be mindful when it comes to being sucked into their marketing and advertising campaigns! They know thta as MUms we are very receptive and vulnerable and can at times play on it! If DD is 7 months and is having 18oz of SMA gold- including milk that you add to food then stick with it. SMA progress and all the follow on milks do have a role to play, if a child is a fussy eater, not getting enough iron or decides they would rather eat food and not the milk then this is where the follow on milks come in to play. Providing DD is having at leats 2 portions of redmeat a week then stick with SMA gold. If you want to go onto SMA progress it probably wouldn` t do any harm, but by what you have put down here it doesn` t sound like it is vital to LO`s nutritional requirements*

8) Chat forum user discusses reasons for choosing follow-on milk as good choice for her baby, but notes all babies are different.

Summary: Chat forum user felt better giving her baby follow-on milk as he weaned as it has extra vitamins and minerals as compared to infant milk, this view was confirmed by her health visitor. Chat forum user noted that babies were all different though.

Feeding practice: follow-on milk nutritionally unnecessary

Information sources: family and peers (chat forum users); healthcare professionals (health visitor)

Company influence: formula products (follow-on milk)

- *Shows how some HV's are different then other Mine told me that once bub is eating solids they will decrease the amount of milk they will take in a day as*

the regular formula dose not have EXTRA vits in them they can lack some until they actually eat 3 meals a day on there own ..Hence why I got mine on the stage 2 follow on , so I would not worry about him missing out on anything ..he still dosent eat 3 FULL meals a day so I feel better knowing he has his milk at least ..An mine didnt cause any constipation as its the same brand as his other one theres not much diff , only vits and iron and extra calcium..but each baby is diff

9) Chat forum user recommends follow-on milk for poor weaner due to nutrient density.

Summary: A chat forum replied to another post about follow-on formula and weaning. The user noted that there was no real need to move onto follow-on formula but suggested that she did with one of her children who was not a good eater, as it is more nutrient dense.

Feeding practice: use of follow-on formula

Information sources: family and peers (chat forum users)

Company influence: formula product (follow-on); message that follow-on formula is at all necessary in terms of nutrients needed to support weaning

- *As there is no real need to move on I stayed with stage 1 until a year for dd1 then moved to follow-on before moving to cow's milk. With dd2 however, she is not a good eater so I moved to follow on as it is a bit more nutrient dense*

10) Chat forum user asks for advice on use of follow-on milk.

Summary: A chat forum user asked for advice about whether to use follow-on formula with her seven month old twins who were still on infant formula and who were eating well. The poster noted that she had heard that the reason to introduce follow-on formula after six months was due to iron needs.

Feeding practice: use of follow-on formula

Information sources: family and peers (chat forum users)

Company influence: brand mentioned; formula product (follow-on milk, stage 1); message that follow-on formula is at all necessary in terms of nutrients needed to support weaning

- *Hi Everyone, Just wanted some advice really, My twin girls are now 7 months old and eating puree meals fine also they are still having their Aptimel formula stage 1, Should i now be putting them on follow on milk or is there not much difference? I read that after 6 months their iron levels drop which is why they are supposed to have follow on milk, I have also read that follow on milk is no different. Can anyone give me any advice*

11) Chat forum user angry to find glucose syrup in growing up milk, and told by company that this was not sugar.

Summary: A chat forum user noted that her ten month old was fed with Hipp Growing up Milk, but that it made him hyper. She found glucose syrup on the ingredients and asked for a refund, only to be sent a letter explaining that this was not a sugar. The letter also noted that the user should not be concerned and that the ingredient provided the greater energy necessary for her older child as part of a mixed diet.

Feeding practice: company confuses the issue of glucose syrup and sugar

Information sources: family and peers (chat forum users); company (letter)

Company influence: brand named; formula product (growing up milk); letter suggests that glucose syrup is an important, unworrying, and non-sugar ingredient

- *Just so that other mother's don't make the same mistake I did Hipp Growing up Milk has glucose syrup as its fourth ingredient - an artificial sweetener. My DH and I noticed our 10 month old son go bananas - hyper and goofy -when we started using this formula milk. When I emailed Hipp to ask them for a refund they ignored that part of my email and instead suggested that toddlers needed more energy and which is why they add glucose syrup.....*

Here is their response to me:

"Thank you for your e.mail concerning our HiPP Growing Up Milk.

The Hipp Organic Growing up Milk contains glucose syrup which is not a sugar but an oligosaccharide. Oligosaccharides are chains of sugar molecules joined together and they are much less sweet than sugars. They are used to increase the energy content of foods in an easily-digested form. Hipp Organic Growing Up Milk has a higher energy content than many standard milk formulas and this is intended to help meet the high energy needs of toddlers.

Hipp Organic Growing up Milk should be used as part of a mixed diet, alongside a wide variety of other foods including fruits and vegetables, cereals, protein foods and other dairy products, and the presence of 1.7% oligosaccharides in the prepared formula should not cause you any concerns.

We hope this has reassured you and that you will feel able to continue to use this product.

Kind regards

*Jan Lambell
Customer Services Manager
HiPP UK Limited"*

12) Complementary feeding – milk vs formula for 9 month old.

Summary: Chat forum users discussed whether follow-on formula was necessary. One suggested that follow-on formula is necessary for iron, and that many children

are anaemic and may need formula until age two. Others replied that this follow-on is not necessary, and that it is an expensive, marketing trick.

