Peanut Allergies

The prevalence of peanut allergies in adults residing in the United States is estimated to be 1.8%. Peanuts are one of the most dangerous food allergies and can cause severe reactions. Peanut allergies account for the largest number of allergy-related deaths and the greatest incidence of anaphylaxis (a serious allergic reaction that can cause death). For some individuals, trace amounts of peanuts can cause a severe reaction. Non-ingestion contact (such as touching peanuts or inhaling peanut particles) is less likely to trigger severe reactions compared with ingestion contact. Even so, extreme caution should always be used because proximity to peanuts increases the opportunity for ingestion.

What are the symptoms of an allergic reaction?

Knowing the symptoms of an allergic reaction can save a participant’s life. One or more allergic symptoms can occur and can be mild to severe. Symptoms can happen within a few minutes or up to a few hours after the food allergen is eaten. Participants can display different symptoms, even if they have the same allergy (e.g., one participant with a peanut allergy may have trouble breathing when exposed to peanuts while a different participant with a peanut allergy gets hives after consuming it). Each time a participant has a reaction, the symptoms may be different.

It is also important to know the symptoms of an allergic reaction as there is a possibility that a participant may have a reaction yet not have a known food allergy. As shown in the following chart, the Food Allergy Research and Education (FARE) organization details how a variety of symptoms can appear in the body.

<table>
<thead>
<tr>
<th>Mild Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Gut: mild nausea or discomfort (stomach pain, abdominal cramping)</td>
</tr>
<tr>
<td>• Mouth: itchy; odd taste; slight, dry cough</td>
</tr>
<tr>
<td>• Nose: itchy, runny nose; sneezing; congestion</td>
</tr>
<tr>
<td>• Skin: a few hives (reddish, swollen, itchy areas on the skin), mild itch (sometimes in the ear canal)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Severe Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Body: lightheadedness, fainting or loss of consciousness, anaphylaxis</td>
</tr>
<tr>
<td>• Gut: repetitive vomiting or severe diarrhea</td>
</tr>
<tr>
<td>• Heart: pale, turning blue, faint, weak or “thready” pulse, dizziness, chest pain, drop in blood pressure</td>
</tr>
<tr>
<td>• Lung: shortness of breath, wheezing, repetitive cough, difficulty breathing</td>
</tr>
<tr>
<td>• Mouth: significant swelling of the tongue or lips</td>
</tr>
<tr>
<td>• Psychological: feeling something bad is about to happen, sense of impending doom, anxiety, confusion, feeling weak</td>
</tr>
<tr>
<td>• Skin: many hives over the body, widespread redness, eczema</td>
</tr>
<tr>
<td>• Throat: tight, hoarse, trouble breathing/swallowing, swelling</td>
</tr>
</tbody>
</table>
What is anaphylaxis?

Anaphylaxis is a severe allergic reaction with a rapid onset that may cause difficulty breathing and death. It may disrupt breathing and blood circulation. An anaphylactic reaction usually occurs within minutes of being exposed to an allergen, but in some rare instances, it can occur a couple of hours later. Symptoms of anaphylaxis include:

- Difficulty breathing, constriction of airways, tightness of the throat, hoarse voice
- Drop in blood pressure (e.g., pale, weak pulse, confusion, dizziness, fainting, weakness, loss of consciousness)
- Feeling of doom
- Gastrointestinal symptoms (e.g., abdominal pain, nausea, vomiting, diarrhea, cramping)
- Rapid pulse, cardiac arrest
- Shock (i.e., drop in blood pressure and narrowing of airways)
- Skin symptoms (e.g., hives, swelling)
- Swollen lips

What foods contain peanuts?

