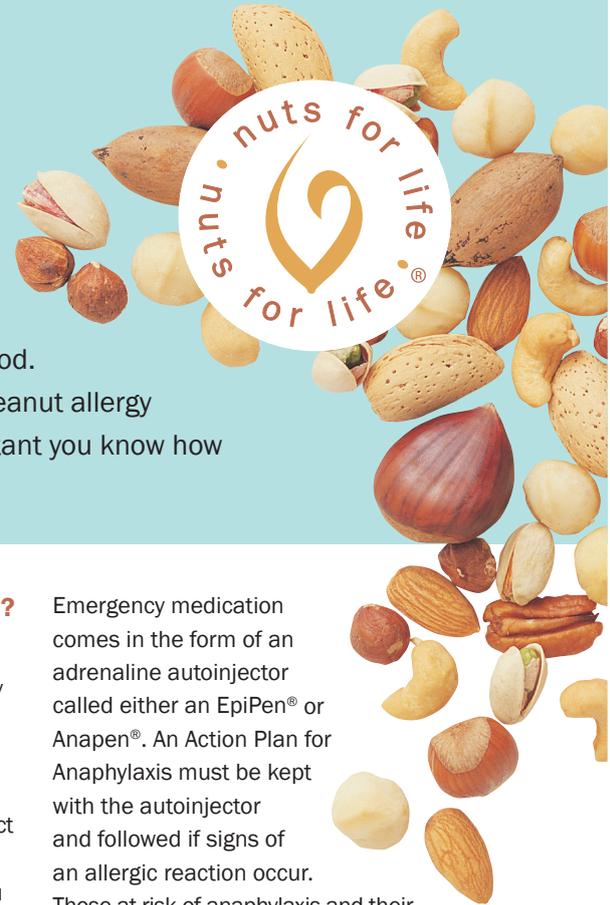


Nuts and allergy

Tree nuts such as **almonds, Brazil nuts, cashews, chestnuts, hazelnuts, macadamias, pecans, pine nuts, pistachios** and **walnuts** are full of beneficial substances for good health. Despite this, *tree nut allergies*, are a common food allergy in infants and children, that can persist into adulthood.

While peanuts are a legume and not a tree nut up to a third of those with peanut allergy will also have a clinical tree nut allergy.¹ If you have a nut allergy, it is important you know how to manage it correctly.



What is a food allergy?

A food allergy occurs when the immune system reacts to an allergen (a protein) in a food. If you have an allergy to tree nuts, your reaction is likely to occur within 20 minutes to 2 hours of eating them and can rapidly progress to life threatening. Food *allergy* is different to food *intolerance*. Food intolerance does not involve the immune system and reactions are often mild, occurring many hours after eating the food. It's important to distinguish food intolerance from a food allergy. If you have food intolerance, you can usually eat small amounts of problem foods without a reaction as you can "tolerate" small quantities. By contrast, if you have a true food allergy, even a tiny amount of the food may trigger a serious reaction.

How common are nut allergies?

At this stage the prevalence of Australian adult tree nut allergy is unknown although studies overseas suggest between 1.1–2.0% of the population.^{2–5} For Australian children one study of primary school entrants from 2009 described a parent-reported food allergy prevalence of 3.8% for any nut and 3.5% for peanut.⁶

Although as many as one in ten Melbourne based infants at 12 months can have a food allergy,⁷ only one in around 1700 are likely to have anaphylaxis.^{8,9} This Australian population-based HealthNuts study defined food allergy on the outcome of oral food challenge and reported a peanut allergy prevalence of 3.0% in one year olds in Melbourne.⁷ Tree nut data from the HealthNuts study is yet to be published. International studies indicate a children's prevalence of tree nut allergy is between 1.8%–2.0% of the population.^{5, 10–12}

How are tree nut allergies diagnosed?

All food allergies are diagnosed by way of testing and from clinical history. A university trained medical allergy specialist reviews results of a skin prick test and/or blood test and asks questions on what has happened on previous exposure to the suspect food/s. A diagnosis is made based on both the patients' history and tests results. If you suspect you have a tree nut allergy, ask your doctor for a referral to an allergy specialist.

Signs and symptoms of a mild to moderate allergic reaction to any food

In people with food allergies, common reactions include:

- Swelling of the lips, face, eyes
- Hives or welts
- Tingling in the mouth
- Abdominal pain, vomiting

Signs and symptoms of a severe allergic reaction or anaphylaxis

- Difficult/noisy breathing
- Swelling of the tongue
- Swelling/tightness in the throat
- Difficulty talking/ hoarse voice
- Persistent dizziness or collapse
- Young children can become pale and limp

Any allergic reaction has the potential to become life threatening however most allergies are mild or moderate. Someone who has previously had anaphylaxis is at greater risk of another episode. Whilst the prevalence of food allergy and anaphylaxis has increased this decade, death from anaphylaxis remain rare. Teenagers and young adults with peanut and tree nut allergy are at greatest risk of fatal allergic reactions. Those at high risk of anaphylaxis who have been prescribed an adrenaline autoinjector should keep their adrenaline close by (and easily accessible) at all times.

Emergency medication comes in the form of an adrenaline autoinjector called either an EpiPen® or Anapen®. An Action Plan for Anaphylaxis must be kept with the autoinjector and followed if signs of an allergic reaction occur. Those at risk of anaphylaxis and their carers need always be prepared for accidental ingestion. Parents can teach their allergic children, at an age appropriate time, to manage their condition by encouraging them to ask questions, read labels, identify nuts,¹³ and carry and administer medications. Children and teens with allergies need to feel comfortable and secure in their ability to make their own decisions about food. Peer support is also an important part of this process.

