



# Recognizing And Dealing With Nut Allergies



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## **Introduction**

When children, all of us had foods that we really like, and many that we really believed we hated!

Often, to the adults in our young lives, these likes and dislikes make no sense whatsoever, and more often than not, they are correct to adopt this view. For instance, as a kid I loved tomato soup but hated tomatoes and tomato juice, which I admit makes no sense whatsoever!

As we grow older, most of us grow out of these likes and dislikes, simply because that is all they were – little more than a passing phase of liking or disliking something.

For a large number of people, however, the problem that they have with food is more far reaching and serious than this.

For these people, certain foodstuffs will trigger an adverse physical reaction, and while not all of these people are completely allergic to any particular foodstuff, their bodily reaction might indicate otherwise.

In the West, the most common food allergy is to peanuts, while allergic reactions to tree nuts are far less common.

Despite this, however, most people know little about peanut allergy, or any other form of adverse reaction to nuts.

They would, therefore, have very little chance of recognizing such a condition in friends or family members, and this can be a particularly serious problem for the parents of young children for whom peanut allergy can be an extremely serious and distressing problem.

This book will teach you what you need to know about such allergies, focusing primarily on peanut allergy (as this is the condition which most people are likely to be exposed to), other adverse reactions to peanut-based products, and what you can do to deal with those problems.

In the last few pages of the book, we will look at a few of the important facts about tree nut allergies.

## **Peanuts are not the same as nuts...**

All available statistics indicate that the food allergy most widely suffered by the greatest number of people in the West is to peanuts.

It is, therefore, important to understand what peanuts are, and more importantly, what they are not.

A peanut is distinct from tree based nuts, in that it is a legume rather than a true nut. It is a close relative of the soy bean, kidney bean, garden pea and lentil.

Such plants carry nitrogen fixing bacteria on their roots, and, as a result, they add extra nitrogen to the soil in which they grow. This enriches the soil, and it is for this reason that such plants are extremely popular with farmers as crops.

A tree nut, on the other hand, is generally the dried fruit of that tree, and while tree nut allergy is every bit as severe as peanut allergy, it is far less common.

Because they are entirely different, it is possible that people can be allergic to peanuts while they are perfectly okay with tree nuts, and vice versa.

However, for some reason that is not yet fully understood, there does seem to be some correlation between peanut and tree nut allergies. While there appears to be no particular reason why a peanut allergy sufferer should be more susceptible to having the same problem with tree nuts than anyone else, a high percentage of peanut allergy sufferers also suffer adverse effects when they consume tree nuts.

It has also been established that children who suffer a peanut allergy are more likely to suffer other food allergies, including tree nuts, in adulthood. There does, therefore, appear to be some connection between the two, probably because of a general weakening of a food allergy sufferer's immune system.

## **Some alarming peanut statistics...**

In the USA alone, it is believed that up to 1.5 million people may be allergic to peanuts. While the USA is a major producer and consumer of peanut based foodstuffs, this picture is broadly mirrored in other major Western civilizations.

According to the Asthma and Allergy Foundation of America, an allergic reaction to peanut consumption is the largest food related cause of death in the USA.

In numerical terms, based on statistics produced by the Food Allergy & Anaphylaxis Network, around 100 people will die every year in the USA as a result of an adverse reaction to peanuts. This is out of a total of approximately 150 people who die every year from an allergic reaction to foods, so peanut allergy is clearly the most serious food allergy in the USA.

The same advisory group believes that an adverse reaction to peanuts is responsible for 15,000 emergency room visits every year as well.

While approximately 0.5% of adults and children have a peanut allergy in the USA, approximately 25% of children who are afflicted by this condition will grow out of it in their teens or early adulthood.

# **Peanut allergy essentials...**

## **What is it?**

An allergy to peanuts is a condition which afflicts the immune system of the body, where your body will suffer from a wide range of symptoms following exposure to some of the proteins in peanuts.

Peanut allergy is the most prevalent food allergy in the USA, and for many people, even the minutest amount of peanut-based material in their food can trigger a dangerous and sometimes fatal allergic reaction.

In fact, peanut allergy is the most common food allergy in almost every Western country, although it is extremely rare in the people of Asian and Oriental societies, places where peanuts form a far more important part of the indigenous diet.

Because of its prevalence in the West, however, it is essential to appreciate that it only needs the tiniest exposure to peanut-based proteins to trigger a severe allergic reaction in some people.

For instance, those who are most sensitive to peanut-based proteins can suffer a serious reaction to as little as 2 mg of such protein. As a peanut contains around 200 mg protein, this means that such a person will react to anything that contains as little as 1% of a peanut!

Indeed, as evidence of this, you need look no further than this headline taken from 'The Times' newspaper in the UK:

'Death from chip dipped in curry'

An otherwise healthy young woman in her early 20s with a severe peanut allergy and asthma simply dipped her chip (french fry) into a sauce in a restaurant, and died in the ambulance on the way to hospital as a direct result of doing so.

## **How serious is it?**

An allergic reaction to peanut protein is likely to be the most deadly allergic reaction, as it accounts for four out of every five life threatening occurrences of anaphylactic shock in both the UK and the USA.

While it is relatively rare that the peanut allergen will kill you (15,000 people visit emergency rooms as a result of their peanut allergy, but only 100 die every year, so the numbers are on your side!), it is nevertheless extremely dangerous and the effects of peanut allergy can be extremely unpleasant.

## **What is anaphylaxis and anaphylactic shock?**

Anaphylaxis is the word used to define a severe, extreme and rapid allergic reaction that most commonly involves more than one part of the body. In the most extreme circumstances, anaphylaxis is fatal.

The word anaphylaxis itself was coined by scientists who were attempting to immunize animals from poison by injecting them with a small dose of that same poison. In their experiments, the animals invariably died!