There are many unexpected sources of peanuts, so reading the ingredient lists on food labels is important to reduce exposure. Always read the ingredients, check for allergen information, and consider cross-contact before serving any food to a participant with a food allergy. The following chart lists items that could contain peanuts and should be avoided.
**Peanuts and Peanut-based Products**

- Artificial nuts (e.g., deflavored peanuts that are reflavored with pecan, walnut, or almond)
- Beer nuts
- Mandelonas (peanuts soaked in almond flavoring)
- Mixed nuts
- Nut meat
- Nut pieces
- Peanuts (goobers, groundnuts, monkey nuts)
- Peanut butter/paste
- Peanut butter chips
- Peanut flour
- Peanut oil* (cold-pressed, expressed, or expelled); Arachis oil, Arachis, Arachis hypogaea
- Peanut protein hydrolysate
- Peanut sauce
- Peanut syrup
- Powdered peanut butter

**Dishes, Foods, and Products That May Contain Peanuts**

- Baked goods (e.g., brownies, cakes, cookies, muffins)
- Breading
- Breakfast/cereal bars
- Breakfast cereals
- Candies, candy bars, chocolates
- Chili (thickened with peanut butter)
- Crumb topping
- Egg rolls
- Enchilada sauce (thickened with peanut butter)
- Energy/protein bars
- Flavored coffees, creamers, and syrups
- Frozen yogurt and ice cream
- Glazes and marinades
- Gluten-free products
- Graham cracker crust
- Granola bars
- Gravies
- Hot chocolate
- Hydrolyzed plant protein
- Hydrolyzed vegetable protein
- Lupin/lupine (lupin and peanuts belong to the legume family; known cross-reactivity; common flour substitute for gluten-free food)
- Marzipan
- Nougat
- Pancakes
- Pesto
- Potato pancakes
- Pudding
- Salad dressing
- Sauces (e.g., chili sauce, enchilada sauce, gravy, hot sauce, mole sauce, pesto, and spaghetti sauce,)
- Specialty pizzas
- Trail mix
- Vegetarian food products, especially those advertised as meat substitutes

*Highly refined peanut oil is not required to be labeled as an allergen. It has been shown to be safe for the majority of people allergic to peanuts. Peanut oils that are cold-pressed, expelled, or extruded may contain peanut particles and are, therefore, NOT safe for use. Check with the State licensed healthcare professional about whether or not peanut oil is safe for a participant with a peanut allergy.*
Many items may not contain peanuts but may be produced in a facility where peanuts are processed or used as an ingredient. As a result, cross-contact with peanuts may occur. Do not give food that is labeled as being produced or manufactured in a facility with peanuts to a participant with a peanut allergy. Some food items that may be produced in facilities that also handle peanuts include:

- Alternative nut butter (e.g., soy nut and sunflower)
- Breakfast bars, cereal bars, and granola bars
- Sunflower seeds

Where is peanut located on food labels?

Food labels that are regulated by the U.S. Food and Drug Administration (FDA) follow the regulations of the Food Allergen Labeling and Consumer Protection Act (FALCPA). FALCPA requires that the major eight food allergens be listed on the label in one of three ways in the ingredient list: (1) using the common name, (2) common name written in parenthesis after the ingredient, or (3) in a “contains” statement. In 2021, the Food Allergy Safety, Treatment, Education, and Research Act (FASTER) was passed into law. This act expands what is considered a major allergen that has to be declared on a food label from eight to nine by adding sesame as a major allergen. This law will take effect in January 2023, but manufacturers may begin incorporating sesame as a major allergen in the ingredient lists of their food labels before this date.

How granola bars that contain peanuts could be labeled in the ingredient list in different ways is shown in the following examples (bold is used for illustrative purposes only):

<table>
<thead>
<tr>
<th>Label 1</th>
<th>Label 2</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INGREDIENTS:</strong> Roasted peanuts, high maltose corn syrup, sugar, dark chocolate chunks (chocolate liquor, sugar, soy lecithin, natural flavor), whole grain oats, high fructose corn syrup, rice flour, palm kernel oil, fructose, canola oil, nonfat milk, salt, peanut butter (peanuts, salt), whey, baking soda, malt</td>
<td><strong>INGREDIENTS:</strong> Roasted peanuts, high maltose corn syrup, sugar, dark chocolate chunks (chocolate liquor, sugar, soy lecithin, natural flavor), whole grain oats, high fructose corn syrup, rice flour, palm kernel oil, fructose, canola oil, nonfat milk, salt, peanut butter (peanuts, salt), whey, baking soda, malt</td>
</tr>
<tr>
<td>Contains: <strong>Peanuts</strong>, Milk, Almond, Wheat, and Soy</td>
<td></td>
</tr>
</tbody>
</table>
Labels should also be checked for warnings such as “may contain peanuts,” “produced on shared equipment with peanuts,” or “produced in a plant that uses peanuts in other products.” Foods with these advisory statements should be avoided as the product may contain a small amount of peanut through cross-contact.

