

FOOD ALLERGY

TIPS FOR CAREGIVERS

WHAT IS FOOD ALLERGY

Your child was just diagnosed with a food allergy. A food allergy is an abnormal immune response to food. It can occur after eating even a very small amount of the food to which someone is allergic. Remember, this is not the same as food intolerance. Food allergy is a more serious, potentially life-threatening type of reaction to food.

DIAGNOSIS

Food allergy is diagnosed by taking a detailed history, performing skin prick testing and blood tests, and in some cases, through an oral food challenge in an allergist's office. Not all positive skin prick tests or blood test results mean that your child has a food allergy. Similarly, not all negative tests mean that they do not have a food allergy. It is very important to see an allergist to discuss these test results.

COMMON FOOD ALLERGENS

The most common food allergens are peanut, milk, shellfish, tree nut, egg, fin fish, wheat, and soy. However, it is possible to be allergic to other foods.

ALLERGIC REACTIONS

Allergic reactions are unpredictable and can happen very quickly. Mild reactions may include itching or hives. A severe reaction can involve a combination of symptoms and is called anaphylaxis. Anaphylaxis can include symptoms like trouble breathing or swallowing, vomiting, feeling faint, or passing out. **It is important to remember that someone can have a mild reaction to a food in the past and have a much more severe reaction the next time they eat the same food.** Anaphylaxis is life-threatening and needs to be treated immediately with an epinephrine auto-injector and emergency care.



RECOGNIZING & TREATING ALLERGIC REACTIONS

Food allergy & anaphylaxis emergency care plan:

Your doctor or nurse will give you an emergency care plan that will explain the symptoms and appropriate treatment for your child. They will show you how to use your epinephrine auto-injector. All caregivers (e.g., grandparents, daycare staff, school staff) must be trained. The more you practice, the better prepared you will be.

Allergic reactions can begin suddenly and progress quickly.

Food allergy reactions usually happen within minutes to several hours following exposure. They can be life-threatening. Adolescents and those with asthma or reactive airway disease are at greater risk for a severe reaction. If you know or think that your child may have eaten a food they are allergic to, it is important to identify a reaction and respond to it.

Treat reactions early BEFORE symptoms become worse.

Serious allergic reactions are treated first with a shot of medication called epinephrine. This injection should be given in the outer thigh and can be administered through clothes.

After epinephrine is given, call 911 and go to the emergency department. Sometimes a 2nd dose of epinephrine is needed either because the symptoms don't go away or they come back. You should always have 2 doses of epinephrine available. Even if your child looks fine after the epinephrine, they still need to go to an Emergency Department to be evaluated by a doctor.

WHEN IN DOUBT, GIVE EPINEPHRINE AND CALL 911

DAILY MANAGEMENT

READING INGREDIENT LABELS

Learn how to read ingredient labels to make sure there are no allergens in the foods your child will eat. Ingredients can change so you should check labels for allergens EVERY time you use a product, even if your child has eaten the food safely in the past. Learn labeling laws for your food allergens. Avoid items with advisory statements on them. Teach your child that when in doubt, do without, and do not eat the item.

AVOIDING CROSS-CONTACT BETWEEN FOOD ALLERGENS

Even tiny amounts of allergen can cause a reaction. Heating and cooking does not make an allergen safe to eat.** Cross-contact can occur, so cleaning surfaces with soap and water, commercial cleaners, or commercial wipes is important. Also, teach children to wash their hands with soap and water or wipes before handling food. Hand sanitizer does not remove the allergen. Learn other sources of cross-contact and avoid them (deep fryers, slicers, utensils, hands, aprons, sponges and rags, buffets, saliva, etc.). Teach children not to share food, utensils, dishes, or water bottles with others.

***Discuss with your health care provider about eating baked allergens.*

COOKING

As you get started, focus on what safe foods your child can have, rather than what needs to be avoided. Plain foods with simple ingredients are often a good place to start. From there you can look for new recipes using safe ingredients. Discuss your child's food intake and nutrition at each visit with your child's doctor or nurse. Your child's doctor or nurse may determine if important nutrients are missing from your child's diet or if you need a referral for a nutritional consultation with a registered dietitian experienced in food allergy.



SOCIAL & EMOTIONAL MANAGEMENT

Food allergies can be managed. In time, you will learn to successfully adapt. With education and support you can enjoy life and help your child thrive. Avoiding certain foods can be a challenge and these new responsibilities can make you feel sad, angry, or worried. Give yourself time to adjust. Ask for help from your doctor or nurse who can provide needed resources or referrals. Local support groups exist to help with practical tips and emotional support.

Educate family, friends, and school or child care staff who will be with your child about your child's food allergies. Inform the school and school nurse if available about the specific allergens. Provide the school, daycare, babysitters with a copy of your child's Food Allergy & Anaphylaxis Emergency Care Plan, two epinephrine auto-injectors, and any other medications prescribed by your doctor. The next page provides great websites to help educate your community.

Teach your child, in an age appropriate way, how to help manage their food allergy. Remember that teenagers have lots of new responsibilities and pressures. Teach them to self-manage at all times and no matter who they're with.

YOUR CHILD SHOULD ALWAYS HAVE:

- Emergency care plan
- 2 epinephrine auto-injectors
- Benadryl or antihistamine
- Medical identification