Hypoallergenic free amino acid formula utilization and home enteral nutrition formula selection shifts related to supply chain shortages

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Background

Free amino acid (FAA) enteral formulas are commonly prescribed to patients with protein allergies or gastrointestinal intolerances. By providing the protein in the form of free amino acids, the potential for a protein to trigger an allergenic response is eliminated or reduced. FAA formulas are higher in cost and not routinely available over the counter. When these products become unavailable, there are limited options for alternatives. A supply chain problem with FAA formulas results in increased stress and challenges for patients, caregivers, and prescribers.

Purpose

The purpose of this study was to determine what category was most prescribed and ordered as an alternative to FAA formulas during a recent supply chain shortage, as well as determine what formula was used by those with the most common diagnoses seen.

Methods

Inclusion Criteria:

• Patients prescribed a FAA enteral formula and placed a refill for formula during a four-month defined time frame.

Exclusion criteria:

- Patients prescribed a combination of intact protein formulas and FAA formulas.
- Patients who failed to place at least one refill during the period of examination.

Outcome measures

- Prescription at the beginning of the formula supply chain shortage
- Prescription four months later
- Products ordered when placing monthly refill order

Secondary outcome measures

- Relationship between formula at start of shortage to formula at end of study period
- Relationship between diagnosis and formula used at end of study period

Results

- 774 patients prescribed FAA formula in February 2022
- 347 prescribed and using oral/enteral formula in June 2022
- 83% receiving hydrolyzed protein formula at end of study period
- 17% transitioned to intact protein formula at end of study period
- Of patients moving to intact protein formula, 46% changed to plant-based alternative
- Of patients transitioned to intact protein, feeding difficulties and dysphagia were most common diagnoses

Conclusions

Infants receiving FAA formulas are less likely to be transitioned to more intact protein formulas than older pediatric patients or adults

- With the emergence of peptide and intact protein plant-based formulas free of common allergens, there is an opportunity to successfully use these formulas as an alternative to FAA products in some patients.
- Further studies could evaluate infants, older pediatric, and adult patients with allergies on more intact protein formulas (extensively hydrolyzed, peptide or plantbased) to determine if patients could successfully be maintained on them.



Table 1. Patients ordering FAA formula

900	
800	
700	
600	
500	
400	
400	
300	
200	
100	
0	

Figure 2: Enteral nutrition formula prescriptions — as of June 2022 (N=347)

Blended 4%	
Intact protein 13	%
Peptide 35%	
FAA 47%	
Figure 3: Number of	f patien
Plant-based alternative 45% Other 55%	
Table 2. Enteral nut	rition fo
Infant Formula CategoFAAPeptideIntact protein	gory
Jr./Adult Formula Ca	ategory
FAA	
Peptide	

Intact protein

Other

Blended tube feeding

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nts on intact protein that moved to plant-based alternative (N=44)



ormula prescriptions — as of June 2022 (N=347)

n (%)
79 (23)
23 (7)
4 (1)
84 (24)
100 (29)
40 (12)
15 (4)
2 (<1)