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Air It Out – Electronic Version. Vol. 15, Issue 2, #1 February 2008

Asthma & Allergy Foundation of America, Texas Chapter, 9101 Quarter Horse Lane
Ft. Worth, TX 76123 817-297-3132 888-933-2232 info@aafatexas.org www.aafatexas.org

CAN YOU HELP THOSE AFFECTED BY LIFE THREATENING ALLERGIES?

* **Severe** food allergies can result in anaphylaxis, a life-threatening response to an allergic food.

* Some food allergy reactions might be mild while others might be so severe as to cause a life-threatening situation. The **most commonly allergic foods** are shell fish, fish, wheat, soy, eggs, milk, tree nuts and peanuts. Other foods or food additives can also cause a reaction severe enough to be life-threatening but the **most common serious reactions** occur to **peanuts, shell fish and fish. Anaphylaxis can also be provoked by insect stings or bites, latex and medications.**

* What can a child or adult with these severe allergies do? 1) They should see a physician to *identify their allergens* and then avoid them completely. Some food allergies are so severe that even smelling food residue or touching a minute amount of the allergic food will cause a life-threatening anaphylactic reaction. There is as yet no medication, no procedure other than complete avoidance of the allergic food or substance that can prevent an allergic reaction. 2) For those with severe allergies that could lead to anaphylaxis, day-to-day living is more complicated by the need to avoid allergens. *Be vigilant in avoiding* the allergic foods or other allergen. **Read food labels carefully** (products might change their recipes). It may be necessary to avoid certain restaurants; if you have a shell-fish allergy you wouldn't want to patronize a seafood restaurant. When eating out anywhere always ask the chef if there are "hidden" allergic ingredients in the menu, ingredients that creates a cross-contamination of food products (new labeling in prepared foods now requires this information). A suggestion is to carry 3x5 cards listing all personal food allergens to give to the kitchen staff at restaurants. Those with insect allergies should be alert to their outdoor environment, especially after heavy rains which cause fire ant mounds to appear; avoid bright clothing and perfumed products at outdoor events which might attract bees and wasps. Those with medication allergies must share this information not only with physicians but with pharmacies too -some products might include your allergen in their formula. If allergic to latex, ask medical providers not to use latex gloves or products near you. 3) Persons at risk for anaphylaxis should *carry an epinephrine device* such as Twinject or EpiPen at all times (it serves little purpose home in the medicine cabinet) and 4) *wear a medical alert ID bracelet or necklace* so others will know the cause of distress in an emergency and know how to help more quickly. Some examples of these are found on American Medical ID's website: www.IdentifyYourself.com/AAFATX

* But what if you or your children don't have serious allergies that can lead to death? **What can schools do** to help prevent a food allergy provoked death? **4 of 6 food allergy deaths occur in schools. What can you, the parents** of children with classmates and friends with severe allergies do to prevent an anaphylactic incident for those classmates? The answer focuses on compassion. The goal should be NOT to ostracize any child or adult with severe allergies which might lead to anaphylaxis, but to respond with understanding and compassion.

* **Schools:** 1 of every 150 children has a peanut allergy, many severe. It is impossible to measure the positive impact administrators, teachers and nurses can have on a food allergic child's life. That child can learn through the school that the world beyond their home is a safe and caring place. A best school policy is for schools to **become proactive** by adopting measures to ensure the safety of all children. Texas law allows a child, with parental and physician approval, to carry and administer their own anaphylactic treatment meds on campus or at school events. This is good, yet every school should still have a written plan for anaphylactic emergencies since many young children might not be able to inject the device in an emergency. The steps needed to keep food-allergic children safe are simple and in keeping with school core values such as good personal hygiene and valuing diversity. Teaching children to be thoughtful about their friends' safety and to refrain from bringing things to school that could harm their friends instills compassion for others and empowers children to see they can make a positive difference. Ask AAFA-TX for a free school guideline, permission forms to use emergency anaphylaxis meds on campus and anaphylaxis emergency procedures.

* **Parents:** Peanut butter is convenient and relatively cheap but not necessary for a healthy diet. For some children, smelling peanuts or touching a surface that has vestiges of peanut butter (cross contamination) can provoke an anaphylactic reaction. Parents can help by teaching their own children to be empathetic by not including peanut butter sandwiches or peanut treats in school lunches. If your child absolutely adores peanut butter, perhaps they could have it on weekends or after school, or they might try soy butter or SunButter, which is made from sunflower seeds, a powerful source of Vitamin E and also a good source of the B vitamins. String cheese, cheese cubes, turkey cold cuts are all quick and healthy lunch alternatives. Since many bakery products contain peanut oil or peanuts, wheat or egg, parents can also help protect food-allergic kids by not sending sweet treats (muffins, cookies, cakes, candies, etc) to school to celebrate special occasions. Celebrate, but instead of bakery or candies, send quirky pencils, stickers, etc. The cost is the same and there's an added benefit of helping build good eating habits and reducing childhood obesity. If your child's classmate or friend has severe allergies, ask AAFA-TX what to do in an emergency. **YOU can make a difference.**

Upcoming Free AAFA-TX Programs: 1) **Fri. Feb. 29**, 9 am-noon, "**Asthma Management & Education**" a CE program for nurses worth 3 contact hrs, Lake Highland HS, Richardson. 2) **Fri. Feb. 29**, 1-3 pm "**The Recognition & Treatment of Anaphylaxis**" a CE program for nurses worth 2 contact hrs, Lake Highland HS, Richardson, Eric Schmitt, MD, Instructor. Pre-registration required. 3) **NEW! Three Academic Scholarships** available for Texas high school students with asthma. **Application deadline: March 30, 2008.** For full details, criteria and application, please go to www.aafatexas.org For more information, contact AAFA-TX.

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