



PRACTICAL FOOD ALLERGY MANAGEMENT: A QUICK GUIDE

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PREVENTION: **ACT** to prevent an allergic reaction

AVOID: Oral ingestion is the most common and serious form of exposure. Read labels to completely avoid even the smallest amount of the allergen.* Labels should be read prior to eating the food. Ingredients can change without notification. Get familiar with current labeling laws and how they relate to your specific allergens. Avoid foods that contain advisory statements (processed in a facility, etc.) for the food allergen.* Also, read the labels of skin products, supplements and pet food.

Healthy skin helps keep allergens out of our bodies; some skin exposures can cause local hives. The smell of a food does not cause an allergic reaction, but breathing in cooking vapors or powdered, crushed or dust forms of an allergen has been reported by some to induce a reaction. These types of reactions are typically mild, but in rare cases people have reported experiencing severe reactions.

Cross contact occurs when a food allergen comes in contact with food or an item not intended to contain that allergen. Scraping off or picking allergens out of a food will not make it safe; instead, replace it with a completely new food item. Do not be afraid to ask questions to make sure the item is safe. Know the common sources of cross contact. Do not share utensils, beverages or food, and wash hands prior to eating and, if possible, before touching the face. Saliva from other people and pets can also contain allergen if recently eaten. Most importantly, if you are unsure if an item is safe, do not eat the item!

COMMUNICATE: The child, all caregivers and anyone responsible for food preparation should know about the allergy. Consider medical alert notification jewelry.

TEACH: Educate all caregivers who have responsibility for the child. Include children in developmentally appropriate self management skills (hand washing, allergen avoidance, saying "no thank you," reporting symptoms, etc.).

Prevention and preparedness should be applied to every situation - always.

* Some exceptions may be recommended by healthcare providers.

PREPAREDNESS: Be prepared to **REACT**

RECOGNIZE ANAPHYLAXIS: (a severe life-threatening allergic reaction): Be comfortable knowing which symptoms suggest a severe allergic reaction and when to use self-injectable epinephrine. This should be discussed with your healthcare provider. A written allergy action plan is very helpful in an emergency and in training others who care for your child. A form is available at foodallergy.org/files/FAAP.pdf. Ask your healthcare provider to fill one out for you and explain it to you.

GIVE EPINEPHRINE: Epinephrine is the first line treatment for anaphylaxis. Always have self-injectable epinephrine available. It is wise to have two doses at hand as some people may need a second dose. Discuss this with your healthcare provider. Practice with training devices and make sure that you are comfortable enough to not only give epinephrine if needed, but to teach other caregivers how as well.

ACTIVATE EMERGENCY RESPONSE: After treating with epinephrine, call your local ambulance service and tell them that a child is having an allergic reaction and may need more epinephrine. (An ambulance should be called not because epinephrine is dangerous, but because the allergic reaction was severe, needed to be treated with epinephrine, and may need more treatment.)

RESOURCES

kidswithfoodallergies.org (free starter guide)

foodallergy.org

faiusa.org

epipen.com

adrenaclick.com

twinject.com

medicalert.org



Special thanks to Nutricia North America, the makers of Neocate, for providing the funding for this educational handout.

To view this quick guide and a companion list of references, visit kidswithfoodallergies.org/handout.html.