

Anaphylaxis: What Does It Mean To You?

It is quite possible that you, or someone you know, has some sort of allergy. Allergic reactions can occur when a food or other substance is ingested, smelled or touched and can range from mild to severe. A severe allergic reaction is known as anaphylaxis. Anaphylaxis usually has a sudden onset and has the potential to be life threatening. It is important to know if your allergy is anaphylactic in nature because, according to Anaphylaxis Canada, the only treatment for anaphylaxis is adrenaline, otherwise known as epinephrine. Epinephrine comes in an injectable form and should be given at the onset of symptoms.

There are many things that may cause this type of a reaction to occur. Some of the most common triggers include foods such as peanuts, shellfish, eggs and dairy. Allergies to medications, insect stings, or latex are also common causes. An anaphylactic reaction can be fatal within minutes; either through swelling of the airways that inhibits breathing or through a dramatic drop in blood pressure, often leading to a loss of consciousness. Some common characteristics of most anaphylactic reactions include:

- ✓ Swelling of the throat, lips, tongue or eyes
- ✓ Difficulty breathing or swallowing
- ✓ Generalized flushing, itching or redness of the skin
- ✓ Increased heart rate
- ✓ Anxiety, weakness, or collapse

When an anaphylactic reaction occurs, it can be very scary for everyone involved. When it happens to a child who is away from the comfort of a caregiver, such as in the school setting, panic may set in rather quickly. Communication is very important to anyone who cares for a child with an anaphylactic allergy and it is essential they are aware of the allergy and know what to do if it occurs. The child should always be prepared and carry epinephrine with them at all times. Two doses of epinephrine should be available, especially when in school, as one dose may not be enough. Sometimes, a second

dose must be administered within 15 minutes until the child can receive emergency services from authorized medical personnel. Often parents think that it is acceptable to give their child Benadryl, or some other form of antihistamine at the beginning signs of an allergic reaction and “see what happens”. This is ineffective, as antihistamines are only appropriate to treat common allergies, and are not to be used as a first line of defense against anaphylaxis.

Putting every effort into preventing the reaction from occurring should always be priority. Children should be taught to be aware of their triggers and avoid them if at all possible. When old enough, children should learn to read food labels, and to recognize any item in the ingredient list that may cause an allergic reaction. According to Health Canada’s recent research, a person with an allergy should be aware of the *may contain* items listed on product labels as well. These foods should be avoided as they were made in facilities that manufacture other foods with the “trigger” ingredient.

Schools do their best to provide a safe atmosphere for all students by creating an allergy aware environment. There are plans in place and policies to follow should an event occur in the school setting. But unfortunately, nothing can be guaranteed 100% safe and prevention is not always possible. As the school year begins, I encourage you to think about the health and safety of your child, or the child of someone you know. It is important to communicate with your friends, family, daycares and schools; the more we know, the more we become aware of the severity of anaphylaxis.

If you have a specific question regarding the plan of care for your child, contact the Community Health Nurse in your area. For more general information, please visit www.anaphlaxiscanada.org

Ulrica Pye

Parent & Child Health Coordinator