

Food Allergies

What is a food allergy?

You may have a food allergy if your body reacts to something you breathe, swallow or touch. An allergy usually causes a reaction that may include any or all of the following: itchy, watery eyes; runny nose; sneezing, itching, redness, hives and swelling on the skin; abdominal cramping and vomiting; coughing or wheezing. It can cause a life-threatening reaction.

What are common food allergies?

Adverse reactions to foods are fairly common, but true allergic reactions to food determined by food challenges are **not** very common. Six to 8% of babies and young children and 3 to 4% of adults have food allergies.



Most Common Food Allergies

Children	Adults
Eggs Milk Tree Nuts* Peanuts Soy Wheat Fish Shellfish**	Peanuts Tree Nuts* Fish Shellfish**

*(tree nuts include almond, Brazil nut, cashew, hazelnut, macadamia nut, pecan, pine nut, pistachio, walnut)

** (shellfish can include crustaceans such as shrimp, lobster, crab and mollusks such as scallops and clams)

Young children and babies can outgrow food allergies. Roughly eighty percent outgrow allergies to eggs, milk, soy, and wheat by school age. New research indicates 20% of children may outgrow peanut allergy and 10% may outgrow tree nut allergy as they get older.

What are the symptoms of a food allergy?

Food allergies may cause many different allergy symptoms. Allergic reactions to food usually occur rapidly after eating the offensive food.

Signs and symptoms of food allergy can involve the nose, mouth, skin, lungs, heart and stomach. They may include:

- **Skin symptoms** include itching, redness, hives and swelling,
- **Stomach symptoms** include tingling; burning; abdominal cramping, nausea, vomiting, diarrhea,
- **Respiratory symptoms** include nasal congestion, runny nose, sneezing, throat swelling, wheezing, and/or difficulty breathing and
- **Cardiovascular symptoms** include lightheadedness, fainting, low blood pressure, and shock.

How are food allergies diagnosed?

The doctor will ask questions about your health and your symptoms. Make sure to tell your doctor if anyone in your family has allergies. If family members have allergies, your chances of having allergies increase. Your doctor may use the following information to make a diagnosis of food allergy:

- Physical exam
- History of your symptoms and family history
- Food diary to record what was eaten, when it was eaten, and how long after eating did you react and what was the reaction and treatment given
- Allergy tests
- Food challenge

Allergy Testing

Allergy tests can be done to help you identify if you are allergic and to what you are allergic. There are several types of testing.

Prick Skin Testing

- During this test, a small amount of each food you may be allergic to (allergen) is placed on the skin. The skin is then pricked. You may get a bump and redness where the skin is pricked to indicate you may be allergic to that allergen. After a short time, each skin test reaction is measured for swelling and redness. Your doctor will compare your prick skin test results with your history of symptoms. This test doesn't always detect allergies and may even be falsely positive.

Blood Testing

- The most common blood test is called specific IgE (sigE) or ImmnoCAP, which measures the amount of allergy antibody (IgE) directed at a particular food protein. Blood is taken from your arm and sent to a laboratory to check for allergies.

Food Challenge

- A food challenge can be important to help evaluate and manage patients with a history of possible food allergies. If you have positive or negative skin and blood tests to foods, your doctor may consider a food challenge.
- Here are some reasons to perform a food challenge:
 - To identify if a food is incorrectly suspected as the cause of symptoms
 - To prove that a food is NOT the cause of symptoms
 - To learn if you've outgrown a food allergy
- Food challenges take place in a controlled environment with staff equipped to handle any adverse

reactions. During a food challenge, the patient (watched by healthcare providers) eats a food suspected of previously causing allergic symptoms. This is done by ingesting small, increasing doses of the suspected food at preset time intervals (such as every 30 minutes). The challenge is stopped if a reaction occurs, and the patient is considered to have passed the challenge when a full serving of the suspected food is ingested without causing symptoms.

Food Allergy—What Can You Do?

Here are some simple things you can do to help lead a normal, active life:

- Learn more about your food allergies and how to avoid foods you are allergic to.
- Talk with your doctor or a registered dietitian.
- Avoid foods to which you are allergic.
- Know all the different names of foods to which you are allergic.
- Read labels carefully to identify foods in packages.
- Ask about foods served away from your home.
- Educate adults caring for your children about food allergies.
- Encourage children with food allergies not to eat food given to them by friends.
- Use and understand allergy medications.
- Carry injectable epinephrine (Epi-Pen®, Auvi-Q®, Adrenaclick®) and an oral antihistamine such as Benadryl as prescribed for emergencies.

What is a severe allergic reaction?

A severe allergy can cause a life-threatening reaction called anaphylaxis. It is rare, and the most serious type of allergic reaction.

Anaphylaxis caused by a food allergy occurs after eating that food, even a small bite. Foods most commonly causing anaphylaxis are peanuts, seafood, tree nuts, and in children, eggs and cow's milk, but any food can cause anaphylaxis. Skin contact with the food rarely causes anaphylaxis. An anaphylactic reaction from an inhaled allergen is also rare.

What are the symptoms of anaphylaxis?

Symptoms of anaphylaxis often appear within minutes of eating the food and include:

- Increased trouble breathing, coughing, chest tightness or wheezing,
- Dizziness, fainting, rapid or weak heartbeat,
- Swelling in the mouth and throat or trouble swallowing,
- Flushing, itching, hives or a feeling of warmth and
- Vomiting, diarrhea or stomach cramping.

Anaphylaxis—What actions to take?

Your doctor will work with you to develop a written action plan to help control your food allergy symptoms and prevent anaphylaxis. Know and follow your action plan. Here are a few other suggestions to help you:

- Wear a Medic Alert tag at all times
- Know the symptoms of a life-threatening reaction
- Carry an emergency kit. It should have an antihistamine (pill, syrup or strip) and an epinephrine injector. It is not advised to keep the kit in a car as the medications are best kept at room temperature. (When the epinephrine expires, inject it into an orange, for practice. Throw the orange away. Replace the epinephrine.)

- Keep an emergency kit at school, daycare and anywhere else your child goes. School staff and all other caretakers of your child should know how to give the epinephrine.

What medicine is used to treat anaphylaxis?

At the first sign of a life-threatening anaphylactic reaction, give epinephrine. You can then take the antihistamine. After taking the epinephrine, call 911 to take you or your child to the hospital. It is best to wait for the ambulance to arrive, as the reaction can return as the epinephrine wears off.

Epinephrine is the most important medicine for treating anaphylaxis. It should be injected into a muscle. A special syringe that is easy to give (to yourself or someone else) is available. If prescribed, your doctor or nurse will teach you the proper way to use it.

Common brands of epinephrine are:

- EpiPen® and EpiPen® Jr
- Auvi-Q®
- Adrenaclick®

Remember to have a written action plan to help control your food allergy symptoms and prevent anaphylaxis. Know and follow your action plan. You or your child can live a normal and active life with food allergies.

Visit our website for more information about support groups, clinical trials and lifestyle information.

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