

Food Foundations • an NAQ Nutrition program

WHAT IS A FOOD ALLERGY?

Food allergy occurs in approximately 1 in 20 children and 1 in 100 adults

Food allergies are caused by the immune system falsely recognising the protein component of a food as a threat. Most food allergy reactions occur quickly; generally within 2 hours of exposure. Although eczema and gut related symptoms (such as diarrhoea or constipation) may take several hours or even a few days to develop.

Children are most likely to develop a food allergy when they are under 5 years of age

Usually the allergy is not severe and will disappear over time. Reactions to cow's milk, eggs, peanuts, and tree nuts are common triggers in children, whilst soy, sesame, wheat, and fish are less common. Allergies to nuts, seeds and seafood commonly produce the most severe reactions and are more likely to be the allergies that persist for life.

Severe reactions are known as anaphylaxis

A child who is outgrowing an allergy may start tolerating small amounts of their food allergen, particularly if the product has been well cooked (for example a child with a cow's milk allergy may tolerate small amounts of milk in a biscuit, but still have a severe reaction to cow's milk provided in a cup). When managing a child who is "outgrowing" their allergy, seek **regular written updates** from the child's parents and health professionals who are managing the child's allergy. If there is any doubt about what the child can tolerate the best strategy is still to avoid all forms of the food allergen.

The symptoms of food allergy can vary. They typically include hives (urticaria), swelling around the mouth, and vomiting, usually within 30 minutes of eating a food. Other symptoms include a runny or blocked nose, stomach pains, and diarrhoea.

Small numbers of allergic children will develop **anaphylaxis**: a severe life threatening reaction which requires special management in an early childhood setting. Once a food allergy is diagnosed the current advice is to avoid all exposure to the food allergen. This minimises discomfort and prevents serious allergic reactions.

Anaphylaxis can be life-threatening

Symptoms of anaphylaxis involve the breathing and circulatory systems and may include any of the following: difficult/noisy breathing, swelling of tongue, swelling/tightness in throat, difficulty talking/hoarse voice, wheeze or persistent cough, dizziness, loss of consciousness and/or collapse, and young children looking pale and becoming floppy.

It is important to know that an anaphylactic reaction may potentially occur for the first time in any allergic child, thus food allergies, especially those that cause swelling or breathing difficulty, should always be managed as the potential cause of anaphylaxis.



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The Australasian Society of Clinical Immunology and Allergy (<u>www.allergy.org.au</u>) has some general feeding advice regarding allergy prevention and more detailed advice for children diagnosed with allergy or intolerance

WHAT IS FOOD INTOLERANCE?

Food intolerance is a reaction to food that does not involve the immune system. There are various theories as to why food intolerance occurs. The team at Royal Prince Alfred (RPA) Allergy Unit have identified that intolerances are triggered by food chemicals which cause reactions by irritating nerve endings in different parts of the body, similar to the way certain drugs can cause side-effects in sensitive people.

Common symptoms in children include recurrent hives and swellings, rhinitis or sinusitis (frequently running or stuffy nose), recurrent mouth ulcers, stomach pains and bowel irritations (loose, frequent, often very smelly stools or even constipation). Children with food intolerances may also present as irritable, restless or demonstrate behavioural problems such as defiance, exaggerated moodiness or even Attention Deficit Hyperactivity Disorder (ADHD) like behaviour.

Food Chemical	Where it may be found in large amounts
Amines	 Processed, aged or smoked meats Seafood (except very fresh versions) Pork Poultry skin Most cheeses Soy sauce Yoghurt Gravies Sauces Commercial stock Vinegar Yeast extracts Chocolate Cocoa Nuts and seeds Most brightly coloured, well ripened fruit and vegetables such as spinach, broccoli, tomatoes, citrus fruit and dried fruit Leftovers containing protein or amine rich foods (unless immediately frozen after cooking)

The food chemicals known to be responsible in causing food intolerances include:



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Salicylates	Processed meats
	Vinegar
	• Sauces
	Yeast extracts
	 Juices – made from high salicylate fruit and vegetables
	 Nuts – not cashews
	 Seeds and their oils
	 Most brightly coloured fruit and vegetables
	 Salicylates tend to be concentrated just under the skin of fruit and vegetables and are much higher in under-ripe fruit
	 Amines tend to increase as the fruit ripens whilst the salicylate content decreases
	 Corn cereals and products (except corn flour)
	 Most herbs and spices, mint products, fruit flavoured products, honey and jams
	 Often present in fragrant or strong smelling cleaning and laundry products, toiletries, medications and oils (e.g. lavender, eucalyptus, tea tree oil)
	Processed and seasoned meats and poultry
Glutamates	• Cheese
	Fermented sauces
	Gravies
	• Stock
	Yeast extracts
	Tomato products
	Mushrooms
	 Spinach
	Broccoli
	Grapes and dried grape products
	Plums and prunes



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There are currently around 50 of 400 approved food additives that have been identified as a possible cause of reactions in sensitive people.
Some but not all preservatives, artificial colours, and flavouring may cause problems.
In general, food additives which are included to improve a product's market appeal (i.e. brighter colours, extra taste, longer shelf life) are usually the ones that cause reactions in sensitive people.
Food additives identified as being a possible cause of food reactions in sensitive people include:
Flavour enhancers: monosodium glutamate (MSG) and similar compounds 620-623, 627, 635
Food Colourings: tartrazine 102, yellow 107, sunset yellow 110, cochineal 120, red 122-129, blue 131, 132, green 142, black 151, brown 154,155, annatto extract 160b
Preservatives: antioxidants 310-312, 319-321, benzoates 210-218, nitrates 249-252, propionates 280-283 sulphites 220-228, sorbates 200-203

Food intolerance can be difficult to diagnose as the type of food chemicals involved in causing reactions are found in a wide range of foods – both natural and processed, plus the onset of symptoms may take hours if not a few days to occur. Babies and very young children may be sensitive to food chemicals as their gastrointestinal and nervous systems are still developing. Affected individuals may vary in their level of sensitivity to food chemicals. This is known as the "threshold level" response.

Symptoms usually only occur after the level of food chemicals build up to the point where they exceed the person's "threshold response". Some people may consume several foods per day with moderate levels of food chemicals (in small amounts) and not develop a reaction. Other individuals are so sensitive that even a high intake of some foods considered low in certain food chemicals are not well tolerated. Very sensitive individuals may react to the smell of cleaning products, perfumes or toiletries. Caution should always be applied when giving medication, insect repellents or highly scented products to food intolerant children – seek advice from the child's carers and/or health professional regarding each product.

For more information for parents and careers, Food Foundations recommends you visit:

The Royal Prince Alfred Allergies Website http://www.sswahs.nsw.gov.au/rpa/allergy/default.html

The Australasian Society of Clinical Immunology and Allergy www.allergy.org.au

Or the Queensland health website http://access.health.qld.gov.au/hid/AccidentsInjuriesandPoisonings/AllergicReactions/foodAller gy_is.asp



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