However, this process of stimulating an immune condition by using a small dose of the same chemical, which is known as 'prophylaxis', had been used with great success for many years.

The scientists concerned therefore created the term 'anaphylaxis' to suggest a situation where even the smallest dosage of a chemical being introduced to the body could create an extreme adverse physical reaction. Anaphylaxis is a reference to the opposite of the protection offered by prophylaxis.

As far as current scientific thinking is concerned, the word anaphylaxis refers to any allergic reaction, irrespective of how serious it is.

For medical doctors and allergy specialists, however, the term is far more commonly used to describe a severe allergic reaction.

Anaphylaxis might be a potentially life-threatening occurrence if the symptoms include:

- A struggle for breath;
- Moderate to serious stomach or abdominal pain;
- Having difficulty swallowing;
- Vomiting or nausea;
- Hives;
- Diarrhea.

To take this one stage further, an anaphylactic shock is the most severe form of anaphylactic allergic reaction, and it requires immediate medical attention, primarily because it can cause the bronchial tissues of the lungs to expand, which will restrict the sufferer's ability to breathe. At the same time, bodily extremities begin to turn blue, and the face and neck can begin to swell.

In this condition, the sufferer's blood pressure can drop alarmingly and suddenly, and if the condition is not treated, it can lead to death within as little as 10 minutes from the onset of the allergic attack.

However, as long as the patient is in a position where they can receive immediate medical attention, a shot of epinephrine (adrenaline) can be administered to the patient. This will reverse most of the most serious symptoms of anaphylactic shock, and the patient should return to normal quickly.

It is nowadays increasingly common that, once a serious peanut allergy has been diagnosed, patients will be given auto injectors with which to administer their own dose of adrenaline when a serious allergic reaction begins to set in.

Nevertheless, the importance of seeking immediate medical attention for anyone suffering anaphylactic shock cannot be overestimated, because at the present time, epinephrine is the only proven reliable treatment for anaphylaxis.

### **Anaphylaxis and biphasic reaction**

One important aspect of anaphylaxis and anaphylactic shock that many people who do not suffer from food allergies do not understand is that as many as 30% of sufferers will undergo a biphasic reaction to their anaphylaxis.

What this means is that, without any further exposure to the peanut proteins that caused their condition in the first place, they can suffer a further allergic reaction which can in some cases be every bit as severe or serious as the first reaction.

This can occur anything from one hour to eight hours after the original reaction, and this means two things.

Firstly, it is absolutely imperative that anyone who is looking after someone who has suffered an anaphylactic shock as a result of exposure to the proteins in peanuts should keep a very close eye on that person for several hours afterwards. As three out of every 10 food allergy sufferers can suffer biphasic attacks, the chances of the allergic reaction coming back without any further stimulus or warning cannot be ignored.

Secondly, the biphasic nature of anaphylactic reactions to even the minutest trace of the proteins from peanuts makes a peanut allergy one of the most dangerous of all food allergies.

### **Other signs and symptoms**

Not every person who has an allergy to peanuts is going to suffer an anaphylactic shock. Indeed, in the majority of cases, the people that do so are most likely to be those who are otherwise hypersensitive and therefore tend to suffer the most extreme reactions.

Most people will suffer far milder allergic reactions to peanut proteins, but despite this, these reactions will differ and vary in severity from person to person.

The most common symptoms of an allergic reaction to peanut protein might include any of the following, occurring just minutes, up to an hour, after consumption of the offending foodstuff:

- Itchy eyes;
- Stomach ache and/or nausea;
- Tingling lips or tongue;
- Hives;
- Itchy skin rash;

- Runny nose.

After the initial onset of these symptoms, they may well lessen for anyone whose allergic condition is not too serious.

On the other hand, for someone who has a severe allergic condition, these symptoms are more likely to worsen, and could then include:

- Tight throat and labored breathing;
- Coughing, wheezing and choking;
- Extreme nausea and/or vomiting;
- Diarrhea.

With the onset of any of these symptoms, medical help should be sought as quickly as possible, or a dose of adrenaline should be administered as appropriate.

### **Where does your peanut allergy come from?**

An allergic reaction to the proteins in peanuts is unlikely to happen the very first time you consume those proteins.

Indeed, the first time you eat peanuts, for example, it is extremely unlikely that you will suffer any kind of adverse reaction, and you will, most probably, thoroughly enjoy eating them!

When you do so, however, the immune system of your body will begin to develop antibodies to the proteins in those peanuts. A similar thing can happen if you eat foods that have been cooked in incompletely processed peanut oil.

These antibodies are called immunoglobulin E (IgE), and what they are going to do in the future is recognize the peanut proteins that you consume as an unwanted invading enemy.

The next time you consume peanuts or any foodstuff that contains the proteins from them, your body will recognize the proteins, and the IgE antibodies that your immune system previously developed will attack them. You are now suffering an allergic reaction.

This reaction comes about because the IgE antibodies cause certain chemicals to be released into the body, one of which is histamine.

Histamine can adversely affect the efficient working of a sufferer's respiratory system, cardiovascular system, skin and gastrointestinal tract.

Therefore, when you are suffering an allergic reaction as a result of consuming peanut proteins, you will commonly suffer shortness of breath, wheezing, vomiting, stomach ache and so on.

It is reasonable to ask why this should happen. However, scientists have not so far been able to ascertain why peanut proteins should induce some people's bodies to create antibodies in this way, while it does not do so for

the majority. In other words, at the moment, science cannot tell you why some people will develop a peanut allergy, while most will not.

For this reason, it is impossible to predict with any degree of certainty whether any particular individual child or adult will develop a peanut allergy.

However, it is possible to have some idea of children who are more likely than others to develop an allergy to the proteins in peanuts by looking at the medical history of their parents, and in particular at whether either of them has suffered an allergy at any time so far.