Feeding practice: suggestion that formula is necessary until two because so many children are anaemic

Information sources: family and peers (chat forum users)

Company influence: brands named; formula products (growing up milk); message that follow-on formula is necessary (possibly to stop anaemia)

- *Think formula is more digestible and after 6 mths have to ensure baby gets enough iron as iron reserves will now be low and will not get enough from breast milk. (Not to say formula is pref to breastmilk! just need to ensure diet gives enough and formula can help here). Med advice seems to be now to keep on formula until 2 as so many young children are anaemic - used to be to get onto cows milk at 1yr but according to my dr that has now changed. Think this is just to protect those children who don't have a good diet tho.*

- *the bit about iron reserves and breastfeeding is a myth, nellieellie. breastmilk has less iron but the iron in it is far more absorbable than the iron in formula so they are not in danger of become anaemic if they don't have formula. yes, formula may be more digestible than moo-juice but since he is now 9 months old and probably having small amts of meat. Well, I would think that meat is even less digestible than milk so it is once again a non-starter. BT It is the wonders of the milk marketing boards in north america and europe that have led us to believe that children need milk to be healthy.*

- *to me that medical advice is to keep children on formula till 2yrs old. afaik, it is the idea of formula manufacturers to market their products till 2 yrs old. I have seen or heard of nothing to back up the claims of theirs that children need formula till 2yo. the longer they can have parents buy the stuff, the more of it they can sell. compare the price of a litre of whole (organic) milk to a litre of say, Hipp Growing Up Milk or whatever it is called to see what I mean.*

13) Chat forum user plans to wean daughter at three months onto boiled marrow bones.

Summary: A chat forum user wrote to note that early introduction of solids is not a problem, as she had been fed that way. She planned to offer her daughter what she had been fed – marrow bones boiled with veg. Chat forum user has also put jam on her baby's dummy.

Feeding practice: early weaning; dummy for two and half month old; jam put on dummy

Information sources: family (grandmother)

Company influence:

- *Yea, I have started lo on rice too. My gran used to feed me a mix of veg and marrow. She bought marrow in the bone. Boiled it with veg and water, no salt and no pepper. Liquidize it and sieve it, put it into a sterilized ice cube tray and freeze it. And at lunch time feed gave me that and milk. So when lo is three months, (in 2 weeks), I will start doing that.*

I gave her a tiny, tiny bit of jam on her dummy the other day. She loved it lol.

14) Is follow-on formula necessary?

Summary: Chat forum user wrote in to ask if follow-on formula was necessary. Her HV had advised that it was not, but she thought it might be good because it had more iron and more nutrients. Another user replied that she too had heard it had more nutrients.

Feeding practice: follow-on formula is necessary

Information sources: family and peers (chat forum users); healthcare professionals (health visitor)

Company influence: brand named; formula products (follow-on, hungry milk); idea that follow-on formula has more nutrients

• *Hello, I went to weigh in today and ask the HV about Follow on Milk as my lil boy is nearly 6 months, she said that basically theres nothing else in follow on milk to what hes on now which is Aptamil hungry baby. I thought there was more iron and more nutrients that baby needs as he grows up. So im a little baffled and I dont really know what to do. Does he need to go onto the follow on milk?*

• *had same as minimika, basically normal stage 1 milk assumes they drink a lot more (cos its their only food) so follow on milk has more nutrients/iron per made-up ounce. I've no idea about hungry baby milk, sorry*

15) Can a 24 week baby have follow-on milk, or must she wait until she is 6 months even if she is weaning?

Summary: A chat forum user could not get her usual Aptamil infant milk for her 24 week old baby. She wanted to know if she could use the follow-on version, even though her baby was not yet six months old. The baby was weaning already, and she noted that the packaging suggested the milk complemented weaning, however, she was confused as it also mentioned that it was for babies at least six months old. A website parent supporter wrote in to suggest that this would be fine, that she knew parents who had done this. However, the supporter did not that weaning was recommended for six months, and as a rule, it would be best to wait to introduce the formula until then.

Feeding practice: confusion over whether to use follow-on formula for baby bit younger than 6 months which was weaning (suggestion that people do this and it is not too bad)

Information sources: family and peers (chat forum users, including parent supporter); company

Company influence: brands named; formula products (follow-on); idea that follow-on formula is necessary; idea that follow-on milks complement weaning stronger than idea that they should not be used until 6 months; promotions (offers, price)

• *Hi Ladies, I was at Asda this afternoon and when we went to get DS's formula (Aptamil First) there wasn't any. I didn't want to get another brand because all the other ones I've tried have made him constipated. My OH suggested getting him the Aptamil Follow-on milk instead. I wasn't sure because DS is 24 weeks and the packaging says it is suitable from 6months plus. Is it ok to give babies follow-on milk before 6 months? I have already started weaning DS, he's been having tastes of foods for about 2 weeks. The pack said the milk was to complement the baby's diet during weaning, but I still wasn't sure. Can anyone offer advice. Cathy.*

• *Hiya Cathy, I can only advise that you follow the guidelines on the box. I know mums have given this milk before the 6 mths and their baby has been fine- formula milk companies themselves will say that your baby needs to be six mths. It says that it complements weaning as the recommendations are that babies are weaned from 6mths. As a one off for tonight/ tomorrow am it should be fine, but its best if you go back to your normal babys milk. (NOTE: Parent supporter)*

4.4.5 I want to know which formula is best for the health of my particular infant, and I am trying to figure out how to judge that

• **Conversation posts referring to babies of mixed ages, both younger and older than six months**

Key themes in conversations about babies of mixed ages

The ideas within this theme were not separated by age of baby, although the majority of posts that directly raise age are from people with infants six months or younger. The posts have not been separated because many take a broader perspective about the issues, making reference to ideas that cross baby age boundaries. This ideas raised within this driver are common across all of the website chat forums that were viewed. They were similar to the ideas raised in Section 4.3.3, however, they were more directly concerned with health criteria in decision making and opinion forming around formulas and formula feeding.

