

Basic facts about food allergies



Knowledge can save your life or the life of a co-worker.

When your body's immune system sees food as a threat.

Here are some facts about food allergies from Allergy & Anaphylaxis Australia:¹

- There is no cure for food allergies. Avoidance of food is the only way to prevent a reaction.
- An allergic reaction occurs when a person's immune system responds to a food protein that has been eaten and the body mistakenly believes it is harmful. The immune system releases massive amounts of chemicals, triggering symptoms that can affect a person's gastrointestinal tract, skin, breathing and/or heart.
- It is estimated that up to 2% of adults have a food allergy and some of them will experience a life-threatening allergic reaction (anaphylaxis).
- More than 170 foods have been reported to cause allergic reactions.
- Food allergy is the leading cause of anaphylaxis outside the hospital setting.

There can be regional differences in food allergies. According to research, anaphylaxis varies across the geographic areas of the world:²

- In the Middle east, sesame is a common food allergy.
- Common triggers in Asia are milk, rice, and chickpeas.
- In western countries, common food allergies include peanuts, wheat, nuts, shellfish, milk, and eggs.

What's the difference between food intolerance and a food allergy?

When you suffer from food intolerance, your body has trouble digesting or processing a particular food. For example, if you're lactose intolerant, you might experience abdominal pain or bloating when you drink milk. Your body might have problems with chemical compounds that are added to foods to enhance flavours or act as a preservative. For example, some people get headaches from monosodium glutamate (MSG). But these are not allergic reactions.

Basic terminology that is helpful to understanding food allergies³

Antibody: Antibodies make up the core of your immune system. They're basically proteins whose purpose is to identify and neutralise antigens — foreign substances that can make you sick. Antibodies roam through your bloodstream looking for foreign substances that shouldn't be there. Antibodies mobilise quickly, grabbing and binding to these substances to keep them from making you sick. But occasionally antibodies act in crazy ways that are still a mystery to researchers. They attack substances that aren't diseases. But your body thinks they are and goes on the attack, causing an allergic reaction.

Antigen: When the body develops an antigen response to something that isn't harmful — like peanut butter — you have an allergy. Once the body recognises this substance as a harmful agent, it is prepared to fight it the next time you see it. Which is why you have the same (and sometimes more severe) allergic reaction each time you eat peanuts. You might think that the body would get used to the food, but, unfortunately, it keeps treating food like an intruder that has to be fought.

Histamines: These are the chemicals that your immune system makes to battle allergens (triggers that cause allergic responses). Histamines are stored in mast cells in your skin, lungs, nose, mouth, gut, and blood. Once released, the histamines boost blood flow in the areas where the allergens are detected. This sets off a sequence of repair work by the body that, unfortunately, makes you miserable. For example, if you eat something the body views as bad for you, it will work in your gut and trigger an allergic reaction.

Anaphylaxis: This is the most severe reaction to a food allergy. Unfortunately, the symptoms and severity of allergic reactions can vary from person to person. In fact, you may even have a less severe reaction to a food allergy one day and a life-threatening reaction the next.

If you do feel (or observe in someone else) a severe allergic reaction, the important thing is to act: fast treatment can mean the difference between life and death. See Figure 1 for more information on recognising allergic reactions.

What does fast response mean? Generally it means an injection of epinephrine, which is a type of adrenaline. This is considered the most effective way to stop a severe allergic attack. If your doctor has prescribed an epinephrine auto-injector, use it immediately. But you should still go to a medical facility to be checked out to make sure that symptoms are under control. Sometimes the symptoms can return even stronger than before within a few hours, which is called biphasic anaphylaxis.⁴

An allergic reaction can result in a wide variety of symptoms and affect many different parts of the body. Note that you should take even mild and moderate symptoms seriously. If you or a co-worker are in distress with any of the severe symptoms shown below, or a combination of mild or moderate symptoms, see your healthcare provider or go to an emergency clinic immediately.



Any of these severe symptoms⁵

- **Lung:** short of breath, wheezing, repetitive cough
- **Heart:** pale, blue, faint, weak pulse, dizzy
- **Throat:** tight, hoarse, trouble breathing/swallowing
- **Mouth:** significant swelling of the tongue, lips
- **Skin:** many hives over body, widespread redness
- **Gut:** repetitive vomiting, severe diarrhea
- **Other:** feeling something bad is about to happen, anxiety, confusion



One or more of these mild symptoms⁵

- **Nose:** itchy/runny nose, sneezing
- **Mouth:** itchy mouth
- **Skin:** a few hives, mild itch
- **Gut:** mild nausea/discomfort

Figure 1: Food allergy reactions can vary widely in severity. A past reaction that may be mild is not a predictor of a future allergic reaction, which may be life threatening. If you have a severe reaction — especially if you have difficulty breathing or dizziness or vomiting — don't waste any time in seeking medical attention. Things can go from bad to worse quickly.

1. Allergy & Anaphylaxis Australia, "Food Allergy Basics", May 2015
2. American College of Allergy, Asthma & Immunology, "Anaphylaxis." May 2017
3. American College of Allergy, Asthma & Immunology, "Allergy and Immunology Glossary," January 2015
4. American College of Allergy, Asthma & Immunology, "Anaphylaxis." May 2017
5. World Health Organization, "Asthma: fact sheet," April 2017

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