

# Dietary Guide FOR FOOD ALLERGY



## **General Information**

The following information is relevant to all individuals with allergy to any foods. It should be used in conjunction with the ASCIA dietary avoidance information for specific food allergens which are available on the ASCIA website <a href="https://www.allergy.org.au/patients/food-allergy">www.allergy.org.au/patients/food-allergy</a>

It is important to note that all individuals with food allergy should have:

- An ASCIA Action Plan for Anaphylaxis (red) if an adrenaline (epinephrine) autoinjector has been prescribed.
- An ASCIA Action Plan for Allergic Reactions (green) if an adrenaline autoinjector has not been prescribed.
- An adrenaline autoinjector if considered to be at risk of a severe allergic reaction (anaphylaxis).
- Regular review by their medical practitioner and a clinical immunology/allergy specialist as required.

Dietary avoidance should only be undertaken if there is a medically confirmed food allergy.

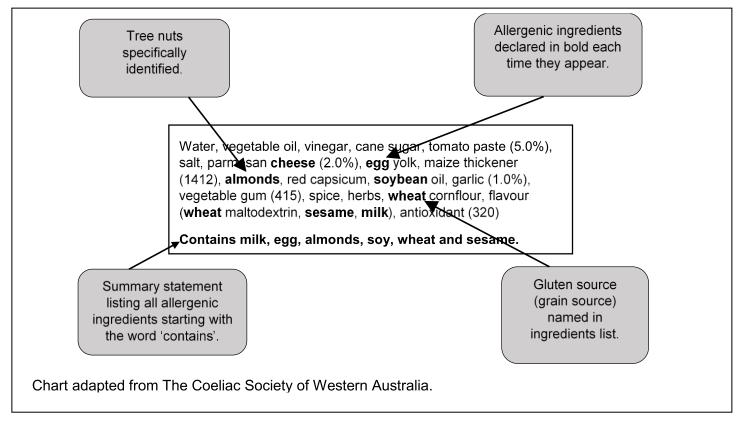
#### Foods labels

- Many manufactured foods contain common food allergens that may not be obvious.
- Ingredients or processes can be changed by manufacturers at any time without notice.
- It is therefore important to always check food labels when buying and preparing food every time you
  purchase the product, even if it has been a 'safe' food in the past.

## Reading food labels

- Food Standards Australia New Zealand (FSANZ) Code 1.2.3 includes mandatory labelling of common food allergens included as:
  - An ingredient.
  - Part of a compound ingredient.
  - A food additive.
  - A processing aid.
- Allergens that must be declared are peanuts, tree nuts, cow's milk (dairy), egg, soy, fish, shellfish (crustaceans), sesame, gluten and lupin.
- The source of the gluten (such as wheat) should also be declared.
- Labelling of less common food allergens such as rice, corn and potato is not mandatory.
- Precautionary allergen statements used to declare cross contamination risk (such as 'may contain...'), are not compulsory for food manufacturers.
- For bakery products and snack foods, you may wish to contact the manufacturer to discuss the level of cross contamination risk with specific allergens.
- Unlabelled food or food consumed outside the home poses a higher risk than food labelled as "may contain traces". Discuss what to do about these foods with your clinical immunology/allergy specialist.
- For more information about the Food Standards Code, visit the FSANZ website www.foodstandards.gov.au

An example of how food allergens should be declared on a food label is shown below:



## 'Free from' products

- Some products are manufactured specifically to replace or exclude an allergen (such as 'gluten free').
- Even if the product is labelled 'free from', it is important to check the ingredients list for foods to which you
  or your child are allergic, as well as checking for precautionary allergen statements (such as 'may contain').
- If choosing a 'free from' product, check that the preparation instructions do not require the addition of a food to which you or your child are allergic.

## **Purchasing foods**

Examples of mistakes that can occur when purchasing foods include:

- Food labels are not read or understood.
- A person does not disclose their allergy when purchasing unpackaged foods from a food outlet such as a bakery, café or restaurant.
- Waiters or service staff not communicating important information about a customer's allergy to the chef.
- Chef unaware of ingredients in a product prepared offsite.
- Food services assuming that a little is OK.
- A family member forgets to check ingredients or disclose allergen/s.

