



Top 10 facts about **FOOD ALLERGY**

Allergy UK Helpline 01322 619898

www.allergyuk.org

 **AllergyUK**



10 things you should know about food allergy



1 An allergic reaction happens when the immune system reacts to a substance called an allergen.

In food allergy this is the protein found in food, which for most people, is harmless. Why the immune system reacts in this way is not fully understood.

2 Other reactions; Not all reactions to foods are due to allergy. They may be due to other conditions including food intolerance (e.g. gluten or lactose), food poisoning (from bacterial or toxin contamination) or simply other illnesses that have similar symptoms.

3 Food allergies can be divided into two main types which are called IgE mediated (immediate) and non-IgE mediated allergy (delayed). More information on these types of food allergies can be found in our [food allergy Factsheets](#).

4 Allergic reactions are common in babies and children.

Food allergies in children are often outgrown, although some persist into adulthood. Persistent food allergies include those to peanuts, tree nuts and sesame. It is possible to develop an allergy to food for the first time as an adult, and occasionally even to foods that have been eaten before without any problems.

5 Common culprits of food allergy include eight types of foods responsible for causing 90% of allergic reactions. These include cow's milk, egg, fish, peanuts, shellfish, tree nuts, soya and wheat. However, it is possible that any food has the potential to cause an allergic reaction.

The EU top 14 foods required by food law to be declared as allergens are:



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Allergic reactions can be mild, moderate, or severe.

Most allergic reactions are mild and resolve on their own, or after taking allergy medication (eg antihistamine). The most severe type of allergic reaction involves a person's breathing and/or circulation and is called anaphylaxis which can be life threatening requiring urgent medical attention and treatment, but is rare.



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Symptoms of food allergy: Commonly one or more of the following symptoms occur within minutes of eating the suspect food but can appear up to two hours later. Delayed reactions affecting the digestive system and skin can occur up to 48 hours later and may be caused by Non IgE mediated allergy or intolerance.

Mild to moderate symptoms:



Swelling of the eyes, face and lips



Runny or congested nose



Raised itchy rash (hives), eczema flare, skin flushing



Itchy mouth



Stomach cramps, nausea, vomiting, diarrhoea

Severe symptoms (anaphylaxis):



Swollen tongue, hoarse voice or cry, difficulty talking



Chest tightness



Breathing difficulties, persistent cough, wheeze



Low blood pressure, feeling faint, collapse



Pale and floppy (babies and small children)



8 Risk factors for developing food allergy can be increased if allergy runs in the family (e.g., a parent or sibling with asthma, hay fever, eczema or a food allergy), and where one type of allergy already exists e.g. asthma. Babies who develop moderate to severe eczema in the first few months of life are at an increased risk of developing food allergy.

9 Diagnosis: If you suspect a food allergy it is important to make an appointment with your GP or a healthcare professional as soon as possible to discuss your concerns, while also avoiding the suspect food to reduce the risk of a further allergic reaction.

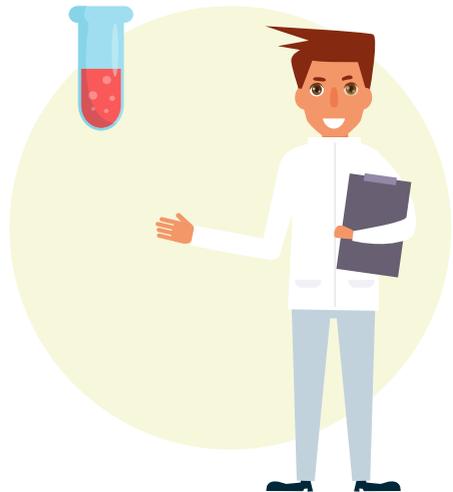


10 Allergy testing for IgE mediated (immediate) allergy is done by skin prick testing and/or blood tests which test for specific IgE against a particular allergen(s) e.g. peanut.

Oral food challenges (a supervised feed in a hospital or allergy clinic) can help confirm or rule out food allergy.

Not all types of food allergy are diagnosed by clinical tests, non IgE (delayed) allergy diagnosis involves a trial of eliminating the suspect food from the diet over a period of time and then reintroduction which should always be guided by a health professional.

More information can be found in our [food allergy testing and diagnosis Factsheet](#) available on our [Managing my Food Allergy webpage](#).



Tips for a food allergy diagnosis:

Getting help

For concerns over suspected food allergy symptoms make an appointment with your GP or healthcare professional as soon as possible. If you or your child have a severe allergic reaction then do not delay in getting medical help, call for an ambulance and tell the operator it is anaphylaxis.

Go equipped

Taking photos and/or videos of allergic symptoms can help with a food allergy diagnosis.

Make a note of the following:

This will help your doctor with taking a detailed allergy focused history (information gathering) which is the first step in diagnosing a food allergy and to help decide what type of allergy testing may be helpful. Your GP may need to make a referral to an allergy service for allergy testing to be carried out.

- ✓ Suspected food culprit
- ✓ Have you eaten this food before?
- ✓ How much of the food was eaten? (eg one baby spoon or half a tablespoon)
- ✓ Was the food cooked lightly/baked, raw, preserved etc ?
- ✓ Ingredients list (keep packaging of a baby food jar/pouch/food packet etc)
- ✓ What were the allergic symptoms?
- ✓ How soon did symptoms appear? How long did they take to go?
- ✓ Was any medication given?
- ✓ Did you go to A&E or another healthcare service?
- ✓ Were you already unwell at the time of this allergic reaction? Were any other factors involved e.g. happened whilst exercising.

Food and symptoms diary

Keeping a food and symptoms diary can be useful to help your doctor with a diagnosis. This is particularly important where the suspect food culprit is not clear and/or symptoms persist when the food thought to be a problem is removed from the diet.

[A copy of a food and symptoms diary can be downloaded here.](#)

We're here to help



Contact our Helpline Monday - Friday, 9am-5pm:

Call: 01322 619898

Webchat: allergyuk.org

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