For example, egg rolls may or may not contain peanuts depending on the recipe. Different recipes may be made on the same production line. An egg roll product could be labeled like below (bold is used for illustrative purposes only):

**INGREDIENTS:** Wrapper ingredients
– Enriched wheat flour, water, salt, rice vinegar, eggs, cornstarch, vegetable oil

Filling ingredients – Chicken, cabbage, carrots, onions, cornstarch, soy sauce, sesame oil, spices

Contains: Wheat, eggs, soy, sesame

**Produced on equipment that also produces peanuts**

USDA-regulated foods, namely meat, poultry, and egg products are not required to follow FALCPA labeling regulations but may do so voluntarily. Only common or usual names of the ingredients are required to be identified on these labels.

How should adult day care employees check and manage food labels?

Adult day care sites have a variety of procedures for preparing and serving food. All staff who prepare and serve food should be trained to read product labels and recognize food allergens in the ingredient list. Because food labels change from time to time, adult day care staff should check labels for peanut and peanut ingredients for every product each time it is received. If the label does not provide clear information, then the manufacturer must be contacted for clarification or a different product should be used. The Centers for Disease Control and Prevention (CDC) recommends that food labels for every product that is served to a participant with food allergies be kept for a minimum of 24 hours afterward in case of a reaction. If the product is saved for later use as leftovers, keep labels for 24 hours after all product has been served or discarded.
What documentation is needed to make substitutions for participant meals?

When menu substitutions or modifications for a participant with food allergies are outside of the the Child and Adult Care Food Program (CACFP) meal pattern, a medical statement from a State licensed healthcare professional, such as general practice physician, registered nurse, or allergist, is required. Refer to the Modifications to Accommodate Disabilities in the Child and Adult Care Food Program and Summer Food Service Program on the USDA website for information on the required content of the medical statement. Adult day care sites can also contact their State agencies and sponsors for information. For more information about what is required in the medical statement, refer to ICN’s Adult Day Care Food Allergy Fact Sheet – Common Questions: Adult Day Care Directors.

If there is uncertainty about the medical statement, or if it does not provide enough information, contact the State licensed healthcare professional (as permitted by the participating adult, family, caregiver, or guardian) for clarification. However, the adult day care staff should not delay in providing a meal modification and a safe environment (i.e., prevent exposure to known allergens) while awaiting clarification of the medical statement. Staff should follow the portion of the medical statement that is clear and unambiguous to the greatest extent possible while obtaining the additional information or amended statement.

What substitutes can be used for peanuts in participant meals?

When planning menus for a participant with peanut allergies, consider current food choices offered to determine if a reimbursable meal can be selected from foods offered that do not contain peanuts. This approach will minimize the need to prepare special recipes or to make menu substitutions. Adult day care staff should always carefully read ingredient lists, even for foods that generally do not contain peanuts. The following chart lists common menu items that may be used as safe alternatives to items that contain peanuts.

<table>
<thead>
<tr>
<th>Menu Items That May Contain Peanuts*</th>
<th>Possible Substitutes*†</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast cereals</td>
<td>Breakfast cereals without peanuts</td>
</tr>
<tr>
<td>Mixed dish containing peanuts or peanut butter</td>
<td>Mixed dish without peanuts or peanut butter</td>
</tr>
<tr>
<td>Peanut butter</td>
<td>Almond butter, cashew nut butter, sesame seed butter, soy nut butter, sunflower seed butter</td>
</tr>
</tbody>
</table>

*All meals claimed for reimbursement must meet the Child and Adult Care Food Program (CACFP) meal pattern requirements. Please visit https://www.fns.usda.gov/cacfp/meals-and-snacks for more information.

