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About Food Allergies

Food allergies occur most often in babies and children but can appear at any age. Foods you have eaten for years without problems can suddenly cause allergy symptoms.

An allergy occurs when something causes your body's natural defenses to overreact. The incidence of food allergies has increased dramatically in recent years – about 32 million people in the United States have some kind of food allergy. Research has shown that up to 11 percent of adults and 8 percent of children have food allergies.

Here are some answers to common questions about food allergy.

What are the symptoms of food allergy?

In some people, an allergy can start within seconds or minutes of eating a food. In others, the reaction may not start for several hours. Reactions can be mild, such as a runny nose and sneezing, or very severe, such as swelling of the throat or tongue, wheezing, drop in blood pressure or even death.

Symptoms of an allergic reaction may involve the skin, the gastrointestinal tract, the cardiovascular system and the respiratory tract. They can surface in one or more of the following ways:

- Hives and swelling
- Vomiting and/or stomach cramps
- Shortness of breath
- Wheezing

- Repetitive cough
- Shock or circulatory collapse
- Tight, hoarse throat; trouble swallowing
- Swelling of the tongue, affecting the ability to talk or breathe
- Weak pulse
- Pale or blue coloring of skin
- Dizziness or feeling faint
- Anaphylaxis, a potentially life-threatening reaction that can impair breathing and send the body into shock; reactions may simultaneously affect different parts of the body (for example, a stomachache accompanied by a rash)

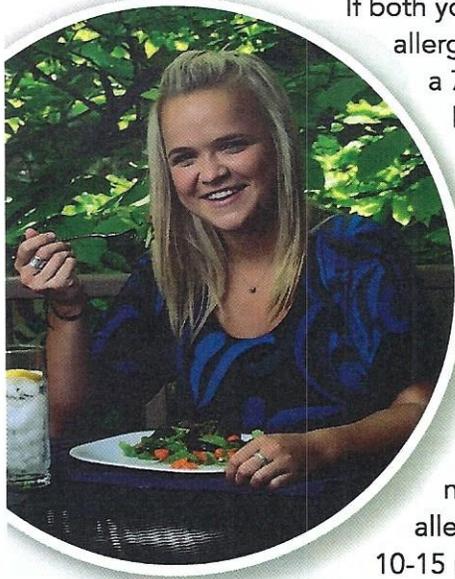
Many people may think they have a food allergy when what they really are experiencing is food intolerance. Food intolerance can often mimic a food allergy, causing nausea and vomiting, but is not life-threatening. The best way to determine whether you are experiencing a food allergy is to see an allergist for testing. An allergist will help you develop an action plan to deal with whatever allergies or intolerances you may have.

What causes allergy symptoms?

The body's natural defense network is the immune system. It keeps you healthy by fighting off infections and other dangers to good health. Most people have no problem eating many kinds of foods. An allergic reaction occurs when the immune system attacks a specific food or something in a food by mistake. This battle causes:

- Skin areas to become red, itchy and swollen.
- Blood vessels to swell.
- Smooth muscles to contract.

Why do I have food allergy?



If both your parents have allergies, you have about a 75 percent chance of being allergic. If one of your parents is allergic, or if one of your relatives from either side has allergies, you have a 30-40 percent chance of having some form of allergy yourself. If neither parent has an allergy, the chance is only 10-15 percent.

Which foods are most likely to cause an allergy?

While any food can cause an adverse reaction, nine types of food account for about 90 percent of all reactions:

- Eggs
- Shellfish
- Cow's milk
- Wheat
- Peanuts
- Soy
- Tree nuts
- Sesame
- Fish

The most common food allergies in children are eggs, milk and peanuts. The most common food allergies in adults are fish, shellfish, peanuts and tree nuts.

Those allergic to shrimp may react to other shellfish like crab and lobster. A person allergic to one tree nut may be allergic to others. But, someone allergic to pecans may not have to stop eating all tree nuts. Someone allergic to peanuts – which actually are legumes (beans), not nuts – may still have problems with tree nuts, such as pecans, walnuts, almonds and cashews. In very rare circumstances they may have problems with other legumes.

Most people with a food allergy only react to one or two foods.

How do allergists tell which foods cause my allergy?

Some people have an idea of what food or foods they are allergic to. They eat peanuts or a product with peanut in it and immediately break out in a rash. Others need an allergist's help in finding the cause. Sometimes, the symptoms show up many hours after they have eaten the food.

Your allergy treatment will typically begin with a complete medical history. Your allergist will ask you about:

- The symptoms you have after eating the food.
- How long after eating the food these symptoms occur.
- How much of the food you ate.
- How often the reaction has occurred.
- What type of medical treatment, if any, you had.

Your medical history will also include questions about your diet, your family's medical history and your home and living area.

Your allergist asks these questions to find out what is causing your allergy or making your symptoms worse. For example, allergy to pollen in the air, such as ragweed pollen, can be the cause of the swelling or itching in your mouth and throat if you eat certain foods like melons. This is called oral allergy syndrome.

What is allergy testing?

Your allergist may recommend allergy tests. This may include skin testing. In an allergy skin test, a very small drop of a liquid food extract, one for each food, is placed on the skin. The skin is then lightly pricked. This is safe and generally

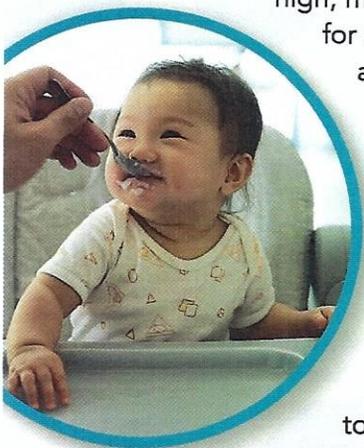


not painful. Within 15 to 20 minutes, a raised bump with redness around it, similar to a mosquito bite, may appear. The bump shows you are probably allergic to that food. Sometimes, an allergy blood test may be used.