If one parent has suffered from any kind of allergy themselves (and, note, this is any form of allergy, and not specifically limited to an allergic reaction to peanuts, or, indeed to any food allergy), then the chances of their child also suffering from an allergy are 50% higher than that of a child of parents neither of whom have ever suffered an allergy.

If, however, both parents have suffered from allergies at any time in their lives, then the chances of their offspring doing so increase to 70% on the same basis.

It can be seen from this that, while science has still not come up with a definite answer as to why some people seem more prone to allergies than others, there does seem to be a hereditary factor involved.

In the majority of cases, when a child is going to develop an allergy of any form, they will start to do so at a very young age. Once they have developed this allergy, then for around three in every four, this will be a lifetime condition, whereas for the other one in four, they will grow out of it as they move into their teens and early adulthood.

### **Peanut allergy versus intolerance**

Some people are intolerant to peanuts and peanut-based foodstuffs. On eating them, they will suffer minor stomach upsets, temporary vomiting and perhaps even a bout of diarrhea.

This is not the same, however, as an outright allergic reaction to peanuts, because then the immune system of the sufferer is not attacking the peanut proteins with antibodies.

All that this is happening is that the person involved might find that peanuts are simply too rich for their metabolism, and they will suffer a mildly unpleasant reaction as a result.

Alternatively, some people will find peanuts (and, indeed, any foodstuff coming from or based on legumes) difficult to digest, and they might suffer indigestion or mild stomach pains as a direct result of this.

However, these are not allergic reactions, as the body is not 'on the attack' in this scenario.

# **Taking in peanut proteins**

## **Through direct contact**

The most direct way for anyone to take in peanuts or anything derived from them is by eating foodstuffs which contain them.

Similarly, consuming foodstuffs that have been cooked in incompletely processed peanut oil is also a direct and straightforward consumption of the proteins in peanuts that cause allergic reactions. In the case of oil, be particularly wary of gourmet or hand pressed peanut oils.

In addition to such types of peanut protein consumption, however, it is also possible to take in traces of peanut proteins if they come into contact with the skin or the lips. Here, the antibodies created by your immune system are every bit as likely to attack these proteins as they would be if you had eaten a peanut butter sandwich!

However, coming into direct contact with the proteins from peanuts that cause severe allergic reactions is entirely preventable as long as you remain diligent and careful.

We will look at this particular aspect of keeping your peanut allergy under control later in this report by focusing on some of the foods that you should be particularly careful with. Before doing so, however, it is important to understand that there are other ways that you can come into contact with peanut proteins which are far more difficult to prevent.

## **From cross-contact**

Cross contact exposure to the proteins that cause allergic reactions will almost always come about completely accidentally.

For example, if a foodstuff company that processes peanuts uses exactly the same machines to process other non-peanut related foodstuffs, then cross contact 'contamination' of the non-peanut related foodstuffs can occur when that machinery is not cleaned thoroughly.

While in most developed countries this is becoming less likely to happen as food hygiene rules and regulations become ever tighter, it is still not impossible, and when it does, there is very little that one can do about this kind of exposure to peanuts based proteins.

Be on the look out for cross-contact contamination possibilities in the home or in every day life as well.

For example, using the same knives and food chopping or preparation area for foods that might contain peanut extracts and those that you yourself eat is a recipe for disaster. Likewise, if other people have used a knife to make a peanut butter sandwich, do not be tempted to use it after them without washing it thoroughly first.

Watch out when you are frequenting common food areas like ice cream parlors as well. Such places commonly use the same scoop for several types of ice cream and, unless you know for a fact that they are scrupulously clean, you could be taking a big risk of cross-contact contamination.

### **Through inhalation**

Some aerosol sprays contain peanut extracts, and for any sufferer from a peanut allergy, being in the same room as someone using such a spray could trigger an allergic reaction.

If someone is using peanut flour for cooking, then microscopically small amounts of that flour can be released into the surrounding air, and become airborne as a direct result. Inhaling these microscopic traces of peanut flour could trigger an allergic reaction in anyone who suffers from a severe allergy to peanuts.

Finally, avoid anyone who is using a peanut cooking oil spraying device, because this will again release microscopically small traces of oil into the air. Anyone who breathes any of those oil traces who suffers from a peanut allergy may suffer a reaction because of doing so.

# What are the most dangerous times and conditions for peanut allergy sufferers?

## Age plays its part...

Most allergies begin in childhood, and that is therefore the most likely time for a peanut allergy (or, indeed, any other kind of food allergy) to impinge on your life.

However, once they understand that they have a peanut allergy, and that eating peanuts will be both unpleasant and potentially harmful, most children are good at avoiding doing so.

However, the same cannot always be said of adults, especially those who are not the parents of the children in question.

This is partially because many people never give a moment's thought to the possibility of other people's children having allergies, and partially because those children are often very shy about talking to adults who are not their parents. While they might, therefore, be able to tell that adult that they cannot eat peanuts or any foodstuffs that contain peanut proteins, their natural shyness might prevent them from doing so.

While the situation is undoubtedly improving, it is still true that not every food that contains traces of peanut proteins will be marked as such. For example, in the last section we saw how foodstuffs might be contaminated with these proteins by cross contact, and that is something that no-one, adult or child, could be expected to anticipate.

Whatever the reason, mistakes will be made from time to time.

However, it seems that most pre-teenage children are far more able to survive allergic reactions than they might be later in life. This is true even of children who have suffered allergic anaphylaxis or even an anaphylactic shock.

For example, it is known that young children who have suffered anaphylaxis as a result of a bee or wasp sting are likely to suffer a far less severe reaction than a teenager or young adult who has been injected with exactly the same amount of venom by the insect.

