

“Peanut Allergy”

Last December, my fifteen-month-old daughter tasted a peanut butter cracker while we were enjoying story time at the bookstore. Within minutes she was unable to breathe well, vomited and broke out in hives. This article is dedicated to all the people who have supported our restricted lifestyle, given us invaluable information and inconvenienced themselves to keep Abbey safe.

Vital Statistics

- ~ Approximately three million Americans have peanut or tree nut allergies.
- ~ Food allergy is the leading cause of anaphylaxis (sudden allergic reaction that involves the respiratory system) and is responsible for up to 100-200 deaths each year.
- ~There is no cure for nut allergy.
- ~Only 20% of peanut allergic children will outgrow their allergy.
- ~Most reactions occur within the first half-hour of exposure to the allergen.

Peanuts are among the several allergens that can cause a person to die from the severe reaction. Much research is being done to find a cure, but in the meantime education is the key to avoiding life-threatening situations. Prevention is crucial to young children who have not been diagnosed with pa (peanut allergy). Because the allergy-causing proteins in peanuts are molecules that are very stable and able to resist the effects of food processing, cooking and the digestive process, the older a child is when he/she first tries peanuts, the better chance he/she will have of not becoming peanut allergic. Researchers have also discovered that peanut protein is secreted into breast milk, thus sensitizing the baby who is at risk for developing an allergy (a baby born into a family with allergies). Children under the age of five who have been diagnosed with pa have a better chance of outgrowing the allergy if their system is consistently free of the allergen. Some allergists recommend that a young pa child refrain from eating foods that contain similar food proteins to peanuts such as tree nuts (cashews, almonds, walnuts, etc.) and legumes.

Each day the pa child must be protected from any and all contact with peanut products both to prevent an attack and to build up his/her immunity. Since the home is the safe haven, it must be cleared of all allergens. That's quite a sacrifice for parents who love a pb & j sandwich, some trail mix and a snickers bar for lunch! If allergens are kept in the house, they cannot be in reach of the child or eaten in his/her presence. When parents do choose to indulge in peanuty treats while out without the little ones, they actually have to wash their hands and brush their teeth thoroughly prior to touching their pa child. Since children under five must be protected from all allergens in a hopeful, prayerful

possibility of outgrowing the allergy or lessening the allergy, foods that otherwise would be safe, but have come in contact with nuts must be avoided too. This means that bakery goods, ice cream and all foods made in factories where nuts are processed must not be eaten. No cupcakes (made in a bakery that makes walnut scones)! No cone of ice cream from an ice cream parlor (the ice cream scoop dips into the peanut butter swirl too)! No plain M&M's, candy corn or cheese crackers (all made in a factory that manufactures peanuts)! No cookie from a bake sale (no ingredient label)! Although ingesting the allergen is the most severe form of contamination, the pa child must also avoid mild forms of contamination such as smelling or touching. For example, the pa child cannot participate in playdoh fun with a friend who has just eaten handfuls of mixed nuts. The pa child cannot attend a holiday party where the craft is decorating peanut butter birdhouses even if he/she does not directly participate in the craft. Restaurants, birthday parties, day cares and playgroups are all potential hazards for the pa child.

As our society becomes more aware of the severity and prevalence of peanut allergies, people with pa will become safer and less restricted. For example, laws are currently being written to require companies to disclose on food package labels when foods have been made on shared equipment with the eight main food allergens (peanuts, tree nuts, fish, shellfish, eggs, milk, soy and wheat). In many states it is now mandatory for Emergency Medical Technicians to carry the life-saving epinephrine needed to treat an attack. Progress is being made to establish guidelines to help minimize the number of allergic reactions in schools and prevent future fatal reactions. As families learn to deal with the diagnosis of pa and the far reaching effects it will have on their children's lives, they learn quickly to depend on the assistance and cooperation of others and that the burden is much lighter when carried on many shoulders.

First published December 2001 in "The Duet", Bucks-Mont Mothers of Multiples. All rights reserved to the publication and the author.