Parents wanted to know what formulas were best for their particular babies in terms of their health, and they wanted to discuss why this might be so. The conversations used for illustration (see below) make it clear that chat forum users had high expectations of formulas, as they did want what was best for their babies. They did not want themselves, or their babies to suffer, and they searched for solutions to how to make the right choices. However, it was also clear that chat forum users varied in how they approached this choice-making:

who did they trust to go to for independent information; how worried were they about formula feeding as a choice in terms of the health of their babies; were they angry at companies for their sales pitches, or at health campaigners for worrying parents unduly about health issues related to formula feeding?

Feeding practice in conversations about babies of mixed ages

The conversation posts used for illustration indicate little in the way of examples / recommendations for feeding practices out of step with best practice guidelines. However, the chat forum users did express a mix of ideas about the properties of formulas that were not directly supported by evidence, most particularly that Aptamil was close to breast milk (conversations 1,8,9,10). There were also clear expressions of belief in formula, and in the power of different brands / products to deliver what was right for one's baby (conversations 1,4,7,8,9,10).

Information sources in conversations about babies of mixed ages

A range of information sources were used in forming ideas around meeting the needs and expectations expressed within this driver. There were many heated debates between chat forum users about the quality of information from different sources, and the extent of manipulation of parents by the different information sources (conversation 9).

Healthcare professionals were reported to offer a mix of advice, including some that directly contradicted government feeding advice, and some for which there is no evidence one way or another. For example, some health visitors were reported to endorse Aptamil messages (conversations 5,8,9); health professionals had varying opinions on hungry milks (conversations 3,5). Some of the users treated information from healthcare professionals as trustworthy, and used the power of such professionals to back up viewpoints about formulas and formula feeding (conversations 5,8,9).

Although healthcare professionals rarely chipped in directly into conversations one website had a very active member, whose profile stated that she was a trained breastfeeding counsellor, who regularly came into conversations to counteract feeding information that was contrary to health advice (conversation 9). Some users were very angry that healthcare professionals purported to offer independent advice while actually repeating company information. One lengthy conversation is alternately grumpy and humorous, as users (including the breastfeeding counsellor) debate formula properties (including Aptamil's) and whether cows live in healthy parts of the world, perhaps in yurts (conversation 9).

Family and peers were also involved as information sources, again with a mix of advice, both useful, random and contra to government feeding advice. Some of this advice was given in relation to family and peers' own personal feeding experiences. For example, Aptamil was endorsed by many who said it was best for their baby (conversations 8,9,10). Others suggested that

different brands had better formulations. One poster admitted simply liking the packaging of one brand, and so chose it (conversation 2).

Company influence referring to babies six months or younger

The driver clearly provided ample opportunity for companies to promote products. The strong drive from parents to ensure that their babies had good quality health from their feeding experiences clearly led to a search for the right product to meet those needs.

The posts indicated a mix of thoughts about just how formulas do deliver, or fail to deliver results; many of these ideas could not be directly supported by independent evidence. The fact that companies promote a range of different ingredients and formulations, each purporting to be of high quality or special, seemed to have informed debate among parents. Posts indicate that chat forum users were aware of formulations, and discussed: sciencey bits (conversation 11); fish as an ingredient (conversation 12); fibre (conversation 5); prebiotics (conversation 10); digestion aids (conversation 6); vitamins /minerals (conversation 8) and long chain proteins (conversation 3).

Conversation posts are included below that indicated active debate around advertising restrictions placed upon formula companies (conversation 9). People were not all suspicious of formula companies. Some noted useful company websites and helplines, and were keen to assert that formula was a highly regulated, high quality product (conversation 8,9,10). Some repeated as fact that Aptamil was like breast milk. Others were clearly of the opinion that formula companies' first priority was to make money, and that the odds were stacked in companies' favour (conversation 9).

There was some indication in posts that price was seen by some as a marker of quality; while for others the cheapest products were recommended (conversations 1,7,9). There was a consciousness about price across websites with a sense that people did not necessarily want to spend more, but wanted to be sure that cheaper did not mean of inferior quality. There was a mix of views on whether cheap did in fact mean lower quality or not.

Throughout the postings on the chat forums it was clear that company marketing messages, and product awareness, come through a range of sources – from healthcare professionals, company information, and family and peers.

Sample conversations

1) Mum of two week old baby wants to know which formula is best, and wants to know if one is more like breastmilk, and if price is related to quality.

Summary: Chat forum user asked for advice about the best brand of formula to use for mixed feeding of her two week old baby. The chat user noted that she had moved to mixed feeding after going to hospital when she then exclusively breastfed

baby had become dehydrated. The first choice of formula was related to a promotion (a free cow) but she has now heard that Aptamil was close to breast milk, and that as it is more expensive, it might be of higher quality.

