

Paediatric Food Allergy and things GP can do

Younger children have cow's milk allergy egg allergy and peanut allergy

Older children have peanut allergy [as it persists life long] fish allergy and fruit allergy

Cow's Milk Allergy reactions can be immediate or delayed showing as increase of eczema on weaning reflux abdo pain diarrhoea. Hot Topics adds constipation.

Worth trying extensively hydrolysed formula [Aptamil]. And refer to Peds. They can refer to dietician who can introduce foods with a milk ladder of increasing milk content. With drawing milk altogether in older children and reintroducing it has a risk of severe reaction [says Mosby's Illustrated Textbook of Paediatrics] so I would leave this to the Pediatricians. Cow's Milk Allergy often declines as child gets older.

Egg Allergy also declines as child gets older. Cooking egg may reduce the allergy. Again I would refer and dietician can introduce an egg ladder. As with milk I would not risk withdrawing and reintroducing in case there is a bad reaction.

Peanut Allergy is lifelong. Often associated with eczema and other food allergies. It is thought that introducing peanuts into the diet from 6 months will prevent.

Any acute food reactions should be referred to an allergy clinic for an EpiPen especially if asthma is also present

The Oral Allergy Syndrome occurs in older children due to the cross presence of allergy causing proteins in various plants. It consists of mouth symptoms tingling and swelling. Antihistamines and

monteleukast can be effective and lists of fruits and vegetables in groups that share the allergenic protein are available on Google.

Skin tests IGE and RAST tests are better left to the Pediatricians or Dermatologists. Positives may not correlate with clinical symptoms and Eczema causes increased non clinically relevant responses.

Eczema can be worsened by food allergies. Trial of Aptamil and referral for allergy tests and dietician.

Rhinitis with or without asthma is less associated with food allergies.

Antihistamines cromoglycate eye drops and monteleukast are effective.

I looked at the Hot Topics 2016 and their advice agrees with this