

#### DEPARTMENT OF

# HEALTH AND HUMAN SERVICES

Promoting and protecting health, well-being, self-sufficiency, and safety of all in Marin County.

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Benita McLarin, FACHE DIRECTOR

Matthew Willis, MD, MPH PUBLIC HEALTH OFFICER

Lisa M. Santora, MD, MPH
DEPUTY PUBLIC HEALTH OFFICER

3240 Kerner Boulevard San Rafael, CA 94901 415 473 4163 T 415 473 2326 F 415 473 3232 TTY marinhhs.org/public-health

## **PUBLIC HEALTH ADVISORY**

## **Infant Formula Shortage**

Marin County Public Health (MCPH) is issuing this advisory to provide information to healthcare providers to support infant formula-dependent families. MCPH is working with California Department of Public Health (CDPH) and local healthcare providers to mitigate the shortage in infant formula.

## **Background**

The United States continues to experience a shortage of infant formula due to a global supply chain crisis. This shortage was compounded by a <a href="large-scale product recall by Abbott">large-scale product recall by Abbott</a> stemming from consumer complaints related to *Cronobacter sakazakii* or *Salmonella* Newport, which was <a href="investigated">investigated</a> by the Food and Drug Administration (FDA) and resulted in the closure of Abbott's infant formula manufacturing facility in Sturgis, Michigan. Market concentration exacerbated the shortage - three companies make 98% of the formula purchased in the U.S.

Unlike other food products, infant formula often does not have an acceptable substitute as a source of nutrition for those who rely on it. The formula shortage has affected regular infant formula, specialty medical grade infant formula, as well as non-infant medical patients who require nasogastric feeding or who have other medical conditions (e.g., phenylketonuria [Phenex®]).

On May 16, 2022, the FDA announced guidance to import formula products (incl. Nestlé's <u>Good Start Gerber</u> [Mexico], <u>Nestlé NAN Supreme Pro 1 & 2</u> [Germany] and <u>others</u>). These supplies are expected to become available for purchase online and through key retailers in July. On May 16, Abbott entered into a <u>consent decree</u> with the FDA, which created a pathway to reopen to the Sturgis facility. On June 4, Abbott <u>announced</u> it restarted production of specialty formulas at its Sturgis facility (i.e., <u>EleCare</u>). They have not provided a timeline for restarting production of Similac or other formulas.

#### **Actions Requested of Providers**

Marin County Public Health will be directing formula-dependent families with insufficient supply to their primary health care provider for assistance. Providers should be prepared for contact from families who lack access to formula or may be experiencing clinical outcomes related to insufficient nutrition.

Attend the "Navigating the Formula Crisis" webinar sponsored by AAP-CA, CDPH, and CAFP on Thursday, June 9 at 6:30 pm to learn more. Register at https://us06web.zoom.us/webinar/register/WN 6r1JBq4RToaazYPjJqDtNQ

- Recognize families reaching out for nutrition support may have clinically undernourished family members and determine if an in-person clinical evaluation and intervention is needed (Reference: <u>Bright Futures: Nutrition</u>, 3rd Edition)
- 2. Advise families not to make homemade formula, dilute formula, or provide infants with toddler formula.
- Work with vendors and office staff to optimize your supply of in-office formula samples. Prepare to dispense an emergency supply of formula to families in need.
- 4. Provide families in crisis with formula. As a last resort, refer families to the emergency department for emergency formula supply.
- 5. Help families to find <u>safe substitutes</u> and to develop a plan to buy formula (e.g., <u>online</u>). Provide guidance on <u>safe formula alternatives</u>.
  - Families can try a new brand of formula.
  - Families can consider buying formula that's made outside of the United States in U.S. stores. Review tips for preparing imported formula with patients.
- 6. Increase awareness of <u>formula alternatives</u> to Similac products and the appropriate use of <u>cow's milk</u>. In an emergency, infants older than 6 months of age on regular formula may be fed pasteurized, unflavored whole cow's milk for a short term [no more than one week]). They should be able to eat some solids, including iron-rich complementary foods (e.g., iron-fortified infant cereal).
- 7. Encourage mothers who are exclusively breastfeeding to continue breastfeeding through 12 months.
- 8. Advise mothers who are partially breastfeeding and getting low on infant formula to consider pumping and storing breast milk to increase supply.
- 9. Assist patients who require Abbott metabolic nutrition formulas (e.g., <a href="Phenex®">Phenex®</a>) to access emergency supply through this <a href="request form">request form</a>. Fax the completed form to 1-877-293-9145, or email to <a href="metabolicorders@abbott.com">metabolicorders@abbott.com</a>. Call 1-800-881-0876 for more information.
- 10. Refer California WIC families to <u>WIC Formula Shortage Page</u> for the latest updates.
- 11. Advise families who may be eligible for California WIC to call (415) 473-6889 to start the application process or visit <a href="https://www.marinhhs.org/wic">https://www.marinhhs.org/wic</a> to learn more.

### References

California Department of Public Health (CDPH). Infant Formula

Centers for Disease Control and Prevention (CDC). <u>Information for Families During</u> the Infant Formula Shortage

FDA. Infant Formula Information and Ongoing FDA Efforts to Increase Supply