

FIRST AID TREATMENT FOR ANAPHYLAXIS

Anaphylaxis is a severe allergic reaction and potentially life threatening. It should always be treated as a medical emergency, requiring immediate treatment. Most cases of anaphylaxis occur after a person with a severe allergy is exposed to the allergen they are allergic to (usually a food, insect or medication).

MILD TO MODERATE ALLERGIC REACTION

In some cases, anaphylaxis is preceded by signs of a mild to moderate allergic reaction:

- Swelling of face, lips and eyes
- Hives or welts on the skin
- Tingling mouth
- Stomach pain, vomiting (these are signs of a mild to moderate allergic reaction to most allergens, however, in insect allergy these are signs of anaphylaxis).

ACTION

- For insect allergy, flick out the sting if it can be seen (but do not remove ticks)
- Stay with person and call for help
- Give medications if prescribed (whilst antihistamines may be used to treat mild to moderate allergic reactions, if these progress to anaphylaxis then adrenaline is the only suitable medication)
- Locate **adrenaline autoinjector** if available (instructions are included in the Action Plan for Anaphylaxis which should be stored with the adrenaline autoinjector)
- Contact parent/guardian or other emergency contact.

ANAPHYLAXIS (SEVERE ALLERGIC REACTION)

Continue to watch for any one of the following signs of anaphylaxis (severe allergic reaction):

- Difficult/noisy breathing
- Swelling of tongue
- Swelling/tightness in throat
- Difficulty talking and/or hoarse voice
- Wheeze or persistent cough
- Persistent dizziness or collapse
- Pale and floppy (in young children)

ACTION

- **Lay person flat - if breathing is difficult, allow to sit - do not allow them to stand or walk**
- **Give the adrenaline autoinjector** if available (instructions are included in the ASCIA Action Plan for Anaphylaxis, stored with the adrenaline autoinjector)
- **Call Ambulance** (Telephone 000 in Australia, 111 in New Zealand or 112 if using a mobile phone)
- Contact parent/guardian or other emergency contact
- Further adrenaline doses may be given (when an additional adrenaline autoinjector is available), if there is no response after 5 minutes.

If in doubt, give the adrenaline autoinjector.

Commence CPR at any time if person is unresponsive and not breathing normally.

If uncertain whether it is asthma or anaphylaxis, give adrenaline autoinjector FIRST, then asthma reliever.

- **Adrenaline is life saving and must be used promptly. Withholding or delaying the giving of adrenaline can result in deterioration and death.** This is why giving the adrenaline autoinjector is the first instruction on the ASCIA Action Plan for Anaphylaxis. If cardiopulmonary resuscitation (CPR) is given before this step there is a risk that adrenaline is delayed or not given.
- **In the ambulance** oxygen will usually be administered to the patient by paramedics.
- **Medical observation** of the patient in hospital for at least 4 hours is recommended after anaphylaxis.
- **Adrenaline autoinjectors** available in Australia and New Zealand are EpiPen and Anapen. The Junior versions of EpiPen and Anapen are generally prescribed for children aged 1 to 5 years.

Children with Food Allergies What Parents Need to Know



One in 13 kids
has a food allergy.

A **food allergy** occurs when the body's immune system sees a certain food as harmful and reacts by causing one or more symptoms. This is known as an allergic reaction.

Foods that cause allergic reactions are called **allergens**. Even a tiny amount of an allergen can cause a reaction. Allergic reactions usually occur after your child eats a food that she or he is allergic to.

Be Aware of Food Allergy Symptoms

The type of symptoms and their severity may vary from one reaction to the next. Sometimes allergy symptoms are mild. Other times, symptoms can be severe and result in a serious allergic reaction called **anaphylaxis** (anna-fih-LACK-sis). Anaphylaxis is an allergic emergency that can cause death.

