



ONLY ONE  
AAF RESOLVES  
COW'S MILK  
ALLERGY  
SYMPTOMS



HELPS RESTORE  
GUT MICROBIOTA<sup>1-3</sup>  
TO SUPPORT  
LONG-TERM HEALTH  
AND IMMUNITY<sup>4-6</sup>

10 YEARS  
OF RESEARCH  
BEHIND EVERY TIN



neocate®

SYNEO™



INTENDED FOR HEALTHCARE PROFESSIONAL USE ONLY.

AAF = amino acid formula

Correct at time of publication April 2020.

# NUTRICIA: 35 YEARS LEADING INNOVATION IN ALLERGY

35 years of clinical experience in the dietary management of CMA, multiple food protein allergy (MFPA) and other conditions requiring an amino acid-based diet.

## 95 clinical studies

published on Neocate and its use in CMA, MFPA and other conditions requiring an amino acid-based diet.



# BREAST MILK IS THE BEST SOURCE OF NUTRITION FOR INFANTS WITH CMA<sup>7,8</sup>

Breast milk contains all the essential nutrients to support an infant's growth and development. It contains pre- and probiotics to stimulate a healthy gut microbiota and support the developing immune system.<sup>9,10</sup>

Breastfeeding has been shown to reduce the risk of allergic disease.<sup>11,12</sup>

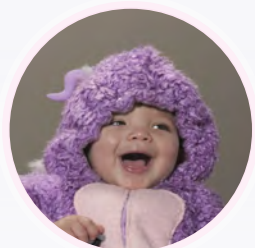
## PREBIOTICS (oligosaccharides)

Over 200 different oligosaccharides have been discovered in breast milk<sup>13-16</sup>

Act as food for beneficial bacteria<sup>4,9,10,17,18</sup>

## PROBIOTICS (beneficial bacteria)

Breast milk contains many types of different beneficial bacteria, including *Bifidobacteria*<sup>4,8</sup>



**Breastfed infants benefit from the synergistic effect of prebiotic oligosaccharides and beneficial bacteria naturally present in breast milk**

**SUPPORTING A HEALTHY, DIVERSE GUT MICROBIOTA<sup>10,15,19</sup>**

**PROMOTING TOLERANCE AND DEVELOPING THE IMMUNE RESPONSE<sup>9,20,21</sup>**

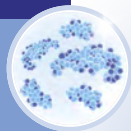
# ONLY NEOCATE SYNEO CONTAINS SYNBIOTICS, BRINGING IT CLOSER TO BREAST MILK THAN ANY OTHER AAF<sup>1</sup>

The synbiotics in Neocate Syneo have been developed through extensive research of pre- and probiotics and tested in allergic infants,<sup>1-3,6</sup> who commonly have lower levels of *Bifidobacteria* than healthy infants.<sup>22,23</sup>

Synbiotics are a patented combination of pre- and probiotics in a synergistic relationship.

## PREBIOTICS

Neocate Syneo: our unique mixture of scFOS/lcFOS 9:1



- ✓ Proven to promote the growth of beneficial bacteria in the infant gut<sup>24-26</sup>
- ✓ Mimic the levels and functionality of prebiotic oligosaccharides found in breast milk<sup>6,24,25</sup>
- ✓ >30 clinical studies in infants, including infants with CMA<sup>26</sup>