Feeding practice: formula promoted over breastfeeding as means of avoiding dehydration

Information sources: family and peers (chat forum users); healthcare professionals (midwives); company (packaging, promotional give-away)

Company influence: brands named; idea that price is related to quality; assertion that Aptamil is close to breast milk

• *We are giving our son expressed breast milk along with formula (he is 2 weeks old). Originally started off on Cow and Gate mainly because we ended up in hospital as he was dehydrated and when I was asked which formula I would like to give him, could only think of Cow and Gate (must have been the free cow!). Anyway, now that we are going to be giving him formula on a regular, daily basis I was wondering if there is any real difference between the various formulas and in particular Cow and Gate and Aptamil? My OH has noticed that Aptamil is more expensive in the supermarket and so reckons that it may be better so we should swap to that....Any thoughts on this? Also, the Aptamil packaging says that it is close to breast milk - is this correct? I have asked midwives and they have said that all the formulas are all pretty much the same and of course reluctant to give any firm advice.....*

2) Chat forum user gave baby Cow and Gate because she liked the packaging..

Summary: A chat forum user replied to a post about formula choice to note that she chose Cow & Gate for her baby because she liked the packaging.

Feeding practice: none

Information sources: family and peers (chat forum users); company (packaging)

Company influence: brand named; packaging admired

• *Maya is a Cow&Gate baby No real reason. I just liked the packaging*

3) My cousin told me that hungry baby formula is not good for babies under 12 weeks due to lack of long-chain proteins.

Summary: Chat forum poster wrote in to say that hungry baby formula is not recommended for babies under twelve weeks. Said her information was from her cousin who was a health visitor, and she noted that her child was sick on it. Said her cousin suggested it is to do with long-chain proteins.

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (health visitor)

Company influence: formula product (hungry)

- *to say that hungry baby formula isn't recommended for babies under 12 weeks. This is because it doesn't have the long-chain proteins in that babies need for brain development below 12 weeks or so (I think that's right anyway, my cousin is a health visitor and told me this when I was thinking about using it for one of my boys). I did put my eldest onto it at around 4 months old, he was sick and it made him worse than ever, I would feed him with a towel covering us and half the floor lol! It took me a while to realise what was making him so sick and when I switched back to normal formula he went back to normal.*

4) I think SMA hungrier formula is better than Aptamil's because my nine week old sleeps longer, and poos less frequently. Aptamil could not have been satisfying if he poed so much after eating.

Summary: Chat forum poster wrote in to criticise a particular brand of formula, and said another worked for her child, and must be better. Poster said evidence for this was that her baby did not sleep well on the first formula, fed often, and that he poed a lot – which means he was getting rid of waste ie the formula.

Feeding practice: none

Information sources: family and peers (chat forum users)

Company influence: brands mentioned; formula products (extra hungry, stage)

- *My LO was started off on Aptamil and after 3 weeks wasn't going any longer and was really restless so put him on extra hungry, still at 9 weeks he wasn't going any longer in the night, in fact every 2 to 2.5 hours and I was exhausted, he was making grunting noises after feeds in the night and didn't go to sleep sometimes till an hour later!! He was also pooing after every Aptamil feed. So at 9 weeks I put him on SMA White and from that first night he slept through till 5-6am and he only poos about twice a day, but, has never had any problem with constipation. The way I see it pooing is way of getting rid of waste so Aptamil obviously wasn't satisfying him for him to be pooing so much after every feed. I personally think Aptamil is overrated*

5) Doctor, HV, formula tin and chat forum user giving conflicting advice on appropriate age to introduce hungry baby formula (and which brand is best).

Summary: A chat forum user suggested that her four week old had trouble with her bowel movements, and said her doctor recommended a switch of formula brands (to one with more fibre). However, health visitor then said problem was baby was fed with hungry milk formula. Poster does not know what to do. Reply suggested particular brand of hungry formula, said HV and MW said fine for young infant.

Feeding practice: contradictory information about when to introduce hungry milk, with tin and doctor saying ok for four week old, and health visitor saying no; confusion over need for fibre for young baby

Information sources: family and peers (chat forum users); healthcare professionals (health visitor, doctor, midwife)

Company influence: brand named; message that such a thing as an especially hungry baby exists and that a specific formula can help such babies

• *I was wondering if anyone had any advice on whether or not to use this with my dd. She is 4 weeks old and I started feeding her sma gold then whit cap for hungry babies but due to these milks not having any fibre in them i had to change over to aptamil with 0.8g fibre(according to docs this makes huge diff) yest as she had trouble with bowel movements. My doctor says its fine to use the hungry baby formula but my hv said its a big no no as baby is too young (tin states frm birth) and this is why she had proiblems with her bowels so now im totally confused. Has anyone given their child the hungry baby stuff? Did they have any problems with it*

• *My boys on Aptamil Extra Hungry and after a couple of days struggling a little bit with poos he's fine now. I recommend it, so did my MW and HV and he's younger than yours!xx*

6) Just how does hungry baby formula work?

Summary: A couple of posts that discussed how hungrier formula worked. Both repeated the idea that the formula sits longer in the stomach, is less digestible, and so babies feel fuller for longer. One reply discussed fact that there was no evidence for this, but suggested giving it a try anyway.

Feeding practice: none

Information sources: family and peers (chat forum user); healthcare professionals (health visitor)

Company influence: formula product (hungry milk); message that such a thing as an especially hungry baby exists and that a specific formula can help such babies

• *Hungry baby formula takes the lo longer to digest so they stay fuller longer, thing is my HV said it just sits in their tummys so can cause colic*

• *The difference between hungrier baby formula and normal formula is that one is curd based and the other whey based, but I can't remember which. The theory is that hungrier baby milk sits in their stomach longer, makes it harder to digest so they stay full longer. Apparently there is no evedence to support this and it can cause colic in some babies, however it does work for some babies. Whichever way you might as well give it a try, as the worst it can do is give your baby colic, in which case you can switch back.*

7) Why choose one formula over another, is there any difference in ingredients?