It is for this reason that the biggest risk period for people suffering from a peanut allergy tends to be the years when they are a teenager or young adult.

For some reason, during these years, the severity of the allergic reaction suffered seems to increase. At the same time, because they are becoming more independent and less under the control of their parents, these are also the years when they are far more likely to eat peanuts or peanut-based products in order to 'test' whether they are still allergic.

Beyond the teens and the years of young adulthood, the risk of accidentally eating peanuts or peanut-based products decreases as most people become more mature and settle down to a far more variable and less risky lifestyle.

Nevertheless, because we all become more vulnerable to medical maladies and ailments as we get older, anaphylaxis is far more likely to kill older people than it is those who are younger. This is a natural extension of the fact that, as we age, our hearts become weaker and our arteries are hardening, making us all more susceptible to suffering fatal attacks of one form or another.

### **So do other medical conditions**

It is not only age that makes you more susceptible to suffering fatal anaphylaxis or anaphylactic shock, however. There are some medical conditions that will also exacerbate the severity of the problems that you will suffer as a result of a severe allergic reaction of this nature.

For instance, if you have asthma, then the risks associated with having a peanut allergy become considerably more significant.

Given that one of the most common effects of suffering anaphylaxis is that you become short of breath, then anyone suffering from asthma is likely to suffer far more severely than someone who is not.

For this reason, if you suffer any kind of allergy, it is important that you always carry your asthma treatment with you at all times, so that, if you do suffer an allergic reaction, you can try to prevent your asthma making that reaction any worse.

### **Will your reaction always be the same?**

If you have an allergy to the proteins in peanuts and you are fortunate enough to suffer only a mild reaction, then you might question whether the severity of your reaction will always be the same.

While in many cases this does seem to be the case, it is not always so. There are exceptions and, while the overwhelming majority of allergic reactions to peanuts do not kill, there are reports of people who have previously suffered only minor allergic reactions subsequently dying from an unexpectedly severe reaction and subsequent anaphylactic shock.

For this reason, most scientists and medical authorities regard an allergy triggered by the proteins in peanuts to be dangerous, irrespective of the severity of allergic reactions that any individual person has previously endured.

# Things to know about epinephrine

## Side effects of epinephrine

As stated earlier, the only known medical treatment for anaphylaxis or anaphylactic shock is an injection of epinephrine, which is adrenaline.

Because of the intrinsic nature and character of adrenaline, there are some mild side-effects that you can anticipate when you are injected with epinephrine.

These include trembling, mild palpitations (a feeling that your heart is beating faster) and sometimes a feeling of increased tension or anxiety. Given that your body reacts in exactly the same way when it produces adrenaline naturally, these side-effects should come as no great surprise, nor should they be a significant concern.

They are likely to be temporary, and pass off within a matter of a few minutes.

Indeed, not everyone will suffer these side-effects, as people react to drugs and medicines in different ways.

It is, however, important that the dosage given to treat a severe allergic reaction is carefully controlled, because high doses of epinephrine can cause extremely unpleasant side-effects, and can be very dangerous at the same time.

This is particularly significant as it is becoming increasingly common for medical professionals to allow people who suffer from an allergy to peanuts to administer their own epinephrine by auto injection, or for parents to give the medicine to their children.

No matter how serious or severe anaphylaxis seems to be, never be tempted to exceed the recommended epinephrine dosage, because doing so can in itself be extremely dangerous.

## When should I administer or use epinephrine?

Assuming that your medical professional allows you to self dose with epinephrine, or administer it to your family members, you need to know when to use epinephrine.

To a certain extent, opinion on this matter varies from one medical professional to another, and what your own doctor has told you might be different from what another doctor tells their patient in exactly the same circumstances.

For instance, some medical practitioners recommend that you should take (or administer) epinephrine at the first indication of an allergic reaction, no matter how severe or mild it might be. On the other hand, there are medical professionals who recommend that you should withhold the drug until you

can clearly see that the allergic reaction or attack is becoming worse, rather than receding.

No matter whose opinion you listen to or follow, however, you should certainly never wait until you or the family member you are caring for becomes incapacitated by the allergic reaction. In other words, it is not necessary to wait until a full-blown case of anaphylactic shock sets in before administering epinephrine, because by that stage, the severity of the reaction is becoming life-threatening.

In effect, rapid progression of symptoms is always a danger sign, and you should be ready and willing to react if that happens. On the other hand, if you or your child is simply feeling a bit itchy or a little tingly round the lips, and the condition does not seem to worsen, then by all means hold off giving the epinephrine until it becomes necessary.

If, on the other hand, your child is already lying unconscious on the floor and suffering great difficulty in breathing, then it might already be too late, so there is always a judgment call to be made.

In order to make this call, try applying these three simple rules to the situation in which you find yourself:

- Is there a definite reaction? It does not really matter what the symptom is that answers this question for you, as long as you have a definitive answer.
- It is the situation deteriorating and the condition of the sufferer becoming worse?
- Does it seem possible or (even worse) likely that anaphylactic shock or death could result within five or 10 minutes if you do not administer epinephrine?

The bottom line is that, while you should never administer or use any form of drug or medicine unnecessarily, if you are in any doubt, do not be scared of using epinephrine in the correct dosage.

## **Other treatments and prevention**

Although epinephrine is the only treatment that can adequately deal with anaphylaxis, there are a few other medical preparations that you can take which might help alleviate the worst of your peanut allergy. It is important to understand, however, that none of them will actually get rid of or 'cure' your allergy, because there is no medicine that will do that.

### **The first defense...**

The first barrier to suffering an allergic reaction to peanuts or peanut-based products is to carefully and vigilantly monitor everything that you eat. By managing your diet in this way, you can easily cut out 95% of the potential risks by simply avoiding foodstuffs that could have come into contact with or been made using peanut proteins.

