Putting THOUGHT into Food Allergens

Presented by

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Food Allergy Facts & Statistics

☐ In the US, approximately 15 million people (4.7% of US pop) have food allergies including ~6 million children (1 in 13) with approximately 20 children deaths annually\(^1, 2, 3, 4, 5, 33\)

☐ The economic cost of children’s food allergies is nearly $25 billion per year\(^6\)

☐ Research suggests that almost 50% of fatal food allergy reactions are triggered by food consumed outside of the home\(^10, 11, 12\)
Food Allergy Facts & Statistics

Every 3 minutes a food allergy reaction sends someone to the emergency department – that is about 200,000 emergency department visits per year, and every 6 minutes the reaction is one of anaphylaxis.32
What Do You Need to Know?

1 in 13 U.S. children has a food allergy
What Do You Need to Know?

- What is a food allergy?
- What is the difference between a food allergy and a food intolerance?
- How do I manage a food allergy?
What is a Food Allergy?

- It is when your body’s immune system reacts to a food protein as it has mistaken that food protein as a threat.\(^{22}\)

- People can be allergic to any food, at any time, but 8 foods are responsible for 90% of most food allergic reactions in the U.S.\(^5, 13, 14, 15, 16, 17, 18, 19, 20, 21\)

- Those foods include: milk, egg, peanuts, tree nuts, wheat, soy, fish & crustacean shellfish\(^5, 13, 14, 15, 16, 17, 18, 19, 20, 21\).
What is the Difference Between a Food Allergy & a Food Intolerance?

- **Food Allergies** involve the immune system and can be life threatening
  - They cause the immune system to make too many immunoglobulin type E (IgE) antibodies
  - When IgE antibodies bind with allergens, they cause some white blood cells (mast) to release histamine and other chemicals
  - The chemical release causes the symptoms of an allergic reaction

- **Food Intolerance** is a digestive disorder which causes the inability to digest certain foods normally
  - Symptoms include stomach upset or gassiness, but it is not considered life-threatening
  - Lactose is the most common intolerance

Source: https://www.healthline.com/health/allergies/food-allergy-sensitivity-difference
Source: https://my.clevelandclinic.org/health/diseases/10009-food-problems-is-it-an-allergy-or-intolerance
How do I Manage Food Allergies?

- Read every label, every time. Federal law* requires the top 8 major food allergens be declared in simple terms either in the ingredient list or separate statement on pre-packaged foods.

- Be mindful of cross-contact

- Always carry the epinephrine auto-injector if prescribed

- Even a trace amount of a food allergen can cause a serious reaction.\(^{23, 24, 25, 26, 27, 28}\)

- Past reactions do not predict future reactions.\(^{29}\)

*FALCPA – Food Allergen Labeling & Consumer Protection Act
What do I Want to Learn?

Every 3 minutes a life threatening Food Allergy sends someone to the Emergency Room.

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Food Allergen Education, Advocacy and Alignment
What Do I Want to Learn?

- How do I recognize an allergic reaction?
- How do I read a food label?
- What is Cross-Contact (Cross-Contamination)?
- What do I need to know when dining out?
- How do I work with others?
- How do I manage food allergies in a classroom or school?
- What can I do to include those with food allergies?
How Do I Recognize an Allergic Reaction?

- Very difficult to predict
- The last reaction may be nothing like the next one
- First symptoms can appear within a few minutes to a few hours later
- In some cases, after the symptoms go away, a second wave of symptoms comes back one to four hours later (but could be longer). This is called a biphasic reaction
- Symptoms include (but not limited to): trouble breathing, coughing, vomiting, weak pulse, hives, rash or swelling
- Anaphylaxis is a rapidly progressing, life-threatening allergic reaction which typically involves multiple systems
Understanding Food Labels

- **Triple Check:** Read the label at the store, when unpacking the groceries & before serving the food

- Food Allergen Labeling & Consumer Protection Action (FALCPA) – this law requires that food labels show in plain english when a major food allergen or any ingredient contains protein from a major food allergen is added.

- Imported and domestic pre-packaged foods are required to have a label that lists the major food allergens when they are intentionally added as an ingredient or an ingredient contains the protein from a major food allergen.

- The FDA considers the following foods major food allergens: milk, wheat, egg, peanuts, tree nuts, fish crustacean shellfish (but not molluscan shellfish – scallops, clams, oysters) and soy.

**Example 1** - Ingredients: Whey protein (milk), lecithin (soy), cherry, sugar, natural flavors (almond), salt

**Example 2** - Ingredients: Whey protein, lecithin, cherry, sugar, natural flavors, salt. **Contains:** Milk, soy and almond.
Understanding Food Labels

- Pre-packaged food labels are not required to disclose precautionary warnings or advisory statements which are voluntary\(^7,9\).
- For example, may contain or processed in facility with or processed on equipment with\(^7,9\).
- A manufacturer is not required to indicate if there may be unintentional traces of an allergen due to cross-contact during processing\(^7,9\).
- Most allergists recommend avoiding these products as studies have shown that some of the products do contain enough of the allergen to cause an allergic reaction\(^23, 24, 25, 26, 27, 28\).
- Be aware of unexpected sources of allergens; for example, coconut is now classified as a tree nut.
Foods not Covered by FALCPA

- Fresh meats, fresh fruits and vegetables
- Restaurant foods placed in a wrapper of carryout box for an individual customer
- Highly refined oils even derived from a major allergen (such as peanut or tree nut)

Cross-Contact (Cross-Contamination)

