First chicken meal in infants: why it could go wrong?

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Usual introduction time of complementary foods into infants diet is after 6 months of age. Transition from "only-milk" diet is important for meeting growth requirements. Although importance of protein rich foods is unquestionable, there are a whole variety of potential problems which can pop up after first protein meal. We present three cases with similar clinical presentation after first protein meal, but completely different pathophysiology. A male patient presented at the age of 8 months with intense vomiting, pallor, lethargy and decreased level of consciousness less then 2 hours after consuming cooked chicken, followed by complete recovery in less than 24 hours. Suspected food allergy was confirmed and child was released two days after admission with a diagnosis of FPIES. A female infant presented at the age of 7 months with seizures accompanied with hypoglycemia, hyperammonemia and elevated liver enzymes. Episode started 30 minutes after meal rich with cooked chicken. Hypoglycemia resolved after administration of IV glucose. Suspected HI-HA syndrome was confirmed with gene testing. A 17-year old female is being followed for serum ammonia regularly because of ornithine transcarbamylase deficiency discovered in infancy. First presentation was with lethargy and hyperammonemia after first protein rich meal which contained chicken. Disease was confirmed and treatment was started with sodium phenylbutyrate, citrulline and modified diet protein intake. In a child developing symptoms after first protein meal, the importance of establishing right diagnosis cannot be emphasized enough. All potential problems can be avoided with proper diagnosis and treatment from the first presentation.