## PROBIOTIC

Neocate Syneo: *Bifidobacterium Breve* M-16V

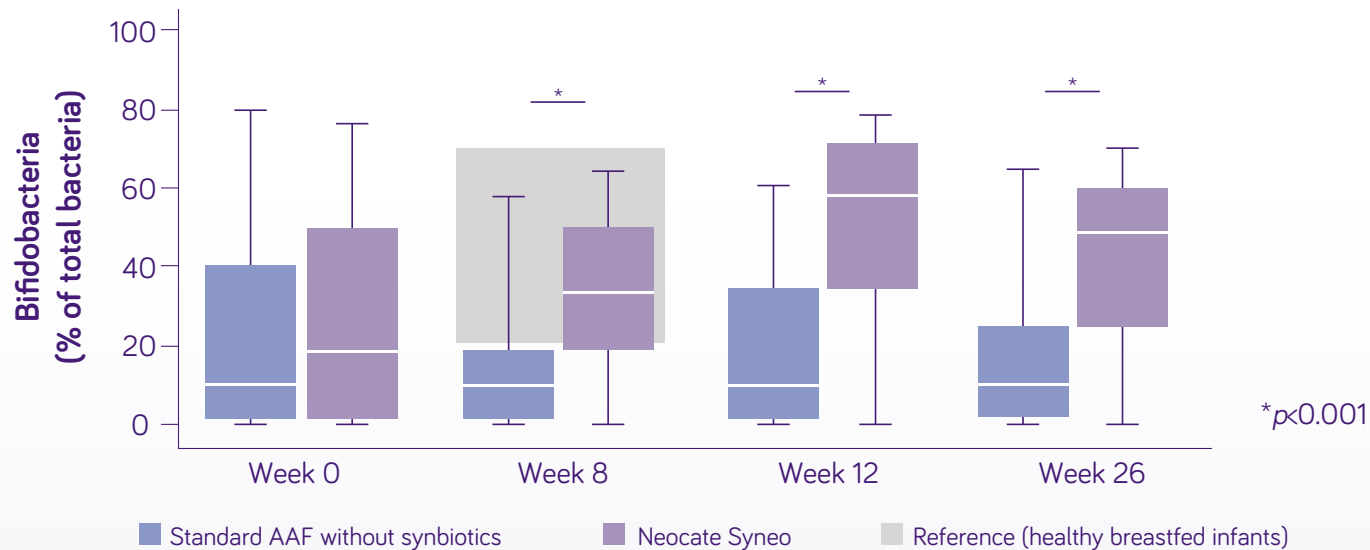


- ✓ Increases beneficial bacteria in the gut<sup>1,3,27</sup>
- ✓ Is the most common *Bifidobacterium* in breast milk,<sup>4,5</sup> and the dominant species in the gut of healthy breastfed infants<sup>5,28-30</sup>
- ✓ Evidence shows *B. breve* M-16V reduces the allergic response more than other tested probiotic strains<sup>31-35</sup>

**Evidence shows that synbiotics positively influence the gut microbiota of allergic infants, bringing it closer to that of a healthy breastfed infant<sup>1</sup>**

# 10 YEARS OF RESEARCH IN INFANTS WITH CMA HAVE GONE INTO EVERY TIN OF NEOCATE SYNEO

THE ASSIGN TRIAL SHOWS THAT NEOCATE SYNEO BRINGS THE GUT MICROBIOTA OF ALLERGIC INFANTS CLOSER TO THAT OF HEALTHY BREASTFED INFANTS<sup>1</sup>



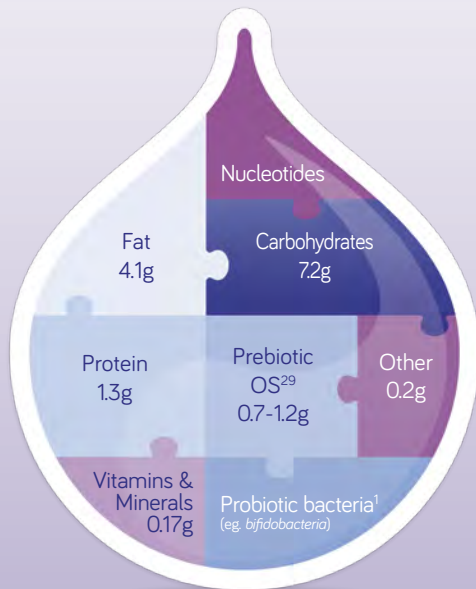
- There was a sustained improvement in the gut microbiota composition of allergic infants over 26 weeks.<sup>1,2</sup> Evidenced by a significant growth of *Bifidobacterium* in line with levels seen in health breastfed infants and the competitive inhibition of pathogenic bacteria<sup>1,2</sup>
- Certain species of microbes, such as *Bifidobacteria*, support the development of the immune system and promote oral tolerance<sup>4,5</sup>

