

Food Allergy

Food allergy information: <https://www.foodallergyaware.com.au/>

What is food allergy?

A food allergy is an immune system response to a food protein that the body mistakenly believes is harmful. When the individual eats food containing that protein, the immune system releases massive amounts of chemicals, triggering symptoms that can affect a person's breathing, gastrointestinal tract, skin and/or heart.

Signs and symptoms of food allergy can be mild, moderate or severe.



An allergic reaction can include; hives, swelling of the lips, face and eyes, abdominal pain, vomiting, swelling of the tongue, swelling of the throat, breathing difficulty, persistent dizziness and/collapse. If left untreated, signs and symptoms related to breathing and heart/blood pressure can be fatal.

What is anaphylaxis?

Food allergies can be severe, causing potentially life-threatening reactions known as anaphylaxis. Anaphylaxis must be treated as a medical emergency, requiring immediate treatment and urgent medical attention.

Anaphylaxis is a generalised allergic reaction, which often involves more than one body system (e.g. skin, respiratory, gastro-intestinal and cardiovascular). A severe allergic reaction or anaphylaxis always involves the respiratory and/or the cardiovascular system. An allergic reaction usually occurs within 20 minutes to two hours of eating even a small amount of the food, and can rapidly become life threatening.



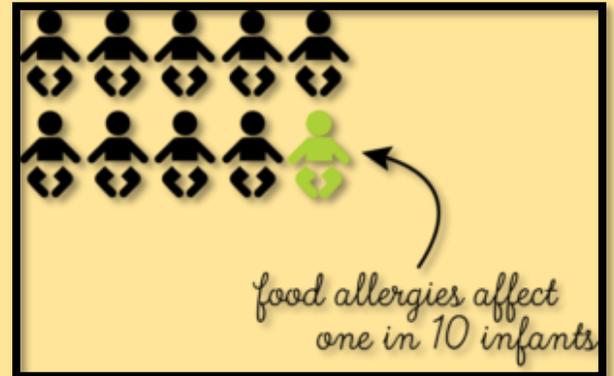
Incidence

Food allergy now affects one in 10 infants and about two in 100 adults in Australia. Some children may outgrow their allergy, however some adults develop their food allergy later in life after eating the food without a problem for many years.

The severity of an allergic reaction can be unpredictable although someone who has previously had a severe reaction to a particular food is more likely to have another severe reaction to that food.

Someone who has a previous mild reaction to a food is less likely to have a severe reaction but the possibility is still there.

Someone who is allergic to a food but has not been prescribed an adrenaline (epinephrine) autoinjector still needs to do their best to avoid the food as reactions do sometimes become more severe.



Triggers

There are more than 170 foods known to have triggered severe allergic reactions. The most common triggers, causing 90 percent of allergic reactions in Australians are egg, cow's milk, peanut, tree nuts (such as cashew and almond), sesame, soy, wheat, fish and shellfish. Some lesser known triggers also include kiwi fruit, banana, chicken, mustard and celery. Children often outgrow cow's milk, egg, soy and wheat allergies during childhood. Common life-long allergies include peanuts, tree nuts, sesame and seafood.

It is important to understand that in some people even very small amounts of food can cause a life-threatening allergic reaction/anaphylaxis.

Some extremely sensitive individuals can react to just the smell of particular foods being cooked (e.g. fish) or even kissing someone who has eaten the food they're allergic to.



Food allergy is the leading cause of anaphylaxis outside the hospital setting. It is thought that approximately 10 people die from anaphylaxis each year in Australia and some of these reactions are triggered by food. Importantly, deaths from anaphylaxis are currently not reportable and we have no way of capturing true figures of deaths and near misses.

Currently, there is no cure for food allergy. Avoidance of the food is the only way to prevent a reaction. When a severe reaction does occur, adrenaline (epinephrine) is the first line treatment for severe allergic reactions and can be administered via an adrenaline (epinephrine) autoinjector called the EpiPen®. EpiPen® is currently the only available adrenaline autoinjector in Australia.



How to avoid a reaction

Currently there is no cure for food allergy; education is the key to good management. Avoidance of the food trigger is crucial. Individuals at risk and their carers must read food labels of every food they put to their mouth. If a product is not packaged, they must enquire about ingredients and the risk of the food coming into contact with the food they are allergic to.

Living with food allergy is a challenge as food allergens can be hidden in foods where they are not expected. For example, cow's milk protein can sometimes be found in orange juice and coconut drinks, tree nuts in rissoles and people forget that mayonnaise contains egg.

