

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/medical-industry-feature/the-management-of-food-allergy/14465/>

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The Management of Food Allergy

Announcer:

The U.S. guidelines for the management of food allergies have remained largely unchanged since 2011.¹ Preventative actions such as strict avoidance of food allergens, receiving education on food avoidance, and development of emergency plans in the event of an exposure, are considered first line.¹ However, the ubiquitous nature of food and the potential for cross contamination make avoidance strategies difficult.

In case of an exposure that leads to anaphylaxis, the guidelines recommend epinephrine intramuscular injection to be administered immediately after symptoms begin.^{1,2} Anaphylaxis is the most life-threatening symptom of food allergy, so early recognition is critical.¹ Patients tend to experience a sudden onset of illness with involvement of one or more of the following systems: cutaneous or mucosal tissue, respiratory, cardiovascular, or gastrointestinal. Symptom type and severity will vary per individual.³ Best practices for treating anaphylaxis include not delaying the administration of epinephrine, as doing so may be associated with higher morbidity and mortality.³

After diagnosis and treatment, all patients should be kept under observation until symptoms have fully resolved.³ Patients should receive education and be involved in shared decision-making with their physicians and allergists in learning how to recognize and manage anaphylaxis.³ Returning to guidelines and managing non-severe food allergies, antihistamines should only be used as secondary treatment for itching and hives.^{1,4} Please refer to NIAID and EAACI guidelines for more information regarding treatment for severe versus non-severe reactions.

In addition to a guidelines-based practice, a multidisciplinary approach can enable the effective management of food allergies.⁵ Pediatricians and primary care physicians identify food allergens using medical histories, and often refer to allergists for specific testing. They provide support and education for ongoing management of acute reactions and anaphylaxis.^{6,7}

Allergists establish food allergy diagnoses using specific testing, such as coordinating and performing oral food challenges, or OFCs. They provide support and education for ongoing management of food avoidance and anaphylaxis.^{8,9} Finally, dietitians offer nutritional support to patients on restrictive diets and dietetic support during OFC and elimination diets. They also educate on allergen avoidance.¹⁰

Patients and their caregivers are at the center of the multidisciplinary approach. It is important that they are empowered to make decisions about their choices to help manage their disease.⁵ Look for additional resources on presentation and symptoms, diagnosis and testing, and barriers of food allergies.

References

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