Evidence suggests that the infant microbiome has an important role to play in both short and long term health. Changes in the microbiome have been associated with the development of food allergy and other atopic conditions.<sup>5</sup>

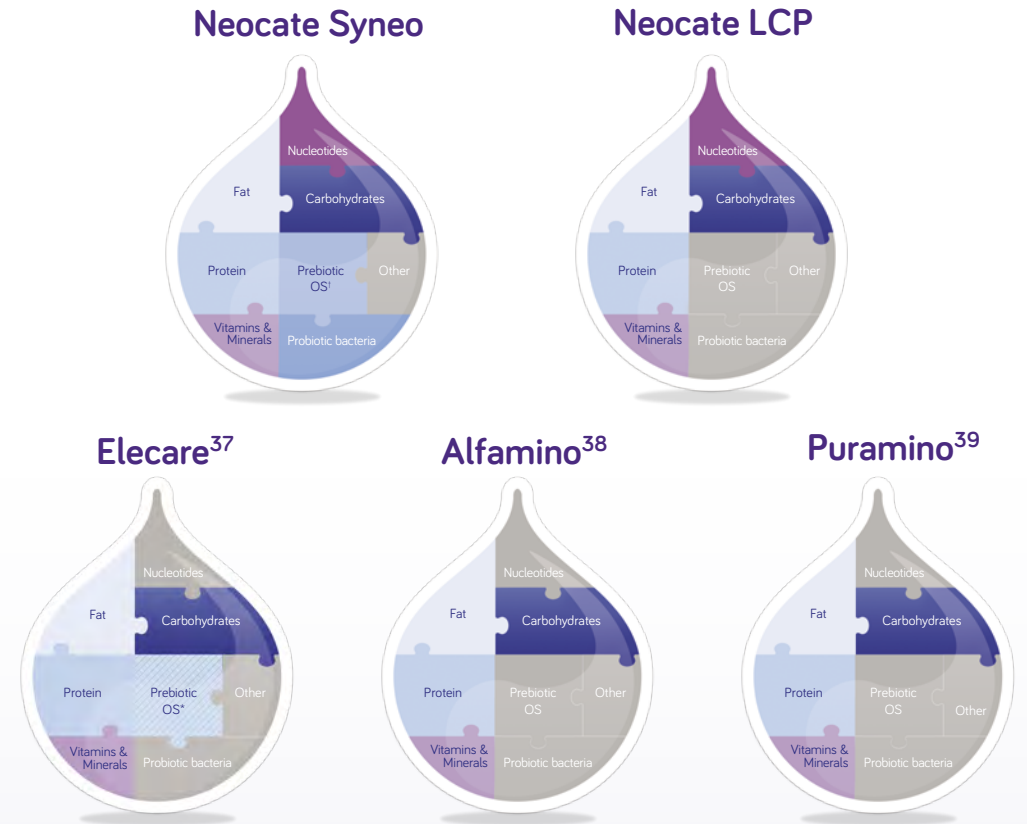
# BREAST MILK IS THE BEST SOURCE OF NUTRITION

Breast milk contains all of the nutrition an infant needs. Not only does it provide energy and protein along with vitamins and minerals, it has additional important factors such as nucleotides, prebiotic oligosaccharides and billions of friendly bacteria.<sup>36</sup>

Breast milk composition<sup>25</sup> (per 100ml)



## NEOCATE SYNEO CONTAINS MORE OF THE COMPONENTS OF BREAST MILK THAN ANY OTHER AAF



There is a high concentration of oligosaccharides in breast milk with more than 200 different structures.<sup>13-16</sup>

Compared with any other AAF on the UK market, the blend of prebiotic oligosaccharides in Neocate Syneo is closer in the number of different structures and in concentration to that found in breast milk.<sup>13-15</sup>

**Neocate Syneo has been shown to bring the microbiota of allergic infants in line with that of a healthy breastfed infant<sup>1,2</sup>**

