

Responding to Food Allergy Emergencies

According to the Food Allergy Research and Education (FARE) organization, about 1 in every 13 children have a food allergy. Younger children are at the highest risk of having an allergic reaction. Of all allergic reactions that have happened at schools, FARE states that 60% of these allergic reactions happened at child care and preschool facilities. Family child care providers need to be able to recognize symptoms of a reaction so they can respond appropriately and quickly. This fact sheet will discuss the symptoms of a food allergy reaction and how to respond to a food allergy emergency.

What is a food allergy?

A food allergy is when the body mistakenly reacts to the protein of a certain food or ingredient as if it were harmful. The food protein that causes the reaction is called an allergen. A State licensed healthcare professional, such as a general practice physician, registered nurse, or allergist can diagnose food allergies by using a variety of tests.

How should a family child care provider plan for an allergic reaction?

It is vital that family child care providers have a food allergy plan in place for a child with food allergies. This plan should include documentation from the State licensed healthcare professional including the child's medical statement and emergency care plan. FARE provides the *Food Allergy & Anaphylaxis Emergency Care Plan* which can be used by a family child care provider, along with the parents/guardians and a State licensed healthcare professional and includes emergency care plan for a child. This plan is signed by the healthcare professional and includes emergency contact information, allergen(s), symptoms, and treatment instructions in an easy-to-follow format which is critical in a food allergy emergency. Information in this plan should be kept private but in a place where it can be retrieved easily in case of an emergency. Also, providers should ensure that they and others understand what to do in case of an emergency. It is important that providers receive approved training on administering an epinephrine auto-injector.

Visit https://www.foodallergy.org/living-food-allergies/food-allergy-essentials/food-allergyanaphylaxis-emergency-care-plan to download copies of the *FARE Food Allergy & Anaphylaxis Emergency Care Plan* in both English and Spanish.



How might a child show they are having an allergic reaction?

A young child may not know that they are having an allergic reaction or how to tell an adult that they are having one. Young children may say one of the following statements when having an allergic reaction:

- "This food is too spicy."
- "My tongue or mouth is hot (or burning, tingling, itching, etc.)."
- "My tongue or mouth feels full (or heavy or funny)."
- "It feels like something is poking my tongue."
- "My tongue feels like there is hair on it."
- "It feels like there is a bump on the back of my tongue (or throat)."
- "There's something stuck in my throat (or frog in my throat)."

- "My throat feels thick."
- "My lips feel tight."
- "It feels like there are bugs in there." (to describe itchy ears)
- "My eyes are burning (or itchy)."
- "My skin feels itchy."
- "My stomach (or tummy) hurts."
- "My chest is tight."
- "Something is wrong."
- "Something bad is happening."

A child may also show non-verbal signs of an allergic reaction including:

- Putting their hands in their mouth
- Pulling or scratching at their tongue
- Slurring their words
- Their voice may change (for example, become hoarse or squeaky)

What are the symptoms of an allergic reaction?

Knowing the symptoms of an allergic reaction can save a child'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 allergen is eaten. Children can display different symptoms, even if they have the same allergy (such as one child with a peanut allergy may have trouble breathing when exposed to peanuts while a different child with a peanut allergy gets hives after consuming it). Each time a child has a reaction, the symptoms may be different.

It is also important to know the symptoms of an allergic reaction for a child that may have a reaction but does not have a known allergy. As shown in the following chart, FARE details how a variety of symptoms can appear in the body.

Mild Symptoms	Severe Symptoms
• Gut: mild nausea or discomfort (stomach pain, abdominal	• Body: lightheadedness, fainting or loss of consciousness, anaphylaxis
cramping)	Gut: repetitive vomiting or severe diarrhea
• Mouth: itchy; odd taste; slight, dry cough	• Heart: pale, turning blue, faint, weak or "thready" pulse, dizziness, chest pain, drop in blood pressure
• Nose: itchy, runny nose; sneezing; congestion	• Lung: shortness of breath, wheezing, repetitive cough, difficulty breathing
• Skin: a few hives (reddish, swollen, itchy areas on the skin), mild itch (sometimes in the ear canal)	• Mouth: significant swelling of the tongue or lips
	• Psychological: feeling something bad is about to happen, sense of impending doom, anxiety, confusion, feeling weak
	• Skin: many hives over the body, widespread redness, eczema
	• Throat: tight, hoarse, trouble breathing/ swallowing, swelling

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 (such as pale, weak pulse, confusion, dizziness, fainting, weakness, loss of consciousness)
- Feeling of doom
- Gastrointestinal symptoms (such as abdominal pain, nausea, vomiting, diarrhea, cramping)
- Rapid pulse, cardiac arrest
- Shock (such as drop in blood pressure and narrowing of airways)
- Skin symptoms (such as hives, swelling)
- Swollen lips

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What are the treatment methods for an allergic reaction?

Treatment for an allergic reaction for a child will be determined by the State licensed healthcare professional and written in the emergency care section of the child's food allergy plan. Include specific State rules and licensing regulations about how family child care providers can administer medicines in the food allergy plan. Follow the child's individual food allergy emergency care plan when responding to an allergic reaction. Providers cannot provide treatment outside of what is written in the plan. Treatments for an allergic reaction may include:



- Epinephrine (administered by an epinephrine auto-injector)
- Antihistamine
- Inhaler (bronchodilator)

Call 911 <u>immediately</u> if an anaphylactic reaction is suspected. If the child has an epinephrine auto-injector, administer the epinephrine. Up to 20% of people with food allergies have had a second reaction. The child will need to be transported to the hospital in an emergency vehicle so they can be monitored and receive further treatment if needed. Contact the child's parents/guardians as soon as possible.

What should a family child care provider do if a child with a food allergy complains of symptoms, but looks fine?

Take all complaints from a child with food allergies seriously. Follow the food allergy plan for that child and notify the parents/guardians.

How can an allergic reaction be avoided?

The best way to avoid a reaction is to avoid the foods that cause the allergy. Develop a system for checking ingredient labels carefully, preventing cross-contact during meals, and limiting how the child could have contact with the allergens, including in learning activities.

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