Like most situations in life, it is impossible to remove 100% of the risk as we have already seen, but by being careful about what you eat, you can make sure that your allergic 'attacks' become very much the exception in your life, rather than the norm.

### **Antihistamines**

For some people who have discovered that they suffer an allergic reaction to peanut proteins, antihistamines can be taken as a way of delaying the full onset of a peanut allergy, or offsetting the severity of subsequent allergic reactions.

We saw earlier that when your body's immune system first creates IgE antibodies, those antibodies generate and release histamines. As the name suggests, antihistamines counteract the worst effects of those chemicals, hence their effectiveness in offsetting the severity of a histamine-prompted allergic reaction.

In some countries, appropriate antihistamines are available over the counter without prescription, meaning that you can get simple access to drugs that will bring some relief to a percentage of peanut allergy sufferers. This is not true of every country, nor will antihistamines work for everyone, but if you are able to get them easily, it may well be worth trying to see whether antihistamines make any difference.

One final note about the use of antihistamines. They are only effective when the allergic reaction that you undergo is mild, and should be used in conjunction with – not as a replacement for – epinephrine when the reaction being suffered is severe or in danger of becoming so.

### **TNX-901**

Back in 2003, a brand new drug known as TNX-901 was reported by the New England Journal of Medicine to be a breakthrough treatment which would go a long way to alleviating the worst effects of peanut allergy.

Because the early trials of the drug indicated that a monthly shot seemed to serve as an effective way of increasing tolerance levels in people who suffered from allergic reactions to peanut protein, TNX-901 was 'fast-tracked' by the FDA.

That did not prevent delays, so that, at the time of writing (2008), TNX-901 is still not commercially available.

However, when it eventually comes on to the open market, it is still extremely important to understand that TNX-901 is not a cure for anyone who suffers from a peanut allergy. What it did manage to do during the clinical trials was allow peanut allergy sufferers to consume higher levels of peanut protein before suffering an adverse allergic reaction than they had previously been able to do.

While this does not mean that they should wantonly expose themselves to risk by deliberately consuming peanuts and peanut byproducts, it would mean that should they accidentally consume the protein that would under other circumstances trigger anaphylaxis with a far lower level of risk.

## **Foods to avoid for peanut allergy sufferers**

It is extremely important that anyone who suffers from a peanut allergy understands that there are certain foods that they must stay away from in order to avoid exacerbating their condition.

While it is always important that you educate yourself as to what these foods are, you should also learn to read and understand food packaging labels and the ingredients that those foods contain.

It does not stop there, however. You must, for example, be extremely vigilant and careful about oils or creams that you apply to your skin, because it is possible that traces of peanut proteins can get into your bloodstream in this way.

No matter how careful you are, it is virtually impossible to guarantee that you never come into contact with any foodstuff or products that contain traces of peanut proteins, but you must always be on your guard. You must also be willing to take the time and make the effort to read the labels and ingredient lists on everything that you ever eat, cook with or rub on your skin.

On the following couple of pages, you will see a list of foodstuffs that you must avoid if you have a peanut allergy. Some of these are obvious, while others are perhaps less so, but they can all contain peanut protein and eating them will, therefore, expose you to a risk of allergic reaction.

You will note that peanut oil is not included on this list, while it has already been mentioned on two or three occasions in this book.

This is because completely pure peanut oil has all of the harmful proteins removed from it during the purifying process. However, lots of the peanut oil that is commercially manufactured and bought from supermarkets and hypermarkets is not completely purified, and it will therefore still contain trace elements of the proteins that anyone with a peanut allergy needs to avoid.

For that reason, while peanut oil is not included on this list, you should nevertheless avoid eating foods that are cooked using it.

Also, do not made the mistake of thinking that, because a particular foodstuff is not included in this list it will be safe for you to eat.

New food products come onto the market almost every day, while some of those that have been around for some time regularly undergo changes to the manufacturing process.

Furthermore, the diet that you eat everyday will, to a certain extent, be dictated by where you live, because while some products are available internationally, many others are only available in their country of original manufacture.

For all these reasons, it is impossible to produce a comprehensive list of every foodstuff that might contain peanut proteins that covers the whole world!

While the following list covers many of the most common foodstuffs that contain peanuts and/or peanut extracts, the simplest answer is always going to be, if you are in any doubt about eating something – anything – do not do it!

Peanuts are used in many dried, bottled or canned processed foods as a thickening or emulsifying agent. In addition, pre-prepared food and fried pre-prepared foods, including such dietary staples as roasted chicken, may also include peanuts as a flavor enhancer.

On top of that, all of the following can contain peanuts or peanut byproducts in which traces of the protein that cause an allergic reaction can still be found. If you are thinking of eating any of these, you should ensure that you check and double check the label before doing so:

### **Common foods to avoid**

- Peanut butter;
- Peanut flour;
- Sunflower seeds;
- Granola;
- Commercially produced breakfast cereals;
- Mixed nut products;
- Salad dressing;
- Energy bars;
- Whole or full grain bread;
- Store baked biscuits or cookies;
- Baking mixes;
- Sauces (peanuts are often used as a thickening agent);
- Soups (especially dried soup mixes);
- Egg rolls;
- Ice cream;
- Pesto;
- Satay sauces;
- Chocolate ice cream;
- Nutella spread;
- Vegetarian burgers and burger mixes;

- Nougat;
- Marzipan.

As suggested above, although pure peanut oil commonly has all of the harmful proteins processed out of it, other cooking oils such as those marketed as 'Groundnut Oil' will have the proteins largely left intact because they add extra flavor to the oil, and therefore to the food that is cooked in it. For that reason, they are to be avoided.