\*HMO in Elecare: 2'-FL 0.02g/100ml

†Prebiotic OS in Neocate Syneo: scFOSs/lcFOSs 0.63g/100ml

OS = prebiotic oligosaccharides

# RESEARCH SHOWS THAT INFANTS ON NEOCATE SYNEO EXHIBIT A REDUCTION IN INFECTIONS AS WELL AS ANTIBIOTIC USE<sup>1-3</sup>



## FEWER INFECTIONS

Research shows that infants receiving Neocate Syneo exhibit a reduction in infections as well as antibiotic use, compared to infants receiving a regular AAF without synbiotics.<sup>1-3</sup>

	Neocate Syneo n (%)	AAF without synbiotics n (%)	P value
Fewer infections <sup>3</sup>	1 (2%)	10 (18%)	0.008
Fewer ear infections <sup>2</sup>	(0%)	(20%)	0.011
Reduced use of antibiotics <sup>1</sup>	3 (8.6%)	12 (34.4%)	0.018
Reduced use of antibiotics <sup>2</sup>	9 (17%)	19 (34%)	0.049

## REDUCED REQUIREMENT FOR DERMATOLOGICAL MEDICATIONS

Research shows that infants receiving Neocate Syneo are found to need fewer prescriptions for dermatological and antifungal medications.

	Neocate Syneo n (%)	AAF without synbiotics n (%)	P value
Reduced use of dermatological medications <sup>2</sup>	6 (17.1%)	16 (45.7%)	0.019
Reduced use of emollients <sup>2</sup>	2 (5.7%)	10 (28.6%)	0.023
Reduced use of antifungals <sup>2</sup>	0 (0%)	5 (14.3%)	0.054

# IMPROVED STOOL CONSISTENCY

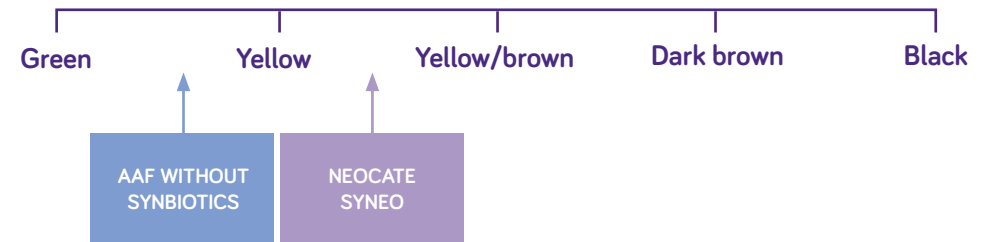
Findings show that infants receiving Neocate Syneo show a softer stool consistency,<sup>6</sup> a more preferred stool colour,<sup>3</sup> and less constipation all of which may lead to a more settled baby.



## MORE PREFERRED STOOL COLOUR<sup>3†</sup>

More yellow and yellow-brown stools compared to green stools seen with Neocate LCP<sup>6</sup>

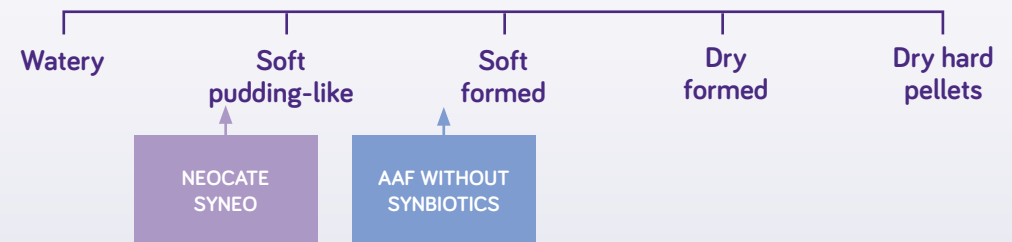
Yellow to yellow/brown stools may be considered more typical of a breastfed infant



† Significantly different average colour (more preferred colour) compared to AAF without synbiotics at weeks 0-2, 2-4 & 4-12 ( $p=0.014$ ,  $0.010$  and  $0.008$  respectively).

