Information on Common Food Allergies

The following eight foods account for 90% of all food-allergic reactions:

- Milk
- Egg
- Peanut
- Tree nut (walnut, cashew, etc.)
- Fish
- Shellfish
- Soy
- Wheat

In adults, the most common foods to cause allergic reactions include: shellfish such as shrimp, crayfish, lobster, and crab; peanuts, a legume that is one of the chief foods to cause severe anaphylaxis, a sudden drop in blood pressure that can be fatal if not treated quickly; tree nuts such as walnuts; fish; and eggs.

In children, the pattern is somewhat different. The most common food allergens that cause problems in children are eggs, milk, peanuts, soy, and wheat. Adults usually do not lose their allergies, but children can sometimes outgrow them. Children are more likely to outgrow allergies to milk or soy than allergies to peanuts, fish, or shrimp.

The foods that adults or children react to are those foods they eat often. In Japan, for example, rice allergy is more frequent. In Scandinavia, codfish allergy is more common.

**Symptoms** of a food allergy can include wheezing and difficulty breathing, itchy skin rashes, including hives, vomiting, diarrhea, nausea, abdominal pain and swelling around his mouth and in his throat. These symptoms usually develop fairly quickly after your child ingests the food he is allergic to, often within minutes to hours. Nasal symptoms by themselves, such as congestion or a runny nose, are usually not caused by food allergies.

Symptoms may be mild or very severe, depending on how much of the food your child ingested and how allergic he is to the food. A severe reaction can include anaphylaxis, with difficulty breathing, swelling in the mouth and throat, decreased blood pressure, shock and even death.

More common than food allergies are intolerances to certain foods, which can cause vomiting, diarrhea, spitting up, and skin rashes. An example of such a reaction occurs in children with lactose intolerance, which occurs because of a deficiency of the enzyme lactase, which normally breaks down the sugar lactose. Children without this enzyme or who have a decreased amount of the enzyme, develop symptoms after drinking lactose containing food products, such as cow's milk. However, because this reaction does not involve the immune system, it is not a real food allergy.

Once you determine what your child is allergic to, it is important to learn to read **food labels** because the food your child is allergic to may be an ingredient of many other foods. You should also avoid eating foods that may have been prepared using equipment that was also used to prepare the types of food that your child is allergic to.

When trying to determine what your child is allergic to, parents often incorrectly assume that if he has eaten a food before and not had problems, then he probably is not allergic to that food. They usually only suspect new foods as being able to cause a food allergy. However, it is important to keep in mind that it takes time for the immune system to build up a reaction against something that the body is allergic to. It may take days, weeks, months or even years to build up enough of a response to cause noticeable symptoms. So your child may be allergic to a food even if he has eaten it many times before without problems.
1 in 13 U.S. Children Suffer from Food Allergies, Study Finds

Largest Food Allergy Study to Date Finds Food Allergies Are Increasingly Prevalent and Severe

NEW YORK, June 20, 2011 /PRNewswire-USNewswire/ -- According to a national survey of more than 38,000 families, 8 percent of children in the United States suffer from a food allergy -- a considerably higher number than reported in previous studies. In addition to estimating that 5.9 million children under age 18 now have a food allergy, the new study, published in the July issue of Pediatrics, the journal of the American Academy of Pediatrics, found that nearly 39 percent of the youngsters surveyed had a severe or life-threatening allergy, and that more than 30 percent had multiple food allergies. Consistent with previous research, the study, funded by the Food Allergy Initiative (FAI), reported that children with a tree nut or peanut allergy tend to have the most severe reactions.

"This is the largest study ever conducted on the prevalence of food allergy in U.S. children and it differs from previous studies in important ways," said the principal investigator, Ruchi S. Gupta, M.D., MPH, a pediatrician at Children's Memorial Hospital and assistant professor of pediatrics at Northwestern University Feinberg School of Medicine in Chicago. "Our goal was to paint a comprehensive picture of childhood food allergy in America. We began by surveying a representative sample of children in the U.S. and collected extensive information on each and every food allergy reported -- including date of onset, method of diagnosis, and reaction history." Data on race and ethnicity, gender, socioeconomic status, and geographic region were also collected.

"This study confirms what so many families already know: food allergy is a large and growing public health problem," said Mary Jane Marchisotto, executive director, FAI. "In 2008, the Centers for Disease Control estimated that food allergies affected 1 in 25 children; now it's 1 in 13. That translates into 2 children in every classroom. It is especially disturbing to see how many of these children have multiple food allergies and have already experienced life-threatening reactions. From previous research, we know that food-allergic reactions send an adult or child to the emergency room every three minutes—every six minutes for potentially fatal reactions. Every day, we hear from families who are struggling with the emotional, physical, and economic impact of food allergies. That's why FAI is committed to accelerating the pace of clinical trials that will lead to new therapies and, ultimately, a cure."

For more information, please visit www.faiusa.org/PrevalenceStudy2011.

About Food Allergies

Food allergies affect approximately 12 million Americans. Eight foods are responsible for 90 percent of all reactions: peanut, tree nut, milk, egg, fish, shellfish, soy, and wheat. Although food allergies appear to be on the rise in developed countries worldwide, researchers do not yet know the reason why. One common theory is the hygiene hypothesis, which posits that excessive hygiene is responsible for the increase of allergies and other immune-mediated diseases. The theory suggests that since we are no longer exposed to many bacteria, viruses and parasites, our immune system targets harmless substances, such as food proteins, instead. There is no cure for food allergies, and no medication can prevent anaphylaxis, a potentially life-threatening reaction. Strict avoidance of problem foods remains the only way to prevent a reaction.

About FAI

The Food Allergy Initiative (FAI) was founded in 1998 by concerned parents and grandparents. FAI's goal is to fund research that seeks a cure; to improve diagnosis and treatment; to increase federal funding of food allergy research and create safer environments through advocacy; and to raise awareness through education. The largest private source of funding for food allergy research in the United States, FAI has committed more than $75 million toward the fulfillment of its mission. FAI is headquartered in New York, with an office in the Chicago area and an active volunteer committee in the Northwest, and enjoys strong relationships with food allergy support groups and advocates throughout the country. A national 501(c)(3) nonprofit organization, FAI is supported solely by donations from dedicated individuals, corporations, and foundations.

SOURCE Food Allergy Initiative
http://www.foodallergyinitiative.org