

Source: <https://www.scouting.org/health-and-safety/safety-moments/food-allergies/>

## Food Allergies



### SUMMARY

According to Food Allergy Research & Education (FARE), one in every 13 children has a food allergy. Every 3 minutes, a food-allergy reaction sends someone to the emergency room. While the responsibility for management of a food allergy lies with the individual or the individual's parent or guardian, all of us need to be ready to assist in preventing—or helping in response to—a reaction.

A food-allergy reaction happens when the immune system overreacts to a food protein. A reaction can range from mild to severe. In the U.S., the most common food allergens are milk, eggs, peanuts, tree nuts, soy, wheat, fish, shellfish, and sesame seeds. However, any food might cause an allergic response, and many people are allergic to more than one food. Also, initial food-allergy reactions can occur at any time.

A food allergy should not be confused with a food intolerance. A food intolerance is when someone cannot digest a component of a food, such as lactose, a sugar found in milk. An intolerance might cause abdominal cramping or diarrhea but is not life-threatening.

### GENERAL INFORMATION

Food allergies can start in childhood or adulthood. Mild reactions might involve only a few hives or minor abdominal pain, though some reactions progress to severe anaphylaxis. The only way to avoid an allergic reaction is to avoid the foods that cause signs and symptoms. However, despite our best efforts, anyone at any time might encounter a food that causes a reaction.

For a minor allergic reaction, over-the-counter or prescribed antihistamines (such as Benadryl®) might help reduce symptoms. These medications can be taken after exposure to an allergy-causing food to help relieve itching or hives. Follow guidance from the person's personal health care provider.

However, antihistamines can't treat a severe allergic reaction. For a severe reaction, someone will likely need an emergency injection of epinephrine (such as from an EpiPen® or Auvi-Q®) and require a trip to the emergency room. Many people with allergies carry an epinephrine auto-injector. This device injects a single dose of medication when pressed against the thigh. There might be times when a second dose of epinephrine is needed. This should be noted in the food-allergy plan the individual develops with their parents and physician. It is recommended that the person always carries their emergency medication(s) with them. Parents, adult leaders, and the youth should review the BSA Food Allergy Guidance to help develop a plan to keep the individual safe at camp and Scouting events.

### **WHAT TO DO IF SOMEONE HAS A FOOD ALLERGY**

If someone has a food allergy, they must be diligent about avoiding allergens. They must always read all food labels before eating or drinking any food. Even tiny amounts of an allergen can cause an allergic response.

Prepare food for people with allergies on a separate, clean surface to ensure there is no cross contamination. Start with clean hands and use separate and clean utensils and cooking tools, such as toasters. For some people, bringing their own foods can be easier and safer when eating with a group. If you or someone in your unit has food allergies, be sure to review the [BSA Food Allergy Guidance](#) and the other resources below before planning any event that includes food.

### **REFERENCES**

- [Food Allergy Research & Education, Living with Food Allergies](#)
- [Academy of Nutrition and Dietetics, Food Allergies and Intolerances](#)
- [Mayo Clinic, Food Allergy](#)
- [BSA Food Allergy Guidance](#)

*Reviewed March 8<sup>th</sup> 2024.*