

Food Allergy Awareness

What is a food allergy?

It is an abnormal immune system response to an otherwise harmless food. The allergic individual's immune system overreacts to the protein in certain foods and creates antibodies to fight off that food. Histamines and other chemicals are released in this attack, causing the symptoms of an allergic reaction.

How common are food allergies?

Researchers estimate that 5% of children younger than two have food allergies. Most children develop food allergies within the first year of life. The number of people diagnosed with food allergy is increasing. Food allergy is most common in children under five.

How are food allergies diagnosed?

Food allergies should be diagnosed by a board certified doctor, preferably an allergist. To make a diagnosis, the doctor will need a complete history of the symptoms, which foods were eaten, how much was eaten and how soon the symptoms began. Next the doctor will perform allergy tests, either a skin test or blood test.

Is there a cure for food allergy?

There is no cure. Strict avoidance of the food is the only way to prevent an allergic reaction.

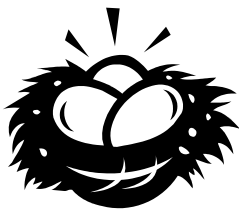
Do children outgrow their food allergy?

Most children outgrow their food allergy. However, allergies to nuts and peanuts are considered lifelong.

What foods most often cause a reaction?

PEANUTS	MILK
NUTS	EGGS
WHEAT	FISH
SOY	SHELLFISH

*These foods account for greater than 80 percent of allergic reactions in children.



What are the symptoms of a food allergy?

The symptoms of an allergic reaction can occur in the skin, gastrointestinal tract, respiratory tract and cardiovascular system. They can appear in just one body system or in several. Reactions to the same food can vary from person to person. For example, milk may cause Jessica to break out in hives, while it causes Ryan to vomit.

- Skin symptoms: Hives, Swelling, Itchy red rash, Eczema flare
- GI symptoms: Cramps, Nausea, Vomiting, Diarrhea
- Respiratory symptoms: Itchy eyes, Watery eyes, Runny nose, Stuffy nose, Sneezing, Itching or Swelling of the lips, tongue, or throat, Change in voice, Difficulty swallowing, Tightness of chest, Wheezing, Shortness of breath, Throat clearing
- Cardiovascular symptoms: Reduced blood pressure, Lightheadedness, Increased heart rate, Shock

***The symptoms can occur minutes after the food is eaten up to two hours later.

How serious can a reaction be?

The most serious type of reaction is anaphylaxis. This is a very sudden, severe reaction that involves multiple body systems. It produces life-threatening changes with blood circulation and difficulty breathing. No one can predict how a reaction will progress. A mild reaction can turn into full-blown anaphylaxis in a short amount of time. Epinephrine is the best treatment for anaphylaxis. Children with asthma and food allergies tend to be at the greatest risk for a fatal allergic reaction, because their respiratory tract is more likely to be involved.

What are the warning signs and symptoms of an anaphylactic reaction?

Hives	Paleness
Difficulty breathing	Cramps and stomach pain
Swelling of the tongue	Tingling or itching of the mouth
Diarrhea	Loss of consciousness

What should you do to help?

Act fast if you see someone having these symptoms. Give their prescribed medication (EpiPen®) immediately. Call 911. Then contact the parents or emergency contact person. Be sure to have clear instructions from the child's parents and the doctor about the type of medication and when to use it. Epinephrine is the drug of choice for the treatment of anaphylaxis. Epinephrine works by inhibiting the release of histamine and other chemicals that are released during an allergic reaction. This relieves the closing of the airway, lessens congestion in the lungs, reduces swelling and hives and helps maintain blood pressure. Quick administration of epinephrine is the way to save a child's life during a severe allergic reaction. Although asthma symptoms may be present, asthma medications should not be used in place of epinephrine. Antihistamines should also not be used by themselves to treat anaphylaxis. They can be used to treat minor symptoms such as a runny nose or a rash.

How do you give the EpiPen®?

First verify child's name and check name on EpiPen®. Check contents of EpiPen®. The solution should be clear and colorless. Do not use if content is discolored or brown.



Remove (pull off) gray safety cap.



Place the black tip of the EpiPen® on the outer aspect of upper thigh. It is not necessary to remove clothing.



Push the EpiPen® against the thigh until it activates. Then hold in place for several seconds.

Finally, place the EpiPen® in a metal or glass container (coffee can, jar, etc.)

After injection, the child must be taken to the hospital for further medical observation immediately. The effects of the injection begin to wear off after 10 - 20 minutes.

There are no ill effects to giving the EpiPen® in a life threatening situation. The child may feel slight nervousness and an increased heart rate soon after the injection. Other symptoms may include: a pounding heartbeat, sweating, nausea, vomiting, breathing trouble, headache, dizziness and anxiety.

How much food does it take?

The amount of food needed to cause an allergic reaction varies from person to person. Some children are so sensitive that they develop symptoms when the allergic food comes into contact with their skin. For example, parents who have eaten the food to which their child is allergic and kissed the child soon afterward have reported seeing hives develop on the spot they kissed. While these cases are rare, they remind us of how little it can take for some children to develop a reaction.

Can a child have a reaction if his food is prepared with food he is allergic to?

When a food comes into contact with another food, their proteins mix. As a result, the food now contains small amounts of the other food that can be invisible to us. This is called cross contamination. For children with severe food allergies, even these small amounts of the food can cause a reaction. It is helpful to prepare the allergic child's food first. Any food preparation tools (cutting board, utensils, pots, pans, cooking sheets, counter top) used with the allergic food need to be washed thoroughly before being used to prepare the allergic child's food. Beware also of double dipping into jars. If a knife is put into the peanut butter jar and then into the jelly – the jelly is now contaminated.

How can you keep an allergic child safe in childcare?

Create a plan for managing an allergic reaction with the help of the parents and a health care professional. When everyone is educated on the food allergy and reviews the action plan regularly, the child will be in safe hands.

How can you make sure the child is not given a food he is allergic to?

The parents of the child can give you the information you need to keep the child safe. All food labels will have to be read closely and checked against a complete food and ingredient list provided by the parents. Ingredients can change without warning, so it is important not to take shortcuts when it comes to label reading. Institutional-size containers do not always have the same ingredients as regular sizes of the same product. Most products have an 800 number for any questions.

Keep food labels for foods served to an allergic child for at least 24 hours. If an allergic reaction occurs, you will have the ingredient information you need to determine what caused the reaction. Store safe foods separately and label them with the child's name. You can always prepare allergy-free foods in large quantities and freeze the extra portions for use at a later date. Store a nonperishable lunch and some safe snacks for unplanned events.

How should we deal with the other children?

Food trading must be discouraged between the children. It is also important for the children to wash their hands after eating. With the parents' permission, you may also want to educate the children on the food allergy. Emphasize what the allergic child can eat as well as what must be avoided.