Summary: A chat forum user had infant of six months who was breastfed, and now wanted to introduce formula. Poster wondered what brands people recommended, and whether cost related to quality of ingredients. Replies suggested range of brands that worked for other babies. One reply suggested that Cow & Gate has more vitamins and less saturated fat as compared to Aptamil.

Feeding practice: none

Information sources: family and peers (chat forum users); company (packaging, slogans, price); healthcare professionals (health visitor)

Company influence: brands mentioned; formula products (stage milk, organic); mix of messages including ones referring to quality ingredients, gentler on tummy; idea that formula composition is tightly regulated; price

- *Hi Everyone, My daughter is 6 months. I have been breastfeeding but recently started bottle feeding. I understand that HV cannot recommend brands of formula but whats the difference! Hipp is nearly £3 cheaper than Aptamil yet I thought that formula legally had to have certain ingredients.*
- *think they all do have to have certain things in them - with my DS i swore by SMA Gold and it never made him sick so i bought this to use with DD however it did not agree with her so she is on Heinz Nurture.*
- *I switched to cow and gate as it was gentler on my babys tummy and he doesn't sick it back up as he did with aptamil. If you check the nutritional content on the carton you will see that cow & gate has a higher quantity of vitamins and lower level of saturated fat compared to aptamil. Baby is thriving on cow & gate!*

8) Is Aptamil closest to breastmilk? (collection of comments from several conversations, with very few questioning that it is)

Summary: The most common comment in all of the search of chat forums was that Aptamil was close to breast milk. This is a collection of the comments. The claim is suggested to be repeated by a range of information sources. The message emerged from the company (see Appendix 3) and has been widely disseminated and interpreted.

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (health visitor, midwife); company (website)

Company influence: brands mentioned; message that Aptamil is close to breast milk originated with the company and has been widely disseminated

- *Im giving Freya Aptamil as it is suppose to be the closest to breast milk*
- *I did a taste test and chose the ones that tasted most like my milk. I mostly used Aptamil and sometimes Hipp Organic. Aptamil is good because of the*

prebiotics (found naturally in breast milk), and they encourage the growth of friendly bacteria in baby's tummy. It also has a handy box with flip lid and scoop leveller built in so you can measure it out one handed. IMHO SMA was the worst tasting (and sniffed at by my HV's and MW's too

- Both of my boys were on Aptamil and had no problems with wind or constipation. When DS1 was born he was on SMA and that caused him dreadful constipation so midwife and health visitor advised me to switch to Aptamil
- I've been finding it hard to keep up with Katie recently so asked the HV for advice and she told me that Aptamil was the closest to breast milk. She's been getting a bottle of that nearly every night and she doesn't seem to mind it at all
- Its a real personal choice, lots of people don't believe that formula fills babies up any more than breast milk, I found that my baby did eventually go 4 hours or more on breastmilk alone but it did take longer than the other bottle fed babies I know. When I switched to formula at 4 months - I used Aptamil as it was advised by HV as closest to breast milk.
- Few questions really...Is Aptamil any good? I decided on it because of things I've read saying it's the closest to breast milk, but these reviews are entirely what my decision is based on so would be nice to hear from real people..Can Healthy Start Milk Tokens be used for this? It says it has to be formula which is based on cow's milk but I can't seem to find anywhere whether or not Aptamil
- Aptamil easy digest as baba cant handle the full one yet. And its great!! Tried SMA which was shit!! And caused him so much problems now on apitmal and its so so so much better. One tub lasts about a week. Yeah it is a lil more expensive than the others but so so so worth it
- Aptimal like you said is closest to breast milk. (NOTE SMA is shit)
- found aptamil fab! can't praise it highly enough. maddi had aptamil extra hungry baby and has never had any problems with it we too use about a can
- I bf but i have aptamil formula which i've tried her with twice and she loves it, i tasted it and it tastes exactly like my breastmilk so no wonder! it's the closest thing to breastmilk apparently so i say it'd be the best. x
- used Aptamil with Jasmine but shes now on cow & gate, aptamil was great for a while but started making her have loose stools. Pretty much all of them state they are the closest to breastmilk
- Aptimal (sp?) every time!! My friends a midwife, and she says it's the closest to breastmilk. I also bought ready made cartons, just for emergencies. I'm with you

- if u want to change milks u cud try aptamil easy digest my son has colic and ive been advised to try changiing to this from aptamil first by my hv and the aptamil helpline
- aptamil site (which is what i use) says follow on has more vitamins, minerals and iron

9) Chat forum user has eight month old and wants to know which formula to choose, and not sure how to do so?

Summary: A chat forum user wrote to say that she wanted to choose a formula for occasional feeding to her eight month old son. She asked for unjudgemental advice, as she currently only had marketing messages to go on. A lengthy discussion ensued, with some of the replies included below. Some replies repeated messages about Aptamil including that: it is closest to breast milk (including in taste); the cows it is made from feed in healthier parts of the world; health visitors know it is closer to breast milk, and made from healthier cows. Others suggested that there was no difference, so choice should be personal – with organic as a key principle. One reply suggested that non-organic baby milk has cow's mucus in it. Some replies expressed outrage that health professionals repeat Aptamil marketing messages as if they are fact. Others said they felt judged by those suggesting parents were being swindled by Aptamil.

