

Food Protein–Induced Enterocolitis Syndrome

Instructions for obtaining 1.6 Continuing Medical Education Credits

Credits can be earned by reading the text and completing the CME examinations online throughout the year on the SEAIC web site at www.seaic.org



"Actividad acreditada por el Consejo Catalán de Formación Continuada de las Profesiones Sanitarias – Comisión de Formación Continuada del Sistema Nacional de Salud con 1,6 CRÉDITOS".



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CME Items

- Which food is the single most common trigger of FPIES?
 - Rice
 - Soy
 - Cow milk
 - Poultry
 - Fish
- Vomiting, pallor, and lethargy typically start within what time following ingestion of the trigger food?
 - 1-4 hours
 - 5-10 hours
 - 12 hours
 - 1 day
 - 1 week
- What is the most constant clinical manifestation of acute FPIES?
 - Watery diarrhea
 - Repetitive emesis
 - Bloody diarrhea
 - Pallor
 - Lethargy
- Which of the following best describes the natural history of FPIES?
 - Cow milk FPIES usually starts in the first year of life.
 - Solid food FPIES starts after 12 months of age.
 - Onset of fish FPIES is earlier than that of rice FPIES.
 - FPIES does not occur in adults.
 - Cow milk FPIES always resolves by age 3 years.
- In a child with cow milk FPIES, cow milk-specific IgE detected by skin prick test or by serology testing is associated with
 - Increased risk of FPIES to multiple foods.
 - Earlier resolution of FPIES.
 - Progression to IgE-mediated reactions to cow milk in all patients.
 - More prolonged course of cow milk FPIES (older age at resolution).
 - Lifetime FPIES.
- A 3-week-old infant feeding cow milk formula presents with intermittent bloody diarrhea. Which of the following clinical features would make the diagnosis of chronic FPIES most likely?
 - Occasional mild spit-up
 - Constipation
 - Failure to thrive
 - Normal weight gain
 - Colic
- Which laboratory findings would be most likely in the patient from question 6?
 - Normal lactate level
 - Thrombocytopenia
 - Normal albumin level
 - Normal pH
 - Leukocytosis with left shift
- What feeding regimen is usually recommended for a patient in whom you suspect FPIES to cow milk formula?
 - Introduction of amino acid based formula
 - Replacement of cow milk formula with extensively hydrolyzed formula
 - Smaller and more frequent feeding with cow milk formula
 - None, since the patient will outgrow FPIES over time
 - Soy formula
- Symptoms resolve with removal of cow milk formula from the diet. Based on this, you recommend continued avoidance of cow milk. What additional management is recommended at this time?
 - Prescription for epinephrine autoinjector in case of accidental ingestions
 - Provision of an emergency treatment plan outlining typical symptoms and treatment of acute FPIES in case of accidental ingestions
 - Introduction of cow milk formula at home at approximately 6 months of age
 - Home introduction of baked milk products after 1 year of age
 - Both B and D
- What advice should you give to the parent about the prognosis and natural history of FPIES?
 - FPIES always develops into an IgE-mediated reaction to the offending food.
 - Most children outgrow FPIES by 2 to 3 years of age.
 - The patient will develop lactose intolerance.
 - The patient will require lifelong avoidance of the offending food.
 - FPIES to solid food is more likely to resolve at a younger age.