

Delicious & nutritious PEANUTS

ALL ABOUT PEANUT ALLERGY: FREQUENTLY ASKED QUESTIONS

Q: What is peanut allergy?

A: When you have peanut allergy, your immune system mistakes peanut protein as harmful. Your body responds to it by having an allergic reaction.

Q: Are food allergies life-long?

A: Children commonly outgrow food allergies. However, allergies to peanuts, tree nuts, fish, and crustaceans and molluscs are usually life-long.

Q: If someone is allergic to peanuts, will they be allergic to other tree nuts, and vice versa?

A: Peanut is a part of the legume family and is not a tree nut; however, while peanuts and tree nuts are different, in some cases people with a tree nut allergy may also react to peanuts. If you have a peanut or tree nut allergy, consult your allergist before eating tree nuts that are not a regular part of your diet.¹

Q: Are there reasons why peanut allergy is so severe?

A: Peanuts are a complex plant food, with more than 30 different proteins. Research is underway to identify exactly which proteins trigger an allergic reaction, and why the reaction can vary in severity among those with peanut allergy. In Canada, the priority food allergens include egg, milk, mustard, peanuts, crustaceans and molluscs, fish, sesame, soy, sulphites, tree nuts, and wheat and triticale.

Q: Can smelling a peanut cause a severe reaction?

A: No, simply smelling the aroma of peanuts is not the same as breathing in protein particles which may cause an allergic reaction. The chemicals which are detected as the odour of peanuts are aromatic molecules called pyrazines and, alone, are incapable of causing allergic reactions.

Q: Are peanut allergies increasing?

A: Food allergy is a growing public health issue. Some hypothesize that the lack of early childhood exposure to infectious agents and parasites has increased susceptibility of allergic disease. The lack of early childhood exposure to peanut has also been linked to increased peanut allergy. It's difficult to determine if the increased reports of peanut allergy are due to actual increases in incidence, or a result of increased awareness among consumers and health professionals.

Q: How is a severe allergic reaction to peanuts treated?

A: Epinephrine is the first-line treatment for a severe allergic reaction (anaphylaxis). It helps to slow the progression of the reaction and is more effective if given early. Follow these 5 steps:

1. Give an epinephrine auto-injector (e.g., EpiPen® or ALLERJECT®) right away.
2. Call 9-1-1 or your local EMS immediately and tell them someone is having an anaphylactic reaction.
3. Use a second auto-injector as early as 5 minutes after giving the first dose if there is no improvement in symptoms.
4. Go to the nearest hospital right away (ideally by ambulance), even if symptoms are mild or have stopped. The reaction could get worse or come back.
5. Call emergency contact person (e.g., parent).

An allergist may give you personalized advice for the steps to take after an epinephrine auto-injector is given (step 1).

Q: Can anything be done to manage peanut allergy and prevent a reaction?

A: The only certain way to prevent a reaction is avoidance. With proper management, awareness and education, most reactions to food allergens can be avoided. You can also speak to your allergist about other possible treatments for peanut allergy.

Individuals with food allergy should diligently read all food labels and ask questions about foods prepared away from the home (such as at school or a restaurant). In the day care or school setting, parents of a child with food allergy should inform teachers and school staff, so they are prepared to recognize and treat severe allergic reactions immediately and seek first aid.

In consultation with their physicians, individuals with food allergy and at risk of anaphylaxis should always carry their epinephrine auto-injectors and should also consider wearing an identity bracelet or medallion to alert others that they have food allergy.

Q: How much peanut must be ingested to cause a reaction?

A: The amount of a food required to cause a reaction varies by person, and in some people, it can be triggered by a small amount.

Q: Should peanut oil be avoided?

A: The process of refining oil significantly reduces or, in some cases, removes the protein which would trigger an allergic reaction. Highly refined oil typically does not pose a problem for those with allergies. However, oils which are cold pressed to retain their flavour, or oils that have been used to cook peanuts do contain protein and therefore should be avoided. Before consuming products with highly refined oils, you should discuss with your allergist to determine if these products can be an option for you.

Q: Can peanut products be made less allergenic by cooking them?

A: Peanut protein remains in the food during heating. You cannot completely remove it through heat.

Early introduction

Q: When should peanut be introduced to infants and children?

A: Recommendations for the introduction of common allergens, like peanuts, to infants have changed as research has emerged on ways to help prevent the development of food allergy in babies.

A 2021 position statement co-published by the Canadian Paediatric Society (CPS) and the Canadian Society of Allergy and Clinical Immunology (CSACI) includes recommendations on the specific timing of early introduction of allergenic foods for high-risk infants. The current guidance is to actively offer non-choking forms of foods containing common allergens (e.g., peanut) around 6 months of age, but not before 4 months, as this can be effective in preventing food allergy.²

Infants who are not considered high-risk should start to receive complementary foods when they are around 6 months of age.

Infants must be developmentally ready for solid foods.

Q: How often should peanut protein be fed to an infant?

A: Once an infant has eaten peanut protein, and if there is no allergic reaction, it's very important to keep feeding peanut protein to the baby. It is recommended to feed peanut protein about 2-3 times per week to help prevent the development of a food allergy.³

Q: How should peanut be introduced to young infants?

A: It is recommended that parents feed their baby, rather than having their baby self-feed (baby-led weaning). This is because food smeared on a baby's skin may cause skin irritation that can be mistaken for allergy.³

Keep in mind that whole peanuts are a choking hazard and should not be given to children under four years of age. Prepare peanut as follows:

1. To 2 tsps of smooth peanut butter, add 2-3 tsps of hot water
2. Stir until dissolved and well blended
3. Allow to cool

This mixture can be offered alone or added to an already tolerated infant food (e.g., cereal, pureed fruit). Another option is a peanut puff product (e.g., Bamba), which can be softened for younger infants.³



Peanuts and pregnancy

Q: Will my child develop a peanut allergy if I eat peanuts and peanut butter while pregnant and/or breastfeeding?

A: In general, there is still insufficient evidence to recommend changing a mother's diet to prevent food allergy (i.e., by avoiding or ingesting particular allergenic foods during pregnancy and while breastfeeding).

Specific to peanut allergy, some studies suggest that mothers who consume peanut while breastfeeding may decrease the risk of peanut sensitization, provided this is done in tandem with the early introduction of peanut protein in the infant's diet. However, these studies remain insufficient to support a recommendation to actively consume peanut protein during breastfeeding.²

References

1. Health Canada. Tree Nuts: Priority food allergens 2017. <https://www.canada.ca/content/dam/hc-sc/documents/services/food-nutrition/reports-publications/food-safety/2017-treenuts-noix-eng.pdf>
2. Abrams, E., Orkin, J., Cummings, C., Blair, B., Chan, E., Canadian Paediatric Society. Dietary exposures and allergy prevention in high-risk infants. *Paediatrics & Child Health*. 17 December 2021. <https://cps.ca/en/documents/position/dietary-exposures-and-allergy-prevention>.
3. Food Allergy Canada & Canadian Society of Allergy and Clinical Immunology. Eat Early. Eat Often. <https://foodallergycanada.ca/wp-content/uploads/Eat-Early-Eat-Often.pdf>