## Food labeling and our immune systems

Because the general awareness of the seriousness of peanut allergy sufferers consuming peanuts has improved in leaps and bounds over the past few years, food labeling standards have also improved immeasurably.

Food labeling standards are becoming more uniform and standardized on a global basis as well. The international organization that controls matters such as food labeling and global standardization is the Codex Committee on Food Labelling (CCFL), which was originally founded in 1963, and now boasts 72 member nations, in addition to the European Union and 27 international organizations, as members.

The CCFL has done much over the years to ensure that the ingredients that could potentially harm consumers are always clearly marked on the label, so that it is now almost universally accepted that any products that contain peanuts or peanut protein should be marked as such.

It is not always specifically necessary that peanuts are mentioned on food labels by name, however. For this reason, be on the lookout for 'alternative' label descriptions that might suggest or imply that there could be peanuts in the food that you are investigating, such as:

- 'may contain peanuts/nuts'
- 'produced on equipment shared with nuts or peanuts'
- 'produced in a facility that also processes peanuts/nuts'

As long as consumers are willing to read the labels, it is almost impossible to eat or consume any product that contains peanuts by accident.

It is therefore surprising that the incidence of peanut allergies has shown a sharp increase over the last 5 to 10 years, not only in the USA, but also in Australia and the UK as well.

One theory as to why this is happening is that children are being introduced to peanuts and products that contain peanut matter at a younger age. Given that peanut byproducts are still commonly used in the manufacture of candy in many countries, this may be a valid point.

Another theory suggests that because processed soy byproducts are nowadays used in commercially available baby milk formulas, this encourages the immune systems of even the youngest babies to start producing antibodies at an extremely young age.

From there, it might only be a small step to a point where those antibodies are used to defend the body against peanut protein, hence soy byproducts are doing the groundwork that allows a peanut allergy to develop a little later.

Perhaps the most interesting theory is that modern man has a less effective and combative immune system, due to our increasing use of antibiotics,

vaccinations and fewer impurities in our foodstuff because of improved food processing procedures.

Whatever the reason, peanut allergies in children are becoming increasingly common, and that represents a worrying trend.

## **The dangers of eating out**

Although not politically correct to use the terminology nowadays, there was a time when those who suffered from a peanut allergy were said to have 'Chinese restaurant syndrome'.

This is because while peanuts are not widely used in Western cuisine, across the whole of Asia and the East, peanuts are an essential ingredient of a huge range of dishes and cooking styles.

For this reason, whenever eating in an Asian or Oriental restaurant, it is a reasonable assumption that peanuts will have been used in many of the dishes on the menu.

While an large number of restaurants will highlight the dishes that are made with peanuts (or sometimes tree nuts) on the menu, it is not safe to assume that they all will.

While peanut allergies are increasingly common in many Western countries, it is rare to hear of people in Eastern countries who suffer from a peanut allergy.

This is partially as a result of the propensity to use peanuts in almost every principle style of cuisine across Asia, so that people have been used to eating peanut-based foodstuffs over many generations and hundreds of years. Their digestive systems have long since got used to dealing with peanuts and peanut proteins.

This does, however, have one negative side-effect as far as a Western restaurant-goer is concerned. Because many restaurants owners and workers have never suffered any problems with peanuts themselves, nor have they ever met any compatriots who have, mentioning that a particular dish contains peanuts might seem irrelevant.

Always ask, and try to address your question to someone who knows what they are talking about, like the manager or the chef. If you're still left in any doubt, then the simple answer is to take no chances.

If you are not certain what is in it, do not be tempted to eat it, no matter how good it looks!

## Cooking without peanuts

While exponents and lovers of Asian cuisine could not possibly imagine cooking without peanuts, it is far easier to do this when cooking Western-style because peanuts have never been an important ingredient of the majority of common, every day dishes with which most of us are best acquainted.

It is therefore easy to create meals appropriate to every time of the day without having to resort to using peanuts or any product that could possibly contain the peanut protein that is going to set off a reaction in any peanut allergy sufferer.

A quick web search using Google indicates that there are over 1200 websites where 'peanut free recipes' are available:

Results 1 - 10 of about 1,280 for "[peanut free recipes](#)".

While some of these sites will undoubtedly be selling cookbooks that feature peanut free recipes, there are also quite a few where such recipes are available for free.

For example, the excellent ['Meals For You' website has a peanut free page](#) featuring over 40 peanut free recipes. In addition, every one of these recipes highlights other essential nutritional information like the calories that each dish contains, the amount of fat in it, the cholesterol content and the amount of carbohydrates.

One of the beauties of using many of the recipes from this particular site is that the majority of them are straightforward.

Also, the final results of the handful of recipes that I have already tried are never less than delicious!

For example, the recipe for 'Baked Swordfish Steak with Rosemary' really could not get any easier or quicker, but the meal that it produces is extremely tasty and nutritious:

# Baked Swordfish Steak with Rosemary

**Prep: 5 min, Cook: 15 min.**

- 1 lb. swordfish steak, 1-1/2 inch thick
- 1 tsp. dried rosemary
- 2 Tbs. olive oil

Preheat oven to 450°F. Press rosemary into both sides of fish with heel of your hand. Brush top of fish with oil and place in an oiled baking dish. **Bake** 15 minutes, without turning.

*Per serving:* calories 236, fat 12.9g, 49% calories from fat, cholesterol 54mg, protein 29.7g, carbohydrates 0.2g, fiber 0.1g, sugar 0.0g, sodium 135mg, diet points 6.3.

*Dietary Exchanges:* Milk: 0.0, Vegetable: 0.0, Fruit: 0.0, Bread: 0.0, Lean meat: 0.0, Fat: 1.3, Sugar: 0.0, Very lean meat protein: 0.0

▶ [view detailed nutritional information](#)

**The recommended wines are: Pinot Blanc, Burgundy, or Chardonnay.**

As you can see from the bottom of the screen shot, the site even recommends wines that should be drunk with this particular dish, so there is no reason why a peanut free diet should be a miserable one!