Feeding practice: none

Information sources: family and peers (chat forum users); healthcare professionals (health visitors); company

Company influence: brands named; formula products (stage milks, hungry milks, infant milk); message that Aptamil is closest to breast milk disseminated widely including through health professionals

• Hi my ds is 8 months old and as he has dropped to only 2 feeds a day i cant express more than an ounce a day! He sleeps out once a fortnight at my mums so me and dp can have a date night(or watch a dvd at home and fall asleep by 9pm!). I had a large store of breastmilk in frezer which has now run out so i will have to send ds with some formula.

The question is - which is the "best"? I would hate to fall under the spell of adverts which at the moment is all i have to go on! Any help and no judgey advice would be great!

- *none are best. I'd just pick one and go with it. actually, I would pick the cheapest organic one probably*
- *Whichever one is the cheapest - anything that should be in them has to be, by law, and the rest of the stuff they talk about is of unproven value*
- *I found both my DS' managed much better on Aptamil than any others.*

- *when I haven't expressed, my DD has a carton of SMA white ready-made formula, fantastic for babysitters as it can be used from room temperature. Saves the hassle of heating up/cooling down etc.*
- *would go for organic. Non-organic cow's milk has mucus and all sorts of yuck in it.*
- *My HV said Aptamil was by far the best and most like BM. She said something about the cows feeding in much healthier areas of the world!?!??*
- *Most of my friends regularly tell me that aptamil is the best because it's closest to bm (NOTE had confused face in) imo the only thing best about them is their marketing strategy, they're all pretty similar*
- *aptamil is NOT the best. and it is NOT the most like breastmilk. no formula is anything like breastmilk. they are all much of a muchness. HV's shouldn't be spouting crap like that. they are not allowed to promote any one formula and it makes me very (NOTE cross face) when they do. ds1 was formula fed, and aptamil make him very sickly. SMA made him constipated and we ended up with cow and gate organic. however, this is purely anecdotal. you'll get different answers from everyone. so just choose one you like the look of, or the cheapest and see how you get on*
- *(NCT trained breastfeeding counsellor) 'cos fish oil is good for babies, isn't it? It's just like the fish oil in breastmilk. (NOTE confused face)*

And milk from cows living in 'the healthier parts of the world' (where's that, exactly?) is easily distinguishable from milk from cows in unhealthy parts of the world, and they separate it at the factory gates, doncha know?

I love these threads, 'cos we hear what rubbish mothers are being told by the very people whose job it is to try and advise them on these things.

Aptamil is no closer to breastmilk than any other branded formula - but it is more expensive and it is advertised heavily to HPs. It has classy, sophisticated colours on the packaging.

There is no evidence that any formula permitted to be sold in the UK is any better than any other - so go for the package whose logo you like best

- *thisisyesterday - your a little rattled arn't you! Others are entitled to post their thoughts and experiences you know! Don't worry OP, not long and you can switch to cows milk, organic, non-organic, fat cows, thin cows, chav cows.....oooooh the choices will be endless!*
- *Aptamil is not like breast milk. I can't believe they get away with putting 'breast milk substitute' on the box*

- *Thisisyesterday i think the aptamil cows live in yurts in cornwall and feed on only the purest organic grass. yes, I am rattled. because health visitors should NOT be promoting formula. and especially not with crappola reasons like that.*

- *My HV said Aptimil was by far the best and most like BM. She said something about the cows feeding in much healthier areas of the world!?!?"*

ROFL what cack are they going to say next?

BTW If by 2nd stage formula you mean formula for babies older than 6 months, advertising is allowed. it allows for brand awareness for mums with younger babies.

a lot of formulas have a step/stage 2 formula which they market 'for hungrier babies' and other nonsense which is still for babies under 6 months but have a higher casien protein content which is harder for the baby to digest so they go longer between feeds

- *Aptimil is probably the closest in taste to breast milk. Obviously none replace everything in BM. I found that dd2 who bf for 6mths would not accept SMA but didn't mind Aptimil. HTH TIKTOK saying that all formula tastes the same is like suggesting that all beans taste the same. They are the same product with tomato sauce but believe me I know the difference when it isn't Heinz! Likewise, some babies but not all will have preferences. DD1 liked SMA gold. DD2 wouldn't touch SMA and would only have Aptimil. She bf for much longer and so I presume Aptimil must taste more similar to BM than SMA*

10) User notes that both Aptamil and Cow & Gate contain prebiotics – thus meaning they are closer to breastmilk.

Summary: a chat forum user wrote to note that Aptamil used to be the only formula that contained prebiotics, meaning that it was closer to breast milk. However, others formulas have these now, including Cow and Gate.

Feeding practice: none

Information sources: family and peers (chat forum users)

Company influence: brands named; message that formulas are different, yet both Aptamil / Cow & Gate are owned by the same company; message the prebiotics as an ingredient make formula similar to breast milk

- *started with aptamil but switched to cow & gate. Aptamil brands itself as closest to breast milk due to the pre-biotics they use, around ten years ago they were the only brand to do this. There are now several brands that add pre-biotics - including cow & gate.*

11) Hipp does not seem to have the sciencey bits other formulas do, such as proteins, does that matter?

Summary: Mum to be intended to breastfeed, but wanted to have formula for just in case. Wondered what brands people recommended, and if there was a difference between organic formulas and others. Suggested that the organic formulas do not seem to have sciencey bits such as proteins and prebiotics.