## SIGNIFICANTLY SOFTER STOOL CONSISTENCY<sup>6‡</sup>

More comparable to breastfed infants who have softer stools than those who are formula fed<sup>6</sup>



‡ Median scores at week 2,  $p<0.001$ . Significant differences also shown at all timepoints weeks 2, 4, 8, 12 & 16,  $p<0.05$

\* Parent/carer completed stool diaries

# THE NEOCATE RANGE

## NEOCATE: THE ONLY AAF RANGE WITH AGE-ADAPTED FORMULATIONS FOR INFANTS AND CHILDREN FROM BIRTH TO 10 YEARS

PRODUCED IN LIVERPOOL, UK

### NEOCATE SYNEO: THE ONLY AAF WITH SYNBIOTICS

- Supports gut health and immunity<sup>4,5</sup>
- Contains synbiotics (pre- and probiotics)
- Nutritionally complete up to 12 months<sup>40</sup>
- Effective resolution of CMA symptoms<sup>1-3</sup>
- Supports growth<sup>6</sup>
- Hypoallergenic<sup>3,6</sup>

### NEOCATE LCP: THE UK'S NO.1 AAF

- Fast & effective resolution of CMA symptoms in 3 -14 days<sup>41,42</sup>
- Supports growth<sup>42,43</sup>
- Supported by extensive clinical evidence
- Hypoallergenic<sup>44</sup>
- Nutritionally complete up to 12 months<sup>40</sup>

\*RNI 0-6 years. Children with CMA and MFPA may be at higher risk of inadequate calcium intakes<sup>41,42</sup>

± Nutricia data on file

### NEOCATE JUNIOR: THE MOST PALATABLE<sup>±</sup> AAF FOR CHILDREN 1+

- Available in 3 flavours – Unflavoured, Strawberry and Vanilla
- Excellent compliance<sup>±</sup>
- Tailored nutrition for the changing nutritional requirements of children over 1 year

### NEOCATE SPOON: THE UNIQUE SPOONABLE AAF

- Supports weaning CMA infants
- Great tasting<sup>±</sup>
- Meets 50% of daily calcium requirement in 1 portion (265mg)<sup>45,46\*</sup>
- Versatile to encourage texture variety
- Can be given alongside an AAF or breast milk



# YOUR WORLD, OUR SERVICE

**HCPS**



SYMPOSIA



WEBSITES



SMALL TALK



CASE STUDIES

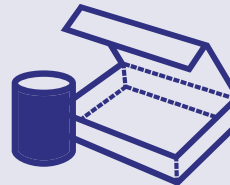


NUTRICIA'S  
DIETETIC APP

**PARENTS**



SAMPLE  
SERVICES



PARENT  
PACKS



NEOCATE APP



WEBSITES

# NEOCATE SYNEO IS THE FIRST AND ONLY AAF THAT RESOLVES CMA SYMPTOMS<sup>1-3</sup> AND CONTAINS SYNBIOTICS...

...which support long-term health and immunity.<sup>4,5</sup> No other AAF gives infants such a helping hand for a healthy future:

- Synbiotics bring Neocate Syneo closer to breast milk than any other AAF<sup>1</sup>
- Restores the gut microbiota<sup>1-3</sup> supporting long-term health and immunity<sup>4,5</sup>
- Research shows that infants exhibit a more preferred colour stool, as well as a reduction in antibiotic use
- 10 years of research in infants with CMA have gone into every tin



