

Understanding Baby Formula Types

A simple guide to what's available — and what most babies actually need

✓ **The reassuring truth:** Most healthy, full-term babies do well on standard cow's milk-based formula. Special formulas exist for specific medical needs — but they're not necessary for most babies. [1][2]

■ STANDARD FORMULAS — For Most Babies

1. Cow's Milk-Based Formula

What it is: Made from cow's milk, adapted to be safe and nutritious for babies. Contains lactose (milk sugar). [1]

Who it's for: The majority of healthy, full-term babies. [1][2]

Good to know: This is the most common type — cow's milk formulas account for the majority of formula sold. [1] Iron-fortified versions are recommended by the AAP. [1]

2. Goat's Milk-Based Formula

What it is: Made from goat's milk, adapted for babies. Also contains lactose. [3]

Who it's for: Any healthy baby — now AAP-approved as a first-line option alongside cow's milk formula. [3][4]

Good to know: Some parents choose it for digestibility. **Not suitable** for babies with confirmed cow's milk protein allergy due to cross-reactivity. [1][5]

■ ■ SPECIAL-USE FORMULAS — For Specific Needs (Doctor-Guided)

3. Lactose-Free Formula

What it is: Lactose removed or replaced with another sugar. [6]

When it's used: Rare conditions like galactosemia or congenital lactase deficiency. [1][6]

Important: True lactose intolerance is very rare in infants. Fussiness alone usually doesn't mean baby needs this. [1]

4. Partially Hydrolysed Formula

What it is: Protein is partially broken down into smaller pieces. [7]

When it's used: Sometimes marketed for "sensitive" tummies.

Important: **NOT suitable** for babies with confirmed cow's milk protein allergy — the proteins are not broken down enough. [7][8]

5. Extensively Hydrolysed Formula

What it is: Protein broken down into very small pieces that are less likely to trigger allergic reactions. [7][8]

When it's used: First-line treatment for confirmed cow's milk protein allergy (CMPA). [7][8]

Important: Requires medical guidance. More expensive than standard formula. [6]

6. Amino Acid-Based Formula

What it is: Contains no intact protein — only individual amino acids (the building blocks of protein). [7][9]

When it's used: Severe CMPA, multiple food allergies, or when baby doesn't tolerate extensively hydrolysed formula. [7][9]

Important: Rare need. Always under specialist medical supervision. [7]

■ QUICK DECISION HELPER

Your Situation	What to Consider
Healthy baby, no known issues	Standard cow's milk or goat's milk formula — either is a complete, appropriate choice. [1][3]
Baby seems fussy or gassy	This is common and usually NOT a formula problem. Talk to your pediatrician before switching. [6]

Suspected milk allergy	See your pediatrician. Diagnosis is needed before switching to special formula. Goat milk is NOT an alternative for true allergy.
Confirmed CMPA diagnosis	Pediatrician will recommend extensively hydrolysed or amino acid formula based on severity. [7][8]
Family history of allergies	Discuss with pediatrician. Breastfeeding or hydrolysed formula may be considered for prevention. [6]

■ Most babies don't need special formulas — but it helps to know they exist.

SOURCES:

- [1] AAP/HealthyChildren.org. "Choosing a Baby Formula." American Academy of Pediatrics.
- [2] MedlinePlus. "Infant Formulas." U.S. National Library of Medicine.
- [3] Contemporary Pediatrics. "Goat milk-based infant formula: What pediatricians need to know." (2025)
- [4] 411 Pediatrics. "New infant nutrition guidelines: Pediatricians now recommend goat milk-based infant formula." (2025)
- [5] PMC. "Goat Milk Allergy and a Potential Role for Goat Milk in Cow's Milk Allergy." Nutrients (2024)
- [6] AAFP. "Infant Formula." American Academy of Family Physicians.
- [7] PMC. "Hydrolysed Formulas in the Management of Cow's Milk Allergy." Nutrients (2021)
- [8] AAP Committee on Nutrition. "Hypoallergenic Infant Formulas." Pediatrics.
- [9] PMC. "Evaluation of an Amino Acid-Based Formula in Infants Not Responding to Extensively Hydrolyzed Protein Formula." (2016)

DISCLAIMER: This guide is for informational purposes only. Always consult your pediatrician before making any changes to your baby's formula.