



### Severe allergic reactions to food: Children and teens

#### What is a severe allergic reaction to a food?

An allergic reaction occurs when a person's immune system treats a protein (an allergen) in a food as harmful. Some children with food allergy are at risk of having a severe allergic reaction. A severe allergic reaction is very serious. It is also called anaphylaxis (an-nah-fil-axe-is). It often happens quickly and can cause death if not treated.

If you are not sure whether your child is at risk of a severe allergic reaction, ask your child's health care provider. Children and teens at risk of a severe allergic reaction should also see a pediatric allergist. If your child is at risk, ask your child's health care provider to write an *Anaphylaxis Emergency Plan* that explains what to do in case of an allergic reaction. To get a blank copy of an *Anaphylaxis Emergency Plan*, visit Canadian Society of Allergy and Clinical Immunology <a href="https://csaci.ca/patient-school-resources/">https://csaci.ca/patient-school-resources/</a>.

## What are the symptoms of a severe allergic reaction?

Symptoms of a severe allergic reaction can start within minutes of eating the food that triggers reactions. They will usually occur within 2 hours. While rare, symptoms can take up to a few hours to develop.

Symptoms can vary from person to person. The same person may experience some differences in their symptoms each time they have an allergic reaction. The most dangerous symptoms include difficulty breathing or a drop in blood pressure. Symptoms of anaphylaxis can include any of the following:

- Breathing: coughing, wheezing, shortness of breath, chest pain or tightness, throat tightness, hoarse voice, nasal congestion or hay fever-like symptoms (such as runny, itchy nose, watery eyes and sneezing), trouble swallowing
- Heart: signs of a drop in blood pressure like weak pulse, feeling faint, dizzy or lightheaded, passing out

- **Skin**: hives, swelling (tongue, lips or face), itching, warmth, redness, rash, pale or blue-coloured skin
- **Stomach**: nausea, vomiting, abdominal pain or diarrhea
- Other: anxiety, headache, metallic taste or uterine cramps

Children and teens that have asthma are at increased risk of breathing difficulties during a severe allergic reaction. If your child has asthma, make sure it is well controlled.

#### How is a severe allergic reaction treated?

When a severe allergic reaction begins, it is important to respond right away. Do not wait. Treat it right away with the medication called epinephrine (eh-puh-NEH-fren). Epinephrine will not cause harm to your child if it is given unnecessarily.

Epinephrine comes in a pre-loaded syringe called an auto-injector. Epinephrine helps reverse the symptoms of the allergic reaction and can save your child's life.

#### Steps for treating a severe allergic reaction

- Use the epinephrine auto-injector right away.
   Give the epinephrine into the muscle of the outer-mid thigh, through clothing if necessary
- 2. Call 9-1-1 or the local emergency number
- Lie your child down with their legs raised slightly.
   If they are nauseated or vomiting, lay them on their side. Do not make them sit or stand up. If they are having difficulty breathing, let them sit up
- 4. Do not leave your child alone
- 5. If your child's symptoms do not get better or get worse, give a second dose of epinephrine as soon as 5 minutes after the first dose
- 6. Ensure your child gets to a hospital

The above section has been adapted from: Anaphylaxis in Schools and Other Settings, Copyright 2005-2016 <u>Canadian Society of Allergy</u> <u>and Clinical Immunology</u>.

# What can I do to help my child with a severe food allergy stay safe?

Consider having your child wear MedicAlert® identification.

Always keep your child's epinephrine auto-injector with them. Carry it with you when you and your child are away from home.

Help your child avoid their food allergens. Eating even a very small amount can trigger a severe allergic reaction.

- Learn how to recognize your child's food allergens on food labels. For information, visit Canadian Food Inspection Agency www.inspection.gc.ca/food-labelrequirements/labelling/consumers/foodallergies/eng/1332442914456/1332442980290
- Encourage everyone to wash their hands before and after eating. Help young children to wash their hands
- Wash kitchen equipment and surfaces before preparing foods. Use clean dishes and utensils each time you serve a different food and clean all eating surfaces well after meals and snacks

# How can I prepare my child for school or child care?

- Give child care staff a copy of your child's Anaphylaxis Emergency Plan
- Provide written consent for staff to give your child epinephrine when needed. Do not sign anything that releases the facility of responsibility if epinephrine is not given
- Give staff an epinephrine auto-injector for your child. Ask that it be kept in a secure, unlocked place that is easy to access. Provide a new one before the expiry date
- Epinephrine auto-injectors are prescribed based on body weight. As your child grows, check with your child's health care provider to ensure you have the correct epinephrine auto-injector for their weight. For more information visit Canadian Paediatric Society

www.cps.ca/en/documents/position/emergencytreatment-anaphylaxis

• Update staff on your child's *Anaphylaxis Emergency Plan* as food allergies change

As your child matures, they can learn to take some responsibility for their safety. When your child is ready, teach them:

- To carry their own epinephrine auto-injector.
   Most can do this by 6 or 7 years of age. It should not be kept in a school locker
- How to give themselves epinephrine
- How to avoid their food allergens. When your child is very young you can teach them to talk to you before accepting food from others
- To avoid sharing eating utensils and napkins
- To avoid putting objects, such as pencils, in their mouth
- To tell someone if they think they are having an allergic reaction. To tell their friends about their food allergy and where they keep their epinephrine auto-injector

#### For more information

If you have questions about food allergies, call 8-1-1 to speak with a registered dietitian.

For more information about understanding and managing anaphylaxis, visit:

- Food Allergy Canada <a href="https://foodallergycanada.ca">https://foodallergycanada.ca</a>
- Why Risk It? www.whyriskit.ca/
- HealthLinkBC File #100c Allergy safe child care facilities
- Anaphylaxis in Schools and Other Settings
   <a href="https://csaci.ca/wp-content/uploads/2017/11/Anaphylaxis-in-Schools-Other-Settings-3rd-Edition-Revised a.pdf">https://csaci.ca/wp-content/uploads/2017/11/Anaphylaxis-in-Schools-Other-Settings-3rd-Edition-Revised a.pdf</a>(PDF 1.68 MB)

For more information on managing asthma, visit About Kids Health <a href="https://www.aboutkidshealth.ca/Article?contentid=1482&language=English">www.aboutkidshealth.ca/Article?contentid=1482&language=English</a>.

For more HealthLinkBC File topics, visit <a href="www.HealthLinkBC.ca/more/resources/healthlink-bc-files">www.HealthLinkBC.ca/more/resources/healthlink-bc-files</a> or your local public health unit. For non-emergency health information and advice in B.C. visit <a href="www.HealthLinkBC.ca">www.HealthLinkBC.ca</a> or call **8-1-1** (toll-free). For the deaf and hard of hearing, call **7-1-1**. Translation services are available in more than 130 languages on request.