**NEOCATE.CO.UK**  
**RESOURCE CENTRE:**  
**01225 751 098**



1. Candy et al. *Pediatr Res*. 2018;83(3):677-86. 2. Fox et al. *Clin Transl Allergy*. 2019;9:5. 3. Burks et al. *Ped Allergy Immunol*. 2015;26:316-22. 4. Martin R et al. *Benef Microbes*. 2010;1(4):367-82. 5. Wopereis H et al. *Pediatr Allergy Immunol*. 2014;25:428-38. 6. Harvey BM et al. *Pediatr Res*. 2014;75:343-51. 7. WHO. Infant and young child feeding. 2003. 8. Jeurink P V et al. *Benef Microbes*. 2013;4(1):17-30. 9. Boehm G et al. *J Nutr*. 2007;137:8475-95. 10. Moossavi S et al. *Front Pediatr*. 2018;6:197. 11. Kull et al. *Arch Dis Child*. 2002;87:478-81. 12. Matheson MC et al. *J Allergy Clin Immunol*. 2007;120(5):1051-57. 13. Thurl S et al. *Nutrition Reviews* 2017;75(11):920-33. 14. Kuntz S et al. *British Journal of Nutrition* 2008;99(3):462-71. 15. Scholtens PA et al. *Annu Rev Food Sci Technol*. 2012;3:211:21-23. 16. Ninonuevo M et al. *J Agric Food Chem*. 2006;54:7471-80. 17. Weng M et al. *J Dev Orig Health Dis*. 2013;4(3):203-14. 18. Newburg DS et al. *J Pediatr Gastroenterol Nutr*. 2000;30(2):S8-17. 19. Hunt et al. *PLoS ONE* 6(6): e21313. doi:10.1371. 20. Li M et al. *Semin Reprod Med*. 2014;32:74-86. 21. Kaplan JL et al. *Pediatr Res*. 2011;69:465-72. 22. Kirjavainen. *Gut*. 2002;51:51-55. 23. Huang YJ et al. *J Allergy Clin Immunol*. 2017;139(4):1099-110. 24. Kunz C et al. *Annu Rev Nutr*. 2000;20:699-722. 25. Knol. *J Pediatr Gastroenterol Nutr*. 2005 Jan;40(1):36-42. 26. Moro. *J Pediatr Gastroenterol Nutr*. 2002 Mar;34(3):291-5. 27. Taniuchi S et al. *The Journal of Applied Research*. 2005;5(2):387-396. 28. Huang YJ et al. *J Allergy Clin Immunol*. 2017;139(4):1099-110. 29. Sato A et al. *J Pediatr Gastroenterol Nutr*. 2014;59(1): 78-88. 30. Matsuki T et al. *Appl Environ Microbiol*. 1999;65(10):4506-12. 31. Mikami K et al. *Pharmaceuticals*. 2012;5(6):29-42. 32. Inoue Y et al. *Biol Pharm Bull*. 2009;32(4):760-63. 33. Hougee S et al. *Int Arch Allergy Immunol*. 2010;151(2):107-17. 34. Van Esch et al. *Immun Inflamm Dis*. 2016;4(2):155-65. 35. Hattori K et al. *Arerugi*. 2003;52(1):20-30. 36. Andreas NJ et al. *Early Human Dev*. 2015;91(11):629-35. 37. Abbott. Elecare DataCard. Available at <https://nutrition.abbott/uk/product/elecare> (accessed March 2020). 38. Nestle Health Science. Alfacino data card. Available at [https://www.nestlehealthscience.co.uk/assetlibrary/documents/data\\_cards/alfacino-data-card-nov-2018.pdf](https://www.nestlehealthscience.co.uk/assetlibrary/documents/data_cards/alfacino-data-card-nov-2018.pdf) (accessed March 2020). 39. Nutramigen. Puramino data card (accessed March 2019). 40. Commission Directive 1999/21/EC (FSMP) and Commission Directive 2006/141/EC. 41. De Boissieu et al. *J Pediatr*. 1997;131:744-47. 42. Vanderhoof et al. *J Pediatr*. 1997;131:741-44. 43. Niggeman B et al. *Pediatr Allergy Immunol*. 2001;12(2):78-82. 44. Sampson HA et al. *J Pediatr*. 1992;90(3):463-5. 45. Christie et al. *J Am. Diet Assoc*. 2002;102:1648-51. 46. Meyer et al. *Clin Transitional Allergy*. 2014;4:31.

**IMPORTANT NOTICE:** Breastfeeding is best for babies. Neocate Syneo is a food for special medical purposes for the dietary management of Cow's Milk Allergy, Multiple Food Protein Allergies and other conditions where an amino acid based formula is recommended. It should only be used under medical supervision, after full consideration of the feeding options available including breastfeeding. Suitable for use as the sole source of nutrition for infants under one year of age.

Intended for healthcare professional use only.

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