

A Teacher's Guide to Allergies and Anaphylaxis

What Is Allergy?

An allergy is an abnormal response to a "normal" substance. The allergic person has an altered immune response to substances which would normally not be harmful. Symptoms may vary from person to person, both in range and severity. Not all reactions are immediate.

Symptoms can occur up to 72 hours or more after exposure to the allergen, and can last for several days once they occur. A reaction does not necessarily occur with the first exposure to the allergen: Substances which have not previously caused a problem can cause symptoms at any time.

Anaphylaxis is a sudden, severe allergic response that produces breathing difficulties, collapse and possible death. It is described later in this pamphlet.

What Causes Allergic Reactions?

Substances ("allergens") that cause allergies can vary from child to child. Some potential allergens to be aware of in the classroom are:

- scented markers, stickers
- chalk dust
- animals of any kind
- foods - any food can pose a risk
- molds, mildew
- paint fumes
- carpets
- perfume
- dust
- pollen

Signs and Symptoms

Some signs of a child with allergies in the classroom are:

- constant runny nose
- excessive throat clearing
- sniffing
- puffy eyes
- dark circles under eyes
- headaches
- irritability
- chronic cough
- itchiness
- varied attention span
- disruptive behaviour
- aches and pains
- abdominal cramps
- eczema, skin rashes
- vomiting
- diarrhoea
- sleepiness or drowsiness

Treatment

Allergies are controlled by a doctor through an individually tailored routine of medications, dietary manipulations and environmental control.

Dealing with the Child with Allergies

The child with allergies may have symptoms that directly affect his or her performance in school. Allergic symptoms can be controlled with careful monitoring by the parents and the teacher. Here are some suggestions to help you in the classroom:

- Discuss each child's condition fully with the parents prior to school starting.
- Inform the parents beforehand of activities involving food or animals. The parents may wish to give the child medication or substitute foods to make it possible for the child to participate.
- Notify the parents of behaviour changes you notice, or of an increase in any of the symptoms mentioned earlier.
- Discourage the child from trading food with friends. If you see this happening, stop the child and inform the parents.
- BELIEVE THE CHILD. The child will know if she or he is starting to react to something.
- Keep a picture of the child, a list of his/her allergies and usual reactions in an easily accessible place in the classroom. If you have a substitute teacher taking your class, this information must be readily available to that teacher.

What is Anaphylaxis?

Anaphylaxis is a sudden, severe allergic response that produces breathing difficulties, collapse and possible death. Symptoms usually occur within several minutes following contact with the allergen and proceed rapidly. Anaphylactic reactions tend to be faster and more severe with each exposure to the allergen.

What Causes Anaphylactic Reactions?

Anaphylactic reactions are usually caused by:

- Foods: Some common foods that may cause reactions are peanuts, shellfish, nuts, eggs, fish. Reactions can be caused by any food such as milk, beef, pork, soya, potato or wheat products.
- Stinging insects
- Drugs: Common drugs that cause reactions are penicillin and ASA

Signs and Symptoms

Some **initial** signs and symptoms of anaphylaxis are:

- tingling lips and mouth
- flushing of face, body
- itchy eyes, nose, face
- eyes and face swelling
- vomiting
- hives
- diarrhoea
- wheezing

Symptoms of anaphylaxis rapidly progress to:

- weakness and dizziness
- throat swelling closed
- inability to breath
- loss of consciousness

WARNING!

Children with life-threatening anaphylactic reactions may require medication if a reaction occurs at school. You will NOT have time to wait for the parent or for the ambulance. The child may be unable to self-administer the medication due to the severity of the symptoms.

You may be required to give the child adrenalin through an EPIPEN® which

Treatment of Anaphylaxis

In addition to observing the cautions and procedures recommended for children with allergies, remember that **anaphylactic reactions must be treated promptly with medications** that stop the reaction from progressing.

- ALL school personnel should be aware of this child and the things that cause his or her reactions.
- The child's parents must instruct all personnel who may be involved with this child in the use of the EPIPEN® (see WARNING)
- The EpiPen® should be kept in a safe, easily accessible place in the school, preferably in a waist pack that the child carries at all times.
- If a reaction occurs, administer the adrenalin by using the EpiPen® then telephone 911. Ask for an ambulance. Mention that you have a child who has suffered an anaphylactic reaction, and that you have administered adrenalin. The child must have further medical treatment if he or she has used the EpiPen®.
- Adrenalin will cause some tremor and increased heart rate, but does not have major adverse reaction. **PLAY IT SAFE: ADMINISTER THE ADRENALIN.** The child will not be harmed by the adrenalin if it was not a genuine allergic reaction.
- The child may require antihistamines for several days following a reaction. These medications sometimes cause drowsiness and poor attention span.
- Children who require an EpiPen® may not be able to give it to themselves or wait for an ambulance.

Some General Suggestions

The allergic child affects you and the parents. Since the parents are sending their child to a place where they lose some control over the child's environment or what the child eats, they will be concerned about the potential health risk. You will be dealing with a child who may be disruptive and may need medication and close monitoring.

Parents will appreciate your recognition of the individual nature of this condition and its medical requirements. You must let them feel that their instructions are being adhered to explicitly. You cannot be responsible for ensuring that the child never eats something he or she should not eat, or never has an allergic reaction at school. The parents must count on your help to lessen the possibility of an allergic reaction, and to deal with a reaction if it occurs.

You can be instrumental in helping the allergic child to feel accepted. The allergic child knows he or she is different from other children, in having to do things or eat things that

are different from others. The child's self-esteem may be fragile. If you can make it possible for this child to participate in activities in as normal a manner as possible, then the child will not feel "different". This will go a long way to strengthening the child's positive emotional growth at school.

SUMMARY

- Allergies are an abnormal response to a normal substance. Allergic responses are varied and unique to each child.
- Anaphylaxis is a severe allergic response. It can be life-threatening.
- Children with allergies/anaphylaxis require close monitoring.
- A close working relationship with the parents is essential to an informed, well-managed, and safe classroom experience.

Additional Sources of Information

Info about the EpiPen and pictures showing how to give it: Calgary Allergy Network web site article: About the EpiPen at www.calgaryallergy.ca – Articles page.

Allergy/Asthma Information Association

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