- Happens when one food comes into contact with another food and their proteins mix
- Even a small amount of food protein can cause a reaction\(^\text{23, 24, 25, 26, 27, 28}\)

<table>
<thead>
<tr>
<th><strong>Direct Cross-Contact</strong> (Allergen directly applied &amp; then removed)</th>
<th><strong>Indirect Cross-Contact</strong> (Allergen was not directly applied)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peeling cheese off a cheeseburger to make it a hamburger</td>
<td>Using the same spatula that flipped a cheeseburger to flip a hamburger</td>
</tr>
<tr>
<td>Removing an allergen (shrimp or nuts) from a salad after salad has already been prepared</td>
<td>Not washing hands after handling an allergen (shrimp or nuts) before making the next salad</td>
</tr>
<tr>
<td>Scraping peanut butter off a piece of bread and using the same piece of bread to make a different sandwich</td>
<td>Not properly cleaning a knife used to spread peanut butter before using it to spread jelly</td>
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</tbody>
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Tips to Avoid Cross-Contact

- Use only utensils, cutting boards and pans that have been washed in soap & water
- Cook the allergy-safe foods first
- Keep the safe foods covered and away from other foods that may splatter
- If you make a mistake, toss the contaminated food; do not try to remove the allergen
- After handling an allergen, always wash your hands with soap & water before touching anything else; hand sanitizer alone will not remove the allergen
- Scrub down counters and tables with soap and water after meal preparation
- Do not ever share food, drinks or utensils
Dining Out with Food Allergies

- Ask around, do research, review the menu in advance and call the restaurant and speak with a manager.

- Avoid riskier choices such as buffets, bakeries, fried foods, desserts and restaurant foods sourced through distributors without cross-contact information or from unknown sources.

- Insist on discussing your meal choice with the chef to understand what is in the food and how it is being prepared.

- If at anytime you do not feel confident that the restaurant staff understands your food allergy, then don’t eat there.

- Never eat without having your epinephrine auto-injector with you.
How to Work with Others

- Education, planning & cooperation
- Educate Yourself
  - Know which foods to avoid
  - Know the signs of an allergic reaction
  - Know the role of epinephrine in treatment
  - Know the right way to use an epinephrine auto-injector
  - Find out as much as you can about the organizations approach to managing food allergies
  - Learn what practices and accommodations are recommended
- Create a Plan
  - If required, obtain a written food allergy management plan such as a 504 plan which outlines the accommodations
  - Children whose food allergy may result in severe, life-threatening reactions can meet the definition of a disability under section 504

For more information about Section 504 and the ADA can be found at:
https://www2.ed.gov/about/offices/list/ocr/504faq.html
https://www.foodallergy.org/laws-and-regulations
http://www.doe.virginia.gov/special_ed/
How to Manage Food Allergens in a Classroom or School

- **BE AWARE** - Most food allergies develop in children 6 years of age or younger, but they can occur for the first time at any age, including adulthood.
- Be clear and consistent with procedures and protocols.
- Communicate with parents and volunteers.
- Plan for activities that can exclude the food and include the child.
- Know what to look for: read labels, understand that all reactions do not look the same.
- Don't take risks.
- Be honest, if you do not understand what foods to avoid in class, ask for help.
- If there is a chance that protocols or procedures were breached, inform the parent of any student who might be at risk.
What Can You Do to Include Those with Food Allergies?

- Work directly with the parents to ensure any food provided is safe for everyone.

- Don’t plan activities that include foods that an allergic child can’t have or provide them with an alternative; this just makes them feel different or excluded from the activity.

- Consider ... including the child and not the food!
Preparing Others to Care for Children with Food Allergies

- Explain the allergy, which foods to avoid and other safety precautions
- Carefully explain the symptoms of a food allergy reaction and what do if a reaction occurs
- Show them how to use the epinephrine auto-injector and make sure they are comfortable using it
- Act first and call parent later (inject epinephrine, call 911 and then call parent or guardian)
- Make it easy to reach you (cell phone is preferred)
- Explain the dangers of cross-contact and how to avoid it
- Teach them how to read food labels
- Always provide food that is safe for your child to eat
- Put everything in writing
What Have We Learned Today?

8 foods account for 90% of Food Allergies

- Peanuts
- Tree Nuts
- Milk
- Eggs
- Wheat
- Soy
- Fish
- Shellfish

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Summary

- Difference between food allergy and food intolerance
- How to recognize the allergy symptoms
- Read every label every time
- Always carry your Epipen and if you use the Epipen, call 911
- Past reactions do not predict future reactions
- Anyone at anytime can develop a food allergy
- Include the child and not the food
Food Allergy Resources

- www.foodallergy.org (FARE)
- www.kidswithfoodallergies.org
- www.foodallergyawareness.org
- www.faedadal.com
- https://henrico.us/pr/hctv-program-schedule/online-programs/
Citations

Citations Continued

28 U.S. Food and Drug Administration. Approaches to establish thresholds for major food allergens and for gluten in food. 2006.
31 Virginia A. Stallings and Maria P. Oria, Editors; Committee on Food Allergies: Global Burden, Causes, Treatment, Prevention, and Public Policy; Food and Nutrition Board; Health and Medicine Division;National Academies of Sciences, Engineering, and Medicine, Finding a Path to Safety in Food Allergy: Assessment of the Global Burden, Causes, Prevention, Management, and Public Policy, 2016: 56-59, 258.
What Questions Do You Have?

Thank You!