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Food Allergies

Food allergies are on the rise based on the recent report from the National Institute for Allergies and Infectious Disease (NAID) (1). Researchers estimate that 5% of children under five years old and 4% of all older children and adults suffer from one or more food allergies. Based on the questions I'm asked every day, I think the percentage may be even higher. The culprits? You name it: eggs, milk, peanuts, tree nuts, soy, wheat, shellfish, and fish are the most common.

NAID recently published new Guidelines for the Diagnosis and Management of Food Allergy (2) and they're extensive, as well they should be: they're geared toward physicians. It tells them how to diagnose and treat food allergies. The NAID hasn't put together a version for the layperson yet but have issued a document called "What You Should Know about the Food Allergy Guidelines" (3). In this message I'll give you questions to ask yourself in considering whether you or your child may have a food allergy. The questions are taken from the Guidelines, but I'm adding my comments to them.

How Do I Know if I Might Have a Food Allergy?

I think anyone would recognize anaphylactic shock; when your throat constricts and you can't breathe, you probably understand that something isn't right. That's the most extreme symptom of a food allergy. It scares parents when it happens to their children because it's life threatening. But most food allergies are not that extreme, and they don't all affect the respiratory system. Food allergies can affect the skin, eyes, upper and lower respiratory system, digestive system from the mouth and tongue to the large intestine, the heart and cardiovascular system. Then there are also non-specific symptoms—feelings of impending doom were listed in the Guidelines—as if this issue weren't slippery enough already.

When the symptoms are subtle, it can be difficult to associate the symptom with a food. Could your toddler's runny nose or loose stool be caused by a food allergy? Yes—or by a million other things. To help you narrow it down, there are questions you can ask yourself or your child: the following list of recommended questions from the Guidelines that doctors should ask patients about potential food allergies. I think if you or your child is having an issue such as a runny nose when it's not allergy season or a skin issue such as atopic dermatitis, and you've eliminated other possibilities such as detergents and skincare products, you may have to look at the foods you eat for some answers.

Ask yourself or your child these questions:

What are the symptoms of concern? What's bothering you? Some symptoms are obvious but maybe you just don't feel as good as you'd like or you've developed a hoarse voice.

What food precipitates the symptoms, and has this food caused such symptoms more than once? This means you'll have to think back to what you ate and when you ate it in relation to when the symptoms developed. You may have to start keeping a journal of the foods you eat or keep track of your children's food intake.

What quantity of food was ingested when the symptoms occurred? Sometimes it's a volume thing; a little may be okay, but too much causes problems.

Was the food in a baked (extensively heated) or uncooked form? Cooking changes the chemical structure of some foods, especially proteins. Proteins are often the culprit when it comes to food allergies; they trigger the immune response.

When did symptoms occur in relation to exposure to a given food? This one is complicated because unless you relate cause and effect to the food, you're going to have to keep track of what you eat and may have to eat the same food again before you relate the events. If you have an omelet, it might not be the eggs that are causing your watery eyes; it might be the milk, bacon, ham, or other ingredients in the omelet.

Can the food ever be eaten without these symptoms occurring? Some people are allergic to shellfish but not the actual shell of the fish. That's why people who are allergic to the meat part of shrimp can use glucosamine made from the shell of the shrimp.

Were other factors involved, such as exercise, alcohol, or use of aspirin or NSAIDs such as aspirin or ibuprofen? Again, this can be tricky because it may happen only under certain conditions.

Have the symptoms been present at times other than after exposure to a given food? Again, this may be tough to work out. If you have seasonal allergies and you have the same response to strawberries, that can mask the food as the cause of the issue.

At this point, you may be confused or inspired—confused because these are issues you haven't associated with the foods you eat. You've thought the rash you had was probably the result of something you came in contact with on your skin; you didn't think it could be a food you've eaten. Or you're inspired because you now can see some hope. You may have had an issue for a long time, tried everything to deal with it, and felt frustrated. You now have something you can look at that may help you find the culprit.

Food Allergy versus Food Intolerance

I think this is important because people use the term food allergy incorrectly. If you're lactose intolerant, you've lost the ability to digest milk sugar. But while you might feel really lousy when you eat ice cream, you're not allergic to milk because it doesn't trigger an immune response—indigestion isn't an immune response. There are some people who are allergic to milk, whey protein, and anything that comes from milk. Remember, it's often the proteins in the food that causes allergies. That's why people who are gluten intolerant can't eat wheat products. Gluten is a wheat protein that some people can't digest. They're not allergic to it—they're just intolerant of it.

The Bottom Line

The typical treatment is to avoid the food and to have a plan in place in case there's inadvertent contact with the food. Anything further requires that you work with your physician. There's limited research that children who were allergic to foods can outgrow them, as they can seasonal allergies, but that's nothing you want to play around with. Work with your doctor to find the solution for you and your children.

If you've had some issues that you couldn't explain, consider that it might be food allergies. The most important thing you can do is pay attention, and that food journal I've been urging you to use to help you lose weight will be an invaluable tool. You're looking for the relationship between the food you eat and the symptoms, so add the symptoms to your journal. It might take awhile, but you just might find what the issue is, and if you don't see a pattern, the allergist might. Then you can do something about it.

What are you prepared to do today?™

Dr. Chet

References:

1. J Allergy Clin Immunol. 2010; 126(6):S1-S58.
2. <http://www.niaid.nih.gov/topics/foodAllergy/clinical/Pages/default.aspx>
3. <http://www.niaid.nih.gov/topics/foodAllergy/clinical/Pages/patients.aspx>

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