Feeding practice: none

Information sources:

Company influence: brand mentioned; formula products (organic); message that formula ingredients such as prebiotics are useful

• *I am soon to become a mum for the first time, and though I intend to breastfeed I want to get some formula in just in case. Can anyone recommend the best one to use? I'm quite into organics and was interested in Hipp but it doesn't seem to have all the sciencey bits in the other brands advertise (proteins, prebiotics etc etc). Not sure what these do but is there any real benefit to going with either of these? Thanks!*

12) Vegetarian mum is concerned that Aptamil contains fish ingredient, and is reassured by reply noting that fish is good for you.

Summary: a chat forum user wrote in to say she had noticed that Aptamil hungry milk contained fish ingredient, and she was not sure was, thought it might be to do with omega 3. However, the user noted that not all brands contained this, and not even all of the Aptamil brands. She wondered why, if it was good for baby, all did not contain it. Another chat forum member wrote in to say that fish is good for you, so it should not be a worry.

Feeding practice: none

Information sources: family and peers (chat forum users); company (packaging)

Company influence: brands named; formula products (hungry milk, stage milks); message that formula ingredients vary for important reasons

• *happened to notice that aptimil for hungry baby stated in contained fish on the back of the carton I was just about to open for Chloe. Aptimil is the only hungry baby milk that agrees with her and she has been having it occasionally. It never occurred to me that baby milk would have fish in it. So off I trtted doen to boots to check all of them, and none of the MA uses fish, aptimil 1 and 2 does but 3 doesnt, cow and gate 1 does but 2 and 3 dont and some of the heinz do. I though maybe they use it for omega 3 but if that is the case why dont they all have it? I find it quite odd. So, we are sticking to SMA gold indefinitely*

• *Fish have alot of good nutrients in them... If the baby likes it and it agrees with it then I dont see the harm... Fish is good for you*

5. Discussion

There was very high awareness of formula products, formula-feeding practices, and formula brands on chat forums on the websites visited. Thousands of conversational posts took place across the sites on such topics over the past year, with the busiest sites showing dozens of posts on such topics every day. The majority of conversations examined for this report involved a search for answers with regard to what sort of formula, and formula-feeding practice, gave babies, and parents, the highest quality of life in terms of social and health factors. Clearly, issues around the formula feeding of babies were highly motivating in terms of parental search for information, and clearly the chat forum was seen as one type of place to do that searching.

The point at which such brand and product awareness arose is not entirely clear from this study as there was limited consideration of how people chose formula feeding over breastfeeding. So, we do not know how people without previous, direct baby-feeding experience become aware of formula, the level of such awareness, or what motivates such people to make their feeding choices. This study shows a high level of brand and product awareness – but the majority of the posts considered are from conversational strands among people already committed to the practice.

The users of chat forums did not always exist in a state of harmonious agreement. The research shows evidence of disagreement about many aspects of formula feeding including: the rights and wrongs of the regulations around formula advertising; the question of fundamental difference between formula brands; the utility of different products in dealing with health issues such as weight gain, constipation, diarrhoea, reflux and wind; and the use of formulas in dealing with social issues such as length of babies' sleep, or frequency of feeding. However, despite such discussions and disagreements, there was essentially no outside arbiter of rightness or wrongness on the sites. Site moderators did not come into conversations frequently, and did most often in response to a genuinely upset poster, or to respond if a feeding practice was suggested that was outrightly dangerous – such as the introduction of solids to bottles for very young infants. It was not possible to know in the majority of cases how those who posted questions acted on the replies they received.

Thus, the viewed conversations showed that the chat forums were places where a genuine mix of ideas was shared. However, in respect of the aim and objectives that drove this report, formula brands and products received a vast amount of positive coverage. Chat forum users sang the praises of brands and products in making positive contributions to the many needs and expectations within the social and health opinion-drivers. Those who posted to chat forums used the experiences of their own babies to back brands and

products; they also frequently mentioned healthcare professional sources as the origin of positive views about products and brands.

Overall, there was little sense of a hierarchy of evidence – with many posters happy to insist that their views, formed entirely upon the experience of their own babies, meant that products and brands were either wonderful or dreadful. If asked what brand was best for constipation, a poster might note that her child was constipated until trying brand A, and hence that brand was wonderful, and people should go and buy it. Company helplines, packaging, and websites were mentioned as useful sources of information, with users rarely warning others to be wary of the evidence on such sites.

Personal experience is, of course, a legitimate source of evidence. However, the chat forums were full of worried people looking for advice about a very vital subject. Much of the advice stemming from personal experience that came to these worried people was clearly formed in an atmosphere of heightened awareness of products and brands. For example, the single most mentioned brand was Aptamil, and the single most repeated idea across the sites was that it was closest to breast milk. This ‘fact’ was reported to have been backed up by a range of healthcare professionals and, despite the fact that the idea originates with the company’s marketing, only very few people commented that it was a questionable claim. The brand was promoted as helping with a multitude of the needs and expectations within the social and health opinion-drivers, from good sleep to healthy digestion to baby satisfaction.

The concept of the hungry baby was also an interesting one that was raised on the sites. Many posters on the sites expressed concern that their babies were hungry and this worry took a range of forms. Some people worried that their babies were not satisfied; others were being driven to distraction by lack of sleep due to what they saw as frequent feeding. Some posters were worried that infant milk formula tins had recommended a certain number of ounces, and if their baby regularly exceeded this, it could be cause for worry that they were hungry in some particularly extreme way. If the extra consumption of ounces was combined with some vomiting, it was cause for further worry – as, if a baby could not drink the extra ounces they seemed to want, without vomiting, they must be suffering, and need some other product that satisfied with fewer ounces. If the baby had not gained the ‘right’ amount of ounces in the past week, it was cause for even further worry that perhaps they were not being satisfied by their infant milk. It was not clear from the chat forums that these worries were generally combined with any independent assessment of a baby’s needs – ie. they were not described as in poor health. However, the answer, for many site users, was to move to so-called hungry formula.

