

Food allergies are life-altering for everyone involved.

Food allergies are common. Approximately 12 million people in the U.S. have food allergies (that's one in 25). Though reasons for this are poorly understood, the prevalence of food allergies and associated anaphylaxis appears to be on the rise. Approximately 3 million children in the U.S. under the age of 18 have a food allergy.

Food allergies are potentially life-threatening. Some reactions can involve only one system of the body, like hives on the skin. Other reactions can involve more than one part of the body, like vomiting, wheezing, hoarseness, or swelling of the lips. When someone has an allergic reaction that involves TWO or more body systems this condition is anaphylaxis (an-uh-fuh-LAK-sis). It can be mild to severe. Anaphylaxis requires immediate treatment because it can get worse very quickly. It is a severe allergic reaction that is rapid in onset, and can cause death. People with asthma are at greater risk for anaphylaxis. Allergic reactions can be unpredictable and subsequent allergic reactions can result in anaphylaxis even if prior reactions were minor. We must always be prepared to react immediately to treat anaphylaxis. Having emergency medicines available at all times and a written emergency care plan is the best way to be prepared to treat an allergic reaction. If you have to give a shot of epinephrine, go to a hospital emergency room immediately afterwards. Sometimes there can be a second wave of symptoms and a person may need additional treatment.

If children have a food allergy, they may have been prescribed injectable epinephrine, such as EpiPen®. This lifesaving medication must enter the bloodstream quickly, so you must carry it everywhere. Early administration of epinephrine (adrenaline) is crucial to successfully treating anaphylactic reactions. Quick use of this medicine can be lifesaving.

Studies have indicated that 16-18% of school-age children who have food allergies have had a reaction in school. A report in the *New England Journal of Medicine* titled "Fatal and Near-Fatal Anaphylactic Reactions to Food in Children and Adolescents" indicated that four of the six deaths from food allergy occurred in school, and were associated with significant delays in treating the reactions with epinephrine. *Administration of Epinephrine for Life-Threatening Allergic Reactions in School Settings. CL McIntyre, AH Sheetz, CR Carroll, MC Young. Pediatrics. Vol. 116, No. 5. Nov. 2005*

No two food-allergic people are alike, and neither are their allergic reactions. All food allergies can lead to anaphylaxis! When they occur, they can be the same, less severe than, or more severe than previous reactions. Additionally, an individual may not always experience the same symptoms of an allergic reaction (for example, an individual may have hives with one reaction, and vomiting with a subsequent reaction). The nature of a reaction depends on a person's sensitivity of the allergy and the dose of the allergen ingested.

Though most individuals develop food allergies in early childhood, food allergies can develop at any age.

Food allergies are life-altering for everyone involved and require constant vigilance.

For more information visit the Food Allergy & Anaphylaxis Network (FAAN) at www.foodallergy.org