Recognizing and Responding to Food Allergy Symptoms

Basic Facts

• A food allergy is when a child’s immune system overreacts to a particular food. Any system, such as cardiovascular, respiratory, gastrointestinal, or skin, can be affected.
• Even consuming a tiny amount of this food can cause symptoms, from mild to severe.
• Picking the offending food out of a dish being served does not eliminate the chance of an allergen response.
• Some food allergens can be airborne, such as in the steam from boiling seafood.
• The only way to prevent a reaction is to avoid the allergenic food.
• A reaction can take up to 2 hours after ingesting, or even as long as 4 hours.
• A reaction is unpredictable and can change from seemingly mild to fatal in minutes.
• A severe reaction is when a child may have a drop in blood pressure, resulting in loss of consciousness and shock, and ultimately death, if not treated. This is called anaphylaxis.
• Anaphylactic reactions (anaphylaxis) must be treated promptly with epinephrine. Seek immediate treatment in an emergency room.

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<th>Symptoms of an Anaphylactic Reaction</th>
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<td><strong>Mouth</strong></td>
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<td><strong>Gut</strong></td>
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<td><strong>Lung</strong></td>
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<td><strong>Throat</strong></td>
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<td><strong>Skin</strong></td>
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<td><strong>Heart</strong></td>
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The major food allergens are
- Eggs
- Milk
- Fish
- Tree nuts (such as walnuts, almonds, pecans)
- Peanuts
- Soybeans
- Wheat
- Crustacean shellfish (such as lobster, shrimp, crab)

Plan of Action
- Read food labels. The food labeling law of 2004 requires that ingredients must be identified by the major food allergen, such as lecithin (soy) or whey (milk), or the label may have a contains statement such as “contains wheat, milk and soy.”
- Every child care facility should have an emergency action plan for anaphylactic emergencies.
- The plan must include administering an epinephrine auto-injector and calling 911.

References

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