An allergic reaction to a food can involve one or more symptoms of the skin, mouth, eyes, lungs, heart, gut, and brain. Some symptoms of an allergic reaction include:

- Skin rashes and itching and hives
- Swelling of the lips, tongue, or throat
- Shortness of breath, trouble breathing, wheezing (whistling sound during breathing)
- Dizziness and/or fainting
- Stomach pain, vomiting, and diarrhea
- Feeling like something awful is about to happen

Your child's doctor will give you a complete list of possible symptoms. This list of symptoms is also on your written food allergy emergency care plan (see next page).

Common Food Allergens

Foods reported to cause most food allergic reactions in the United States are:

- Eggs
- Milk
- Peanuts
- Tree nuts, such as walnuts
- Soy
- Wheat
- Shellfish, such as shrimp, crab, and lobster
- Fish

The most common food allergies in infants and children are eggs, milk, peanuts, tree nuts, soy and wheat.

Children may outgrow some allergies (egg, milk, and soy) but may be less likely to outgrow others (peanut, tree nut, fish, and shellfish).

Have a Doctor Confirm Your Child's Food Allergy

Your child's doctor will need to diagnose food allergy based on your child's symptoms, medical history, physical exam, and test results. The doctor may recommend your child see an allergy specialist to further diagnose and treat the allergy.

Be Prepared for Anaphylaxis

Work with your child's health care team on how to recognize the signs and symptoms of anaphylaxis and how to treat it. Here's how you can be prepared:

- Have a written food allergy emergency care plan, also called an anaphylaxis emergency action plan. Your child's doctor will give you this step-by-step plan on what to do in an emergency.
- Learn how to give your child epinephrine. It's the medicine of choice to treat an allergic reaction or anaphylaxis.
- Epinephrine is safe and comes in an easy-to-use device called an auto-injector. It injects a single dose of medicine when you press it against your child's outer thigh. Your child's health care team will show you how to use it.
- Always have two epinephrine auto-injectors near your child.
- Teach people who spend time with your child how to use the auto-injector device.
- Consider having your child wear or carry a medical alert bracelet to let others know of the allergy.

Know How to Treat Anaphylaxis

- 1 Follow the steps in your child's emergency care plan** to give your child epinephrine right away. This can save your child's life.
- 2 After giving epinephrine, always call 911** or a local ambulance service. Tell them that your child is having a serious allergic reaction and may need more epinephrine.
- 3 Your child needs to be taken to a hospital by ambulance.** Medical staff will watch your child closely for further reactions and treat him or her if needed.

FOR MORE INFORMATION

For more information about managing children's food allergies, please visit:

KidsWithFoodAllergies.org

Family education resources, food and cooking resources, recipes, school planning, and connecting online with other parents.

AAFA.org

Support group information.

Take Steps to Avoid Allergic Reactions

The only way to avoid an allergic reaction is for your child to stay away from foods that have caused symptoms. Even traces of an allergen can cause an allergic reaction. For example, people and pets who have eaten an allergen recently can pass it on to your child through their saliva.

Here are some steps you can take:

- **Learn how to read food labels** for ingredients your child is allergic to. Read the label every time you buy a product, even if you've used that product before. Food ingredients in any given product may change.
- **Ask about ingredients in foods** that other people make for your child.
- **Avoid passing allergens to foods that are safe for your child to eat** by washing your hands and your child's hands with soap and water before handling food. Prepare and serve foods with clean utensils and other kitchen items and on clean surfaces.
- **Educate family, friends, and others** who will be with your child about your child's allergies. Be sure to tell your child's school and anyone responsible for your child about his or her food allergies.
- **Teach your child how to manage his or her food allergies.** You can start teaching your child even at a young age. When old enough, teach your child to read labels. Also teach your child how and when to use an epinephrine auto-injector, and to tell an adult if he or she is having an allergic reaction.
- **After the diagnosis, focus on what safe foods your child can have,** rather than what he or she can't have. Start with plain foods with simple ingredients. From there you can look for new recipes that use safe ingredients.