†Always review the ingredient list on a food label to verify ingredients and check for possible cross-contact (look for advisory statements or contact manufacturer).
**Peanut Allergies**

**What is a good shelf-stable alternative to a peanut butter sandwich?**

One option may be to substitute the peanut butter with soy or sunflower seed butters (please see the question on nut and seed butters). A few other options include a canned or packaged tuna or chicken, hummus or bean dip with whole wheat pita bread, or a pre-cooked meal carried in a cooler with temperature control.

**Can a person with a peanut allergy consume tree nuts (e.g., almonds, walnuts, pecans, etc.)?**

It depends on the participant. About 30% to 40% of people with peanut allergies are also allergic to tree nuts, so allergists may recommend that people with peanut allergies also avoid tree nuts. However, some participants may only be allergic to peanuts and be able to eat other allergens. If there are questions for a particular participant, refer to that participant’s medical statement or request clarification from their State licensed healthcare professional with the participant, caregiver, guardian, or family’s consent. Additionally, the incidence of cross-contact between peanuts and tree nuts during the manufacturing process is high so always check ingredient lists for suspected allergens.

**Can seed butters (e.g., sunflower seed butter) be substituted for peanut butter?**

It depends on the participant. Many seed butters are produced on equipment used to process peanut butter making it a risky alternative unless the manufacturer specifies that the item is peanut-free. Check with the manufacturer to determine if the food product may contain peanuts. Also, check the participant’s medical statement for other known allergens such as a seed allergy. If further clarification is needed, contact the State licensed healthcare professional with the participant, caregiver, guardian, or family’s consent.

**How should an adult day care address a request for a peanut-free environment?**

An adult care site’s food allergy policy should be based on consensus from all appropriate stakeholders. Reasonable modifications need to be taken if there are participants with a peanut allergy, including discouraging food sharing, encouraging handwashing, and providing supervision during mealtimes to prevent accidental ingestion of allergens, which is the most dangerous type of exposure. The request should be referred to the site’s administrator.

Universal exclusion of specific foods (for example, peanuts) for an entire adult day care site is not a U.S. Department of Agriculture, Food and Nutrition Service (USDA, FNS) policy, but it could be appropriate depending on local circumstances. As a best practice, experts recommend placing a greater emphasis on educating the adult care staff and raising awareness about food allergies, rather than banning a specific food. A site may not be able to guarantee that a food allergen cannot accidentally enter a building, but they may be able to have an allergen-free table for a participant to eat at safely.
Can a person with a peanut allergy ingest peanut oil?

It depends on the participant. Highly processed peanut oil has been shown to be safe for the vast majority of individuals allergic to peanuts. However, peanut oils that are “cold-pressed,” “expelled,” or “extruded” may contain peanut particles and are NOT safe for use. Refer to that participant’s medical statement or request clarification from their State licensed healthcare professional about whether or not peanut oil is safe for the individual with a peanut allergy.

References


Food Allergy Research & Education. (2021, April 23). With the stroke of President Biden’s pen, FASTER Act for sesame labeling becomes law. https://www.foodallergy.org/media-room/stroke-president-bidens-pen-faster-act-sesame-labeling-becomes-law


Adult Day Care Food Allergy Fact Sheet

Peanut Allergies


For More Information

Food Allergy Research & Education
www.foodallergy.org

Institute of Child Nutrition
www.theicn.org/foodsafety

U.S. Food and Drug Administration
*Food Allergens*
www.fda.gov/Food/IngredientsPackagingLabeling/FoodAllergens/default.htm
This project was funded using U.S. Department of Agriculture grant funds.

The USDA is an equal opportunity provider, employer, and lender.

The University of Mississippi is an EEO/AA/Title VI/Title IX/Section 504/ADA/ADEA employer.

For the nondiscrimination statement in other languages: https://www.fns.usda.gov/cr/fns-nondiscrimination-statement

Except as provided below, you may freely use the text and information contained in this document for non-profit or educational use with no cost to the participant for the training providing the following credit is included. These materials may not be incorporated into other websites or textbooks and may not be sold.

Suggested Reference Citation:


University, MS: Author.

The photographs and images in this document may be owned by third parties and used by the University of Mississippi under a licensing agreement. The University cannot, therefore, grant permission to use these images. Please contact helpdesk@theicn.org for more information.

© 2021, Institute of Child Nutrition, The University of Mississippi, School of Applied Sciences

09/09/2021