Food ingredient labels need to be read every time a product is purchased, because recipes change without warning. If there is no label on a food and you cannot access information about content, do not eat it.

Most importantly, see an allergy specialist and have your condition properly diagnosed. Everyday management means you have to be vigilant.



Avoid ingestion

Do your best to avoid the allergen and ALWAYS have your ASCIA Action Plan for Anaphylaxis/Allergic Reactions AND medication (if prescribed) easily accessible. If you have severe food allergy and you forget to take your emergency medication (adrenaline [epinephrine] autoinjector) out with you, DO NOT EAT – it is not worth the risk.



Note: The Australasian Society of Clinical Immunology and Allergy- ASCIA is the peak medical body for allergy and immunology in Australia. See www.allergy.org.au

Cross contamination

Steer clear of deep fried foods, as many different items are generally fried in the same oil, for example, fish crumbed with egg will be cooked in the same deep fryer as chips.

BBQs can easily lead to cross-contamination – even from previous uses. Just put a piece of foil under your food and use a separate utensil to avoid any dangers. When barbecuing regularly at home, sometimes a second smaller BBQ can come in handy to ensure you have a separate allergen-free space without the fuss. This BBQ can then be taken to picnics and BBQ's outside the home.



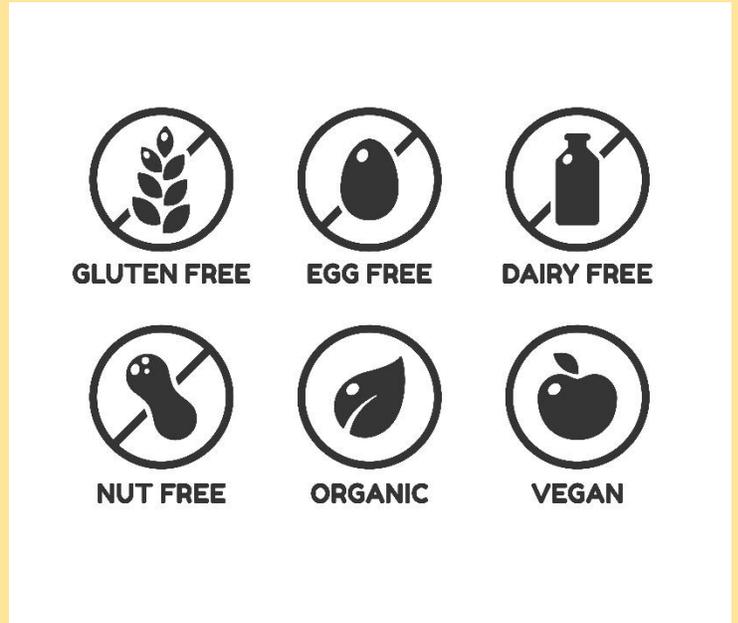
Be aware of special occasions and celebrations, as they pose an increased risk. With the increase in food (and sometimes alcohol) consumption away from home and all the rush and excitement, you and others may not be as careful about your special food needs as you normally are.



Read labels

Food labelling laws in Australia state that the 10 most common allergens, peanut, tree nuts (e.g. pecan and hazelnut), cow's milk, egg, fish, shellfish (e.g. prawns, lobster), sesame, soy, gluten-containing cereals and lupins must be declared on packaging.

Some food such as those sold fresh in delicatessens, butchers or cafes must either have ingredients displayed or have ingredients available in case a customer asks about allergen content.



Read all product labels every time you purchase a product. Food labels, ingredient listings and allergen warning statements can change without warning.

While imported goods must comply with Australian food labelling legislation, mistakes can be made. Use extra care with imported goods. Labelling requirements in some other countries are less stringent than Australian standards and there is a greater risk of incorrect labelling of imported products even though these products must comply with Australian food regulations.



Remember to check labelling on both outer and inner packages –discrepancies have been found. Check labels of products that come in different size packaging as they may be different.

Don't rely on products labelled as 'Free from....' make sure you still read the ingredient list and allergen warning statement.



Ask before you eat

Always disclose your allergies when eating out and ask about content of menu items – ingredient details are generally not on the menu. If the staff cannot answer your questions about allergen content or seem unsure, it is better to order something else or eat elsewhere. Choosing simple foods that need little preparation and have limited other ingredients added usually means there is less room for error.



Further information & free Resources: <https://www.foodallergyaware.com.au/>



Food Safety Supervisor Training

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