

Food allergies

By Dr. Danielle Grenier



Q: I'm starting to introduce new foods into my one-year-old's diet, but I'm worried about food allergies. How will I know if she has a food allergy?

A: A food allergy is the result of a person's immune system reacting to a specific food or food additive which is called an allergen. Different kinds of allergens can enter the body through various routes. They can be:

- inhaled (such as dust, pollen or animals);
- ingested as food (some common ones are nuts, eggs or shellfish);
- ingested (or injected) as medication (such as penicillin);
- injected by an insect sting (like a bee or wasp venom); or,
- absorbed through the skin (such as poison ivy).

The reaction can start very suddenly, even after being exposed to a small amount of the particular allergen.

Most often, your child will have eaten the specific food allergen more than once before you know she's allergic to it. For example, the first time your child is exposed to nuts, with or without your knowledge, there will probably be no reaction. If she is predisposed to develop an allergy to nuts, a subsequent exposure could cause a serious reaction, even potentially life-threatening. An allergic reaction can manifest itself in many different ways and affect many body parts.

Signs and symptoms include:

- Respiratory trouble (coughing, wheezing, shortness of breath, hoarse voice, choking).
- Nasal symptoms (sneezing, blocked and/or itchy nose).
- Gastrointestinal trouble (bloody diarrhea, stomach cramps, vomiting, problems swallowing).
- Skin symptoms (hives, swelling of the face or tongue, itching, and eczema). These are usually the most common symptoms of food allergy.
- Eye problems (itchiness, redness, watery eyes, swelling).
- Cardiovascular trouble (pallor, dizziness, loss of consciousness).

A severe allergic reaction is called anaphylactic shock or anaphylaxis. It is a rapid, extreme response to the trigger substance. It can happen within minutes after being exposed to an allergen.

Any food groups can trigger an allergic reaction, but the most common ones are peanuts, tree nuts, eggs, shellfish, fish, milk, soy and wheat.

Many children outgrow their food allergies, especially if the allergy started before age three. Allergies to milk, for example, will usually go away but those to nuts and fish probably won't.

Food intolerance is different from an allergy

Whereas an allergy is caused by an immune reaction to the protein of a substance that we call an allergen, food intolerance is usually the result of the body's inability to completely digest the carbohydrate portion (sugars) of certain foods. Food intolerance causes discomfort but is not dangerous to your child.

Your child may experience bloating, loose stools, gas or other symptoms after eating the specific food. Even though this reaction is not dangerous, if it causes your child discomfort you might want to avoid those foods for a short period of time and reintroduce them in the future to see if the same symptoms occur.

Lactose intolerance is an example of this type of digestive problem and should not be confused with a food allergy. It occurs when the body doesn't produce enough of the enzyme lactase to fully break down the sugar (lactose) found in most dairy

products. It is rarely seen in young children and usually develops after at least three years of age. While some young children adjust to the lack of this enzyme, some will have problems for life and need adjustments to their diet.

If a child is lactose intolerant and has difficulty digesting dairy products, you can give her the calcium she needs by offering:

- lactose free or lactose-reduced milk
- canned salmon and sardines with edible bones
- oranges or fortified orange juice
- broccoli
- almonds, and
- pinto beans

Many of these foods do not provide enough vitamin D. Speak to your doctor about whether a supplement of vitamin D might also be needed.

Remember to be careful of foods that can cause choking.

It is hard to diagnose food allergies. If your child has a reaction to a food, you will need to see your doctor. Your doctor may organize some allergy testing and prescribe an adrenaline injecting kit (e.g. EpiPen), to administer to your child right away if he has an important reaction when exposed to the allergen again.

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For more information on your child's growth and development, visit the Canadian Paediatric Society's website at www.caringforkids.cps.ca or www.soinsdenosenfants.cps.ca

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