Here is another excellent and tasty recipe from the [Diet Enlightened](#) site which features recipes that are suitable for vegans and vegetarians as well as those who have a peanut allergy.

This one is great for those that love their pasta, but do not want to risk using commercially made sauces that might contain traces of peanuts in the thickening agents used:

## Spinach Lasagna

### INGREDIENTS

- ▶ 1 16-oz container low-fat cottage cheese
- ▶ 10oz frozen chopped spinach, thawed and well drained
- ▶ 3 cups 2% milk shredded reduced fat mozzarella cheese, divided
- ▶ 1/2 cup grated parmesan cheese, divided
- ▶ 2 eggs, beaten
- ▶ 26 oz spaghetti sauce, divided
- ▶ 9 lasagna noodles, cooked and drained

### PREPARATION

Preheat oven to 350 degrees. Mix cottage cheese, spinach, 2 cups mozzarella cheese, 1/4 cup parmesan cheese and eggs.

Layer 1 cup of the sauce, 3 noodles and 1/2 cottage cheese mixture in a 13x9 inch baking dish. Repeat layers. Top with remaining 3 noodles, sauce, one cup mozzarella cheese and 1/4 cup parmesan cheese.

Bake 45 minutes. Let stand 10 minutes before serving.

### ESTIMATED PREPARATION/COOK TIME

70 minutes

You will also find a few recipes on the [food allergies page of about.com](http://about.com), with such great treats (for meat lovers anyway) as Allergy-Safe Steak, Chicken Provencal and Lamb with Feta-Mint Pesto.

There really is no shortage of places where you can find excellent recipes for meals that you can feed to any peanut allergic adult or child without any fear of upsetting them.

The only foods that you really need to be careful of are those that are Asian in origin, because most of those will rely on peanuts and peanut byproducts for flavoring.

Given that many of those foods can be spicy, the taste of the peanuts that have been included will often be masked by the spicy heat. Just because you cannot taste the peanuts does not mean that they are not there, nor will it lessen the seriousness of the effect that those peanuts will have on anyone with a peanut allergy who eats that food, so extreme care is necessary.

## Tree nut allergies

Peanuts are not genuine nuts in the. They are members of the legume family, and they are not the dried fruit of a tree in the way that tree nuts are. In fact, they are not generally consumed in a dried state, hence their relatively soft texture.

While tree nut allergies are not nearly as common as peanut allergies, they do exist. Furthermore, while there is not really any substantive reason why people who suffer one form of allergy (to peanuts) should also suffer an allergy to tree nuts as well, that is, in fact, often the case.

One possible explanation could be that once someone suffers one allergy, that lowers their body's resistance to the IgE antibodies that cause allergic reactions, and so they are more prone to other allergies. However, that does not explain why people who suffer peanut allergies so often suffer a tree nut allergy (as opposed to any other kind of allergy) as well.

Why this happens is therefore something of a mystery, but the fact is that it does!

### **What are the symptoms of tree nut allergy?**

In general terms, the symptoms that a person suffering from a tree nut allergy would suffer from are broadly similar to those caused by an allergic reaction to peanuts.

That is, a person who suffers a tree nut allergy who accidentally consumes a foodstuff that is made with or contains tree nut residues can suffer:

- A rash on the body; red, itchy skin; hives and sometimes a flushed face;
- Swelling around the eyes; also of the lips, face, tongue and throat;
- They have trouble speaking, swallowing and/or breathing;
- Diarrhea, stomach cramps and vomiting;
- Distress, faintness, anxiety or panic attacks;
- A loss of blood pressure, accelerated heart beat and eventual loss of consciousness.

From this list, it can probably be correctly surmised that the allergic reaction to the consumption of tree nut based products by someone who suffers from a tree nut allergy can be every bit as distressing and severe as a reaction to peanuts.

So much so that, in fact, a tree nut allergy can lead to anaphylaxis in the most extreme cases, and this needs to be treated as quickly as possible with adrenaline. The adrenaline injection must be administered as soon as possible after the onset of a severe allergic reaction, and followed up with further monitoring and possible further treatment in hospital.

If you have been diagnosed as having an allergy to tree nuts and have been prescribed adrenaline, then you must carry your auto-injector with you at all times, and know how to use it.

### **Which tree nuts should be avoided?**

The simple answer to that question is, all of them!

However, in both the USA and Canada, it is the official position that the tree nuts that must be avoided most strenuously and vigilantly are almonds, brazil nuts, cashew nuts (which are tree nuts, despite their apparent similarity to peanuts), macadamia nuts, pistachio nuts, pecans, hazelnuts, pine nuts and walnuts.

However, even if a tree nut does not specifically feature on this list, do not assume that it is going to be safe for you to consume it if you have been diagnosed as having a tree nut allergy.

The simple answer is, avoid all form of tree nut and every product that might have been made using them. That is the only way that you can ever be sure that you are safe from initiating an unnecessary allergic reaction.

Be especially aware of products whose labels suggest that they 'may contain' or 'might contain traces of' tree nuts, because those warnings are on those labels for a very good reason. The manufacturer is as sure as they can possibly be that the food does indeed contain tree nut traces or residue, but they cannot prove this beyond doubt without expensive and time consuming testing that is not going to help their business one little bit, so why would they bother?

Thus it is easier to add such 'catch-all' warnings to the labels that they add to their food product packaging materials.

It is a warning that you should accept at face value as telling you that there are traces of tree nuts in that particular food product, and avoid all foods that carry it without exception.