## **Eating out**

Examples of situations that require advanced planning and communication include:

- Eating out at parties, restaurants, other food outlets, and other homes.
- **Institutions** such as schools, childcare services, workplaces, universities, and hospitals.

#### ASCIA INFORMATION FOR PATIENTS, CONSUMERS AND CARERS

When travelling, including camps, hotels, airlines, and public transport.

It is important to be assertive. Before ordering, advise food service staff about your allergy clearly, and ask questions about ingredients, food preparation, storage and service.

If you are not sure that the food is suitable, do not eat it. If you have been prescribed an adrenaline autoinjector, do not eat unless you have it with you.

## Preparing and serving safe meals at home

When preparing and serving food at home it is important to:

- Choose appropriate ingredients.
- Teach other household members and visitors about not sharing food and drinks.
- Be aware of cross contamination when storing, preparing and serving foods:
  - Use separate cooking equipment.
  - Prepare allergen free food first.
  - Ensure adequate cleaning.

#### Possible sources of cross contamination

- Processing:
  - Shared manufacturing lines.
  - Packaging lines.
  - Transport and storage of ingredients.
- Point of purchase:
  - Food sold in bulk containers and distributed using shared serving utensils.
  - Delicatessen items.
- Food preparation using shared equipment:
  - Knives.
  - Blenders.
  - Cutting boards.
  - Shared frying pans and deep fryers.
  - Barbecues.
- Food service:
  - Buffets.
  - Juice bars.

## Additional tips for food allergic children

- Develop strategies to help manage food allergy if the allergen is in the home, including:
  - Have a shelf or container in the pantry and fridge for suitable foods for the food allergic child.
  - For very young food allergic children, consider storing the allergen out of reach or in a locked cupboard.
- For very young and mobile food allergic children consider not having the allergen in the house.

## ASCIA INFORMATION FOR PATIENTS, CONSUMERS AND CARERS

- Ensure that everyone who looks after your child (relatives, babysitters, friends, early childhood
  education/care, and school staff), fully understands your child's allergies. They should understand the
  importance of avoiding food allergens and how to treat an allergic reaction, should accidental exposure
  occur.
- Children should be encouraged from a young age to ask a trusted adult whether they are allowed to eat foods they may be given.
- If the child has been prescribed an adrenaline autoinjector, ensure it is easily accessible at all times, and teach everyone who looks after your child to know when and how to use the device.
- Ensure yearly review by their usual medical practitioner for updating of ASCIA Action Plans, and where indicated for renewal of their adrenaline autoinjector prescription and re-training in its use.
- Individuals with multiple food allergies may require advice from a dietitian to ensure their nutritional needs are met.

## Care of children with food allergy

Parents of a child with a milk or egg allergy should only give baked milk or baked egg to their child when they are under their supervision.

Parents should not expect early childhood education/care (ECEC) staff to give foods containing baked milk or baked egg to their child with a milk or egg allergy when they are at ECEC services.

## Non-food sources of food allergens

- Some cosmetics, shampoos, lotions, medications and alternative therapy products contain food allergens and it is not mandatory to include this information on these product labels.
- Touching or smelling may trigger mild allergic symptoms but it is unlikely to cause anaphylaxis as the food allergen usually needs to be ingested.

## Pet food can trigger allergic reactions

Pet food can also contain allergens. While children may not eat the food, the dog or cat may lick them and trigger a local reaction. The allergic individual should wash their hands after handling pet food.

#### **Further information**

- Allergy & Anaphylaxis Australia (Australian patient support): <a href="www.allergyfacts.org.au">www.allergyfacts.org.au</a>
- Allergy New Zealand (New Zealand patient support): www.allergy.org.nz
- Food Standards Australia and New Zealand (food labelling): www.foodstandards.gov.au

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