

Q: Can I use Enfamil A.R.™ if I'm both breastfeeding and formula-feeding?

A: Yes, you can use it for all of your baby's feedings—or only now and then as needed.

Q: Will my baby outgrow reflux/frequent spit-up?

A: This issue usually peaks around 3 months of age but can last until 12 to 14 months. By then, the muscle that connects the stomach and throat has grown stronger and is better able to do its job. In the meantime, changing how you feed your baby and using a thickened formula like **Enfamil A.R.™** can help make this phase easier, calmer, and happier for both of you.

Q: If Enfamil A.R.™ helps my baby, should I continue using it?

A: Many parents who switch to **Enfamil A.R.™** continue using it throughout the first year. **Enfamil A.R.™** has complete nutrition your baby needs. It also has brain-nourishing DHA, just like regular Enfamil® formula.

The many benefits of Enfamil A.R.™



Complete balanced nutrition with added rice starch that's pre-measured and pre-mixed into the formula



Clinically proven to reduce spit-up by 50% within 1 week*



Expert-recommended DHA† to support brain-building milestones



Prebiotics and vitamins to help support digestive and immune health



Scan to learn more



*Based on a clinical study of Enfamil A.R.™ with infants who spit up frequently (5 or more spit-ups per day), comparing frequency and volume of spit-up after feeding Enfamil A.R.™ to the same infants at the beginning of the study.

†As recommended by the Food and Agriculture Organization of the United Nations/World Health Organization (FAO/WHO): >0.20%-0.36% of total fatty acids.

LF1620 REV 04/25

©2025 Mead Johnson & Company, LLC.



Did you know that experts recommend avoiding acid-reducing medications in otherwise healthy infants with reflux/frequent spit-up? These medications can affect digestion.

Enfamil A.R.™ is an easy and convenient way to provide balanced nutrition AND help reduce reflux/frequent spit-up.

READ ON TO LEARN MORE →



Worried about reflux/frequent spit-up?
This Q & A can provide valuable information to help you and your baby both feel better.

Feeding issues like reflux can be frustrating... but normal! In fact, about two-thirds of otherwise healthy babies may experience frequent spit-up during their first 3 months, with about 50% spitting up daily. Here are some FAQs and tips that can help transform feeding times into happier times.

Q: Why does my baby spit up?

A: Your baby has a muscle in the back of the throat that keeps food from flowing up from the stomach. This muscle is still developing, so sometimes it doesn't close all the way. This can lead to spit-up. As your baby grows, this muscle matures and becomes better able to do its job—keeping food down.

Q: Is reflux/frequent spit-up a cause for concern?

A: This issue is quite common and is generally harmless, though it can be messy or scary. As long as your baby is growing and seems content, there's typically no need to worry. *However, if your baby seems uncomfortable and irritable, ask your pediatrician for advice.*

Q: What's the difference between frequent spit-up, reflux, GER, and GERD?

A: Frequent spit-up is one sign of gastroesophageal reflux (GER) or common reflux. Other signs may include fussiness during or after feeding. Frequent spit-up, GER, and common reflux all describe the same normal process. GERD (gastroesophageal reflux disease) is more severe, longer-lasting, and less common than GER. Other symptoms of GERD include refusing to eat, poor growth, colic, gagging, and/or difficulty swallowing. [If you notice these issues, see your doctor.]

Q: Can my baby have reflux if they're gaining weight normally?

A: Just because a baby is gaining weight doesn't mean they aren't struggling. If your baby is in pain, arching their back, and struggling to sleep, they may have reflux. Talk to your doctor about simple and effective solutions like Enfamil A.R.™

Q: Should I give my baby medicine for reflux/frequent spit-up?

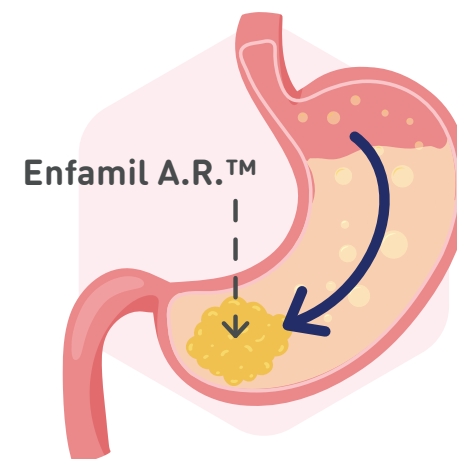
A: In most cases, no. Instead of medicine, the American Academy of Pediatrics (AAP) recommends these approaches:

- Making simple changes to how you feed your baby to help them spit up less often. For example, try burping them more often, feeding them smaller amounts, or keeping them upright for 30 minutes after each feeding
- Switching to a thickened formula, which is specifically designed to reduce spit-up without interfering with baby's natural digestion process

Medicines for reflux reduce stomach acid, which is something your baby needs to digest food properly. *You should only use reflux medicine under a doctor's direction.*

Q: How does a thickened formula like Enfamil A.R.™ work?

A: **Enfamil A.R.™** is specially designed to work with your baby's body: It thickens further inside the stomach after it mixes with stomach acid. It's this thicker consistency (added rice starch) that helps the formula stay down. **In fact, Enfamil A.R.™ is clinically proven to reduce spit-up by over 50%* while providing complete nutrition for your baby's first year.**



Enfamil A.R.™ thickens in the stomach. This helps formula sink lower during digestion, making it harder to spit up!

Q: Are there any side effects from using Enfamil A.R.™?

A: **Enfamil A.R.™** works with your baby's anatomy/natural digestion process and has no known side effects. It's a safe and gentle way to reduce reflux/frequent spit-up.

Q: Why can't I just add rice cereal to regular formula?

A: Compared to rice cereal, a thickened formula like **Enfamil A.R.™** is recommended because it:

- Gives your baby balanced nutrition without increasing the amount of carbohydrates or calories
- Passes easily through the nipple
- Is easier and more convenient to prepare, with less mess and fewer steps

*Based on a clinical study of Enfamil A.R.™ with infants who spit up frequently (5 or more spit-ups per day), comparing frequency and volume of spit-up after feeding Enfamil A.R.™ to the same infants at the beginning of the study.