If done right, skin and blood tests are reliable and can help your allergist diagnose food allergy. But either of these tests alone do not confirm food allergy. Some people test positive for a food allergy and have no symptoms when they eat that food. To confirm test results, your allergist may ask you to do an oral food challenge. This means you will eat or drink small portions of a food in increasing amounts over a period of time to see if an allergic reaction occurs. This is usually done under your allergist's supervision.

Can food allergies be prevented?

The National Institute for Allergy and Infectious Disease has issued updated guidelines to help parents of newborns introduce peanut-containing foods in order to prevent peanut allergy. The guidelines define high, moderate and low-risk infants for developing peanut allergy and address how to proceed with introduction based on risk.



The guidelines are a breakthrough for the prevention of peanut allergy. Peanut allergy has become much more prevalent in recent years, and there is now a roadmap to prevent many new cases.

Talk with your pediatrician about whether your infant is considered high risk, and how you can introduce peanut-containing products to prevent peanut allergy.

Currently, there is no approved protocol for introducing other foods to infants to prevent food allergies, but research is ongoing and new developments are on the horizon.

Once my allergy is known, how is it treated?

Once a food allergy is certain, the best treatment is to avoid the food. Carefully check ingredient labels of

food products, and learn other names for the food or foods you must avoid to be sure not to eat them.

When you eat out, be extra careful. Waiters, and sometimes the kitchen staff, may not always know every dish ingredient on the restaurant's menu. Sometimes, even though it is rare, walking into a kitchen or restaurant where food is being prepared can cause a dangerous reaction. Vapor may carry extremely small particles that can be harmful.



What if I eat a food I'm allergic to?

Once you've been diagnosed with a food allergy, your allergist will prescribe an epinephrine auto-injector and teach you how to use it. You will also be given a treatment plan describing what medications you've been prescribed and when they should be used.

Anyone with a food allergy should always have their auto-injector close at hand. Be sure to have two doses available, as a severe, life-threatening reaction can recur in about 20 percent of people.

Use epinephrine immediately if you experience severe symptoms such as shortness of breath, repetitive coughing, weak pulse, hives, tightness in your throat or trouble breathing or swallowing. Also use it immediately if you have a combination of symptoms from different body areas, such as hives, rashes or swelling on the skin coupled with vomiting, diarrhea or abdominal pain.

Repeated doses may be necessary. Call 911 (or have someone nearby do so) immediately after injecting the epinephrine and let emergency personnel know epinephrine was administered and more may be needed. You should be taken to the emergency room.

If you are uncertain whether a reaction warrants epinephrine, use it right away; the benefits of epinephrine far outweigh the risk that a dose may not have been necessary.

Will I ever be able to eat these foods again?

Over time, allergies to cow's milk, eggs and soy may disappear. Allergies to peanuts, tree nuts, fish and shellfish typically last a lifetime. About one-third of children and adults who had food allergies at some point are eventually free from food allergies.

After you have avoided a food causing allergy for at least six months, your allergist may want to run an oral food challenge test, under observation, to see if you are still allergic. If you have no reaction and can eat a normal portion of the food, you will be able to start eating the food again if you wish. If any allergy symptoms occur, you should continue to avoid the food.



Once you have had a severe, sudden, life-threatening reaction to a certain food you may be advised to never again eat this food. In some very allergic persons, a very small quantity of a food can produce a life-threatening reaction.

By using caution and carefully following an allergist's advice, you can bring food allergy under control. Please talk with your allergist about other questions and concerns about food allergy.

Diagnosing food allergies can be as complicated as the medical condition itself. Symptoms of food allergy can vary from person to person, and a single individual may not always experience the same symptoms during every reaction. Food allergic reactions can affect the skin, respiratory tract, gastrointestinal tract, and/or cardiovascular system, and people may develop food allergies at different ages.

Diagnostic food allergy testing offers clues about the causes of symptoms, but it cannot determine whether someone has a food allergy with absolute certainty without an oral food challenge. Still, when a food allergy is suspected, it's critically important to consult with your allergist who can determine which food allergy tests to perform, determine if food allergy exists and counsel you on food allergy management once the diagnosis has been made.

To learn more about food allergies, visit www.acaai.org.

Find an allergist. Find relief.

Anyone with allergies and asthma should be able to feel good, be active all day and sleep well at night. You don't need to accept less. Allergists are specially trained to help you take control of your allergies and asthma, so you can live the life you want.

When should I see an allergist?

See an allergist if you have any of these conditions. Allergists treat two of the nation's most common health problems – allergies and asthma. More than 50 million people in the United States have these allergic diseases. Although symptoms may not always be severe, allergies and asthma are serious and should be treated that way. Many people with these diseases don't realize how much better they can feel. Allergists also treat conditions with similar symptoms, such as non-allergic rhinitis.

What is an allergist?

An allergist is trained to find the source of your symptoms, treat it and help you feel healthy. Life's too short to struggle with allergies or asthma. An allergist can help you find the answers you're looking for.

After earning a medical degree, the doctor completes a three-year residency training program in either internal medicine or pediatrics. They then finish two or three more years of study in asthma, allergy and immunology. The best way to manage your allergies or asthma is to see an allergist.