### **What about coconuts and nutmeg?**

Neither coconuts nor nutmeg are really nuts at all. A coconut is technically speaking the seed of a fruit, while nutmeg comes from the seeds of the nutmeg tree, which is a plant of the 'Myristica' genus, and a native of South East Asia and Australasia.

As they are not nuts, it is therefore not usual that anyone with a tree nut allergy will suffer an allergic reaction from eating either coconuts or nutmeg. In fact, however, some people have reported suffering adverse allergic reactions when they have eaten these foods or their byproducts.

It seems that both coconuts and nutmeg might cause an allergic reaction in a very, very small number of people, so the risk of a reaction seems tiny. However, if you are in any doubt, the best thing to do would be to consult your medical adviser.

## **Is product size relevant?**

When you are considering whether to eat any particular foodstuff, you should always read the label before doing so, and avoid anything that contains (or suggests that it might contain) tree nut extracts.

Logically speaking, you would think that if a product contains or does not contain nuts when you buy one particular size of the product – say, a large jar or bottle – then a smaller jar or bottle of the same product would be the same, but you could be wrong!

Given the different preservative abilities of the different sized packaging materials, manufacturers sometimes have recipe formulations that differ slightly from one packaging size to another. Even though you have eaten a particular type of food before and know that it did not contain nuts, you cannot necessarily assume that a different sized container of the same food will be made exactly the same way.

In other words, always read the label, and when there is any doubt, do not touch it!

## **Food sources of tree nuts**

Most of the food sources where it was previously suggested that peanuts or peanut extracts might be found can also be applied to tree nuts, because the food manufacturing industry can use the two materials interchangeably.

For example, all of the previous peanut allergy examples such as:

- Baked goods, such as cookies/biscuits, cereal bars, doughnuts, pastries and muffins;
- Baking mixes;
- Sauce and gravy mixes;
- Ice cream, etc.

can be equally well applied to those who suffer a tree nut allergy.

There are, however, a few additional foods or drinks that you need to be careful of. For instance, nut flavored premium coffees like amaretto, and Waldorf salad, always come with nuts too.

Even some apparently innocent foodstuffs like cheese spreads, popcorn and many vegetarian dishes can contain nuts or nut traces, as these nut materials are used as meat substitutes or flavor enhancers.

## **Non-food sources of tree nut extracts**

As with peanuts, if you are hypersensitively allergic to tree nut materials, it is possible that you will suffer a reaction from the merest hint of contact with tree nut based materials. There are some everyday household products or items that you should avoid coming into contact with, because they can all contain tree nut materials or extracts:

- Bird seed;
- Bean bags;
- Hamster and mouse food;
- Cosmetics and hair care products;
- Sun cream and screen;
- Massage oils;
- Dog food and dog bedding materials.

# Getting advice and actions to take

## Seek medical advice

If you believe that you or (more likely) your child is suffering from an allergy to either peanuts or tree nuts, the first thing that you need to do is to get your suspicions confirmed (or not).

A doctor or medical professional who specializes in allergies and their treatment is called an allergist or, in some countries, an immunologist. The first thing you need to do is, therefore, contact your local hospital, medical clinic or centre to ascertain whether they have an allergist who can diagnose, firstly, whether you or your child have an allergy, and, secondly, what it is that triggers the allergic reaction.

Depending upon the opinion of the allergist as to the severity of the condition, they may recommend that you carry an auto injector with you so that you can administer a dose of adrenaline when an allergic reaction becomes particularly severe.

In most cases, when an allergist makes this recommendation, they will also suggest that you (or the allergy sufferer) should never eat out unless you are carrying your adrenalin auto injector. You should always be prepared for an allergic reaction to take place under any circumstances when you are away from the home.

Do not forget that, no matter how much you try or how many precautions you take, it is never 100% possible to guarantee that the food and drink that you consume, or even the objects that you come into contact with will not trigger an allergic reaction.

If such an allergic 'attack' does happen or if you suspect that it is about to occur, you should seek immediate medical attention wherever and whenever possible. There will be times and places where medical attention is not available, so it is for this reason that you should be carrying your adrenalin auto injector at all times.

## Self-help groups and allergy associations

When you or one of your children has been diagnosed as having an allergy to peanuts or tree nuts, it is undoubtedly very easy to feel as if you are the only person in the world who has ever suffered such a fate.

That is not true, and as long as you have access to the internet, there is plenty of information available online that will help you. For example, there are many associations and groups that focus on helping allergy sufferers, and all of these can be a great help to people with any form or type of allergy.

For example, the European Community has an excellent website hosted by the European Association of Allergy and Airways Patient Associations, a very complex title which is, fortunately, shortened down to EFA on their website!

The primary focus of this site is on people who suffer from all forms of allergy and asthma, with the allergy page been available [here](#).

Even if you're not a European resident, there is still plenty of valuable information on the pages of the EFA site. There is, for instance, an extensive glossary of allergy related terminology on the page highlighted above, so if you are ever in any doubt as to what particular allergy related term means, this could be a good place to find your answer.

The [Allergy Resources International](#) site lists associations, federations and groups whose principal activities are all focused on helping allergy sufferers from countries across the globe. While all of these organizations are listed in the database in alphabetical order, the fact that the first three organizations listed are based in South Africa, Switzerland and the USA respectively will give you some indication of the diversity and international character of this particular website.

No matter where you are based, therefore, the Allergy Resources International site is likely to feature information that is appropriate to where you live.

The Asthma and Allergy Association of America has a page on their site which is specifically dedicated to [self-help groups](#) across the country for people who suffer from allergies or asthma. There is a searchable utility on the site which will enable you to find groups in your own area, as well as by specific type.

If, for example, you were looking for a group that focuses on allergies in children in New York State, then you could search the site database and come up with this information:

**Parents of Asthmatic & Allergic Children (PAAC)**

**Area Served:** