

Peanut Allergy - What You Need To Know

Prepared by "Allergy, Asthma and Immunology Society of Ontario"

The Peanut Problem

Peanuts, a cheap source of dietary protein predominantly ingested as peanut butter, have indeed become one of the world's most allergenic foods. They are, unfortunately, progressively finding their way into more and more food products either directly, or by indirect contamination of food products during the manufacturing process. Peanut may be designated on a food label in a less easily recognized term such as "hydrolysed vegetable protein" or "groundnuts". It is important to realize that for the sensitive person, this is a lifelong allergy, and that even trace amounts can kill. Sensitization may possible occur during a pregnancy when the mother overindulges in or perhaps even just eats peanut products, and peanut proteins have even been found in breast milk.

The Allergic (Anaphylactic) Shock Reaction

This reaction can begin and proceed rapidly, occasionally proving fatal within minutes. It must be treated with epinephrine immediately at the first signs of reaction, and the reaction may recur after initial therapy so that ongoing observation and care are required. Possible symptoms of reaction to peanuts may include (not necessarily in this order):

- sense of foreboding, fear, or apprehension
- flushed face, hives, swollen or itchy lips, mouth, eyes, or tongue
- tightness in mouth, chest or throat
- difficulty breathing or swallowing, drooling, wheezing, choking, coughing
- running nose, voice change
- vomiting, nausea, diarrhea, stomach pains
- dizziness, unsteadiness, sudden fatigue, rapid heartbeat, chills
- pallor, loss of consciousness, coma, death

Factors Which May Contribute To Fatal Peanut Reactions

A. Failure Of Institutions

- Incomplete or inadequate labelling of foods or packages thereof
- Ignorance of food allergy problems by restaurants, school personnel, etc.
- Non-availability of medications or resuscitation equipment or inappropriate use thereof
- Having peanut products in the home or school lunchroom of a peanut sensitive individual
- Peanuts may be altered and sold as walnuts, almonds or pecans

B. Failure To Prevent Problem

- Failure to always read food labels carefully
- Not always inquiring about contents of foods regardless of where prepared
- Trying to taste a tiny bit of an unknown but suspected food to see if it contains peanut
- Sharing foods or utensils
- Obtaining foods from others when the contents may be unknown
- Relying on the service personnel in restaurants instead of the chef
- Kissing someone or being kissed by someone who has eaten peanut products

C. Failure To Identify Problem

- Failure to appreciate that minimal amounts of peanut material can kill
- Minimization of, or denial of, symptoms of previous non-fatal reactions
- Failure to speak out when one even suspects that a reaction may be occurring
- Not wearing a bracelet showing "Allergy To Peanut"

D. Failure Of Treatment

- Failure to carry and know how to use in-date epinephrine (EpiPen®, Ana-Kit ®) at all times. (In some cases, failure of a caregiver to understand fully or to administer this.) It is often wise to have a child's picture on the epinephrine container.
- Failure to use epinephrine immediately for a peanut reaction
- Failure to have a second epinephrine dose available if necessary
- Attempting to use an oral antihistamine alone to control symptoms
- Failure to be taken to a nearby hospital quickly after epinephrine use
- Impaired awareness of potential peanut product due to alcohol or other drug influence
- Taking Beta-Blocking Medications (check with a physician or pharmacist)

Lifestyle Adjustments

- The sensitive individuals must recognize that they are different, bear a large responsibility, and know they can die of a reaction
- Residue of peanut material on a wiped counter top, cutlery or plates may induce a reaction. Aerosolized peanut material (e.g. opening a sealed jar of peanut butter, or fumes from cooking) may cause asthma in a susceptible individual. Some may experience nausea if people nearby are eating suspected foods.
- Peanut butter may be used to thicken chili, or to seal egg rolls. Bakery products and ice creams may easily be contaminated.
- It is unsafe to pick out a "safe" nut from a mixture containing peanuts. Avoid all nuts.
- Parents of the susceptible person must be vigilant, and yet worry about a possible fatal mistake. Most exposures are accidental.
- Peer pressure may be large -- One child received anonymous E-Mail saying "I'm Peanut, You're Dead"; another was chased about the schoolyard by a bully brandishing a peanut, while a third had the pouch containing life saving epinephrine taken as a prank.
- The parents of non-sensitive children may selfishly (or for financial reasons) argue that, "Why should my child be deprived of peanut when the problem is that of another child?" Perhaps the answer lies in the counter-argument that if their child had the life threatening reaction, would they not be the first to demand that all peanuts be removed from the child's environment. Fortunately, many schools and summer camps have come to realize the magnitude of the problem and controlled the problem.
- Some individuals also must avoid other foods in the legume family e.g. soya bean, pea, and garbanzo (chickpea) if allergy to these has been previously demonstrated.
- Education of friends, relatives and acquaintances is essential. Divorce situations may pose a special threat where one of the parents chooses to deny the problem.
- Pure peanut oil is generally non-allergenic, but cold pressed peanut oil or oil contaminated with peanut protein through cooking may be dangerous.

Future Hope

Immunotherapy has been worked upon with encouraging results, but it is too early to tell if this will be effective form of therapy for all peanut sensitive individuals.

This article provided courtesy of the Calgary Allergy Network Web site at <http://www.calgaryallergy.ca>.