The whole concept of the hungry baby is an interesting one. Pulled apart, it shows all of the complexities of parenthood. Any genuine answer to the multitude of social and health needs and desires encapsulated within that one term would be complex. However, companies purport to have the answer in one easy purchase. All babies are different, said the parents on the websites;

that is why we have a wide range of products so you can find one to meet your special baby's needs, say the companies.

The belief in formula expressed by so many chat forum users, and seemingly backed by many healthcare professionals, led to some reports of particularly problematic feeding practices such as replacement of breastfeeding with formula. However, it more frequently led to just more formula feeding, or to reasons for trying different brands or formulations or products. Chat forum users regularly discussed their idea that formulas were configured with special ingredients, or methods that aided conditions, or perceived conditions, such as reflux, constipation, loose stools, hunger and so on.

It was not clear the extent to which company representatives were active on sites, as this activity would be hidden. However, marketing messages from a range of sources are clearly getting through to parents. The question of whether advertising for follow-on milk contributes to this is not clear from this research. There was high awareness of the products, but no real evidence that it was advertisements for these products that had led to brand and product awareness. Nor was there evidence that parents were using the products for babies under the age of six months. Just how people had gained their awareness is unclear. The widespread nature of the Aptamil belief would be interesting to trace in terms of its origin. It was widespread across the sites, and arose in a range of contexts in terms of discussions. People attributed it to healthcare professionals of all types, but also simply reported that they had heard it somewhere. The belief might be easier to trace than the origin of other ideas about formulas, as it is so clearly attached to a named brand.

6. Conclusions

Information sources

- Health professionals, in particular health visitors, appear to fail to distinguish between company information and independent research and therefore repeat myths about formulas and formula feeding.
- Healthcare professionals appear to offer weaning advice that is contrary to official advice.
- Health visitors are an important source of information on infant feeding and need to be given clear, independent and objective information about infant milks available to parents in the UK.

Social and health opinion-drivers

- A search for normalcy in terms of infant behaviour is a strong motivator of feeding practice.
- Concern about lack of sleep, for baby and parent, is one of the strongest motivating factors in formula choice.
- Concern about digestion, excretion and weight gain is one of the strongest motivating factors in formula choice.

Company influence

- Websites, helplines and packaging are very influential.
- Awareness of formula products and brands is high.
- Companies appear to be a common source of information for healthcare professionals.
- Aptamil has been hugely successful with its marketing message 'inspired by breast milk', with many parents believing it is very close to breast milk in composition.
- Companies have successfully listened to perceived parental needs and expectations, and have created products aimed at meeting those needs and expectations.

Feeding that goes against health recommendations

- Early weaning was regularly recommended to deal with a range of perceived problems including baby weight gain, and sleep.
- Follow-on milks had a high profile among chat forum users, but did not seem to be used by those with infants under six months.
- Formula was recommended over feeding to deal with a range of issues, in particular 'inadequate' weight gain.

Appendix 1

Websites with informal discussion networks

Ask a Mum	www.askamum.co.uk
Ask Baby	www.askbaby.com
Baby and Bump	www.babyandbump.com
Baby Expert	www.babyexpert.com
Emma's Diary	www.emmasdiary.co.uk
Gurgle	www.gurgle.com
Home Dad	www.homedad.co.uk
Mum Knows Best	www.mumknowsbest.co.uk
Mumsnet	www.mumsnet.com
Mumszone	www.mumszone.co.uk
Netmums	www.netmums.com
Parentline Plus	www.parentlineplus.org.uk
The Answer Bank	www.theanswerbank.co.uk

Appendix 2

Information about organisation of informal discussion networks

Chat forums vary in how they are organised, but generally the following standards apply.

- There are chat guidelines covering basic etiquette.
- Chat forums are 'policed' by site owners as they can be sued for libellous comments.
- Some chat forums have so-called moderators, who may interject with more 'expert' opinion into discussions, but the qualifications of the moderators on certain topics vary.
- Posts are made with a subject heading, and generally include a question or plea for advice or information.
- Posts include the date, the pseudonym of the poster, and in some cases more detailed information from the poster's biography including location, age, number of posts, occupation, baby's age and gender.
- Other site members can post replies to the initial post.
- Posts and discussions can be pulled or blocked if they are reported to the site host and are seen to breach certain guidelines, including being used by formula companies for direct product promotion.

Appendix 3

Aptamil website information

This information is posted on a website called Aptamil for healthcare professionals <http://www.milupaaptamil4hcps.co.uk/default.asp?id=41>.

“Building on its success, Aptamil began a long-term programme of research into the composition of breast milk in 1954, with the aim of producing a formula milk as close as possible to breast milk, for those mothers who chose not to breastfeed. This resulted in Aptamil launching its first infant formula milk in Europe in 1964 called 'Milumil'.

There is no dispute that breastfeeding a baby is a wonderful start to its life.

While breast milk is superior for the newborn infant, infant milks play an important role in infant nutrition when breastfeeding is not possible or desirable. The search for breast milk substitutes has been conducted for centuries. During this time many advances have been made to bring the composition of infant milk closer to breast milk. Many of the advances in recent years have been made by Aptamil. Our final aim is not necessarily to mimic the composition of breast milk in every respect, but to achieve similar long term outcomes for bottlefed infants as those shown for breastfed infants.”

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