What is the best treatment for tree nut allergy?

If you have a known allergy to one type of nut, it is often recommended that you avoid all nuts until carefully controlled and administered medical food challenge tests can determine if you are allergic to other nuts. You will require a definite diagnosis

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For information on anaphylaxis go to www.allergyfacts.org.au or www.allergy.org.au

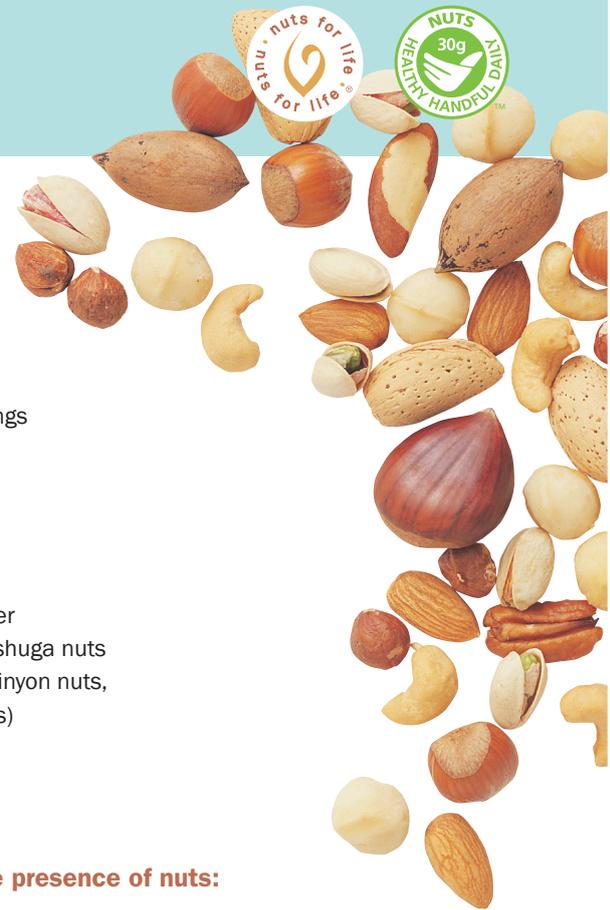
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Nuts and allergy



and a planned approach that avoids the allergic food. Consultation with a Clinical Immunologist and Allergist is recommended. It may mean that you will need to avoid certain nuts but may be able to eat others from their shell. Reading ingredient labels for all foods, cosmetics, lotions, medication (both over the counter and prescribed) and herbal treatments is also key. If unsure about the ingredients in a product, do not eat or use it until you have contacted the manufacturer. Consultation with an Accredited Practising Dietitian (APD) who specialises in food allergy may also help.

How do I know if a product contains nuts?

In 2002 it became law to state the presence of commonly allergenic foods (including nuts) on packaged food labels.

Always read ingredient lists carefully. If you have a nut allergy, avoid products that contain the nuts you are allergic to. Some common nut ingredient terms are listed here. This list has been developed as a guide only. Other ingredients may contain, or have come into contact with, nuts. Always check with the manufacturer if you are unsure.

In addition to this labelling, many food manufacturers choose to highlight the risk of accidental cross-contact between products that do contain allergens and products that do not contain allergens, sometimes using statements such as "May contain traces of peanuts or tree nuts".

If you have been cleared to eat certain types of nuts it may be best to buy those nuts in shell to avoid any cross-contact between nut varieties. Remember too if eating away from home, always ask about food content; do not presume food 'should' be fine because you have had that dish before or have eaten at that venue before.

How to get all the nutrition that nuts contain so you're not missing out?

If you do have nut allergies a balanced diet will give you the nutrients you need to maintain your health and wellbeing. By excluding nuts and products that contain nuts you may need to pay extra attention to the foods that make up your daily diet. If you believe you may be missing essential nutrients as a result of dietary restrictions you can consult your doctor or your local Accredited Practising Dietitian who has experience in food allergy.

Nut ingredients:

- Almonds
- Amoretto
- Artificial nuts
- Bitter almond
- Brazil nuts
- Bunya nuts
- Carponata
- Candle nuts
- Cashews
- Chestnuts
- Gianduja
- Hazelnuts/Filberts
- Hickory nuts
- Indian nuts
- Macadamia nuts
- Mixed nuts
- Nangai nuts
- Non-gai nuts
- Natural nut extract
- Nut butters
- Nut flavourings
- Nut meal
- Nut oil
- Nut paste
- Nut pieces
- Peanut
- Peanut butter
- Pecans/mashuga nuts
- Pine nuts (pinyon nuts, pignolia nuts)
- Pistachios
- Shea nuts
- Walnuts

Check these products/dishes for the presence of nuts:

- African dishes
- Asian/Indian dishes
- Baked goods
- Biscuits
- Breakfast cereals
- Chocolate
- Chocolate spreads
- Dried fruit mixes
- Flavoured coffees, drinks
- Frozen desserts
- Health food/muesli/nut bars
- Ice cream
- Marzipan/almond paste
- Mexican dishes
- Nougat
- Pastries
- Pesto
- Salads
- Vegetarian/vegan dishes

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Allergy & Anaphylaxis Australia has reviewed this fact sheet.