

## FOOD ALLERGY in INFANTS and CHILDREN

- **Definition:**
  - Food allergies are IgE, non-IgE or mixed immune mediated hypersensitivity reactions.
- **Common food triggers:**
  - egg, cow's milk protein, soy, wheat, nuts (peanut and tree nuts), fish, shellfish, sesame.
- **Food allergy reaction patterns** may be broadly grouped into
  - **acute, potentially life threatening reactions**, occurring after **accidental** exposure to allergen.
  - **chronic allergic reactions**, due to **regular ingestion** of allergen, through breast milk, formula or solid diet includes progressively intensifying generalised eczema and gastrointestinal symptoms
- **Complications** of undiagnosed allergies (especially multiple foods or chronic allergen ingestion) include
  - anaphylaxis, significant QOL impacts, disordered feeding, failure to thrive, malabsorption and chronic inflammation
  - Infants commonly require **Allergy multidisciplinary support of nutrition** and may need **elemental formula**

### Information Required

- Description of symptoms including timeline.
- Previous anaphylaxis.
- Presence of any chronic skin, gastrointestinal and/or respiratory symptoms
- Indicate concerns re failure to thrive and feeding.
- Current weight and height (plus birth measurements for infants)
- List type of formula and solids already in diet

### Investigations Required

- Staple food mix and nut mix specific IgE have poor sensitivity and specificity (not recommended.)
- Failure to thrive investigations
  - (CBP, ECU, LFT incl Albumin, CaMgPhos, Immunoglobulins, Vitamin D, ESR, Fe studies, B12, folate, zinc)

### Fax to Allergy and Clinical Immunology Service - Ph: 8204 7483

Phone FMC Allergy/Clinical Immunology Registrar or Immunologist to gain initial PBS subsidised approval for elemental formula and Adrenaline Autoinjector (Epipen\*) Ph: 08204 7201

### Red Flags

Red flags should prompt immediate GP referral to **Emergency Department**

- 🚩 Anaphylaxis (please also refer to Anaphylaxis referral guidelines)
- 🚩 Food protein induced Enterocolitis Syndrome (FPIES)
- 🚩 Severe failure to thrive
- 🚩 Infected eczema with concerns about sepsis

### Suggested GP Management

- Early referral of infants with suspected food allergies
- Adrenaline autoinjector and Action plan for anaphylaxis and any suspected nut reactions
- Consider elemental formula for infants
- Influenza and yellow fever vaccinations may be contraindicated in some egg allergic children. Seek Specialist advice.
- Risk of vaccination reactions is not increased in food allergic children. Routine vaccinations should proceed

### Clinical Resources

- Australasian Society of Clinical Immunology (ASCIA) website <http://www.allergy.org.au/>
- ASCIA - Anaphylaxis Clinical Practice Guidelines <http://www.allergy.org.au/health-professionals/anaphylaxis-resources>

General Information to assist with referrals and the Referral templates for FMC are available to download from the SALHN Outpatient Services website [www.sahealth.sa.gov.au/SALHNOutpatients](http://www.sahealth.sa.gov.au/SALHNOutpatients)

Version	Date from	Date to	Amendment
1.0	September 2014	September 2016	Original
2.0	October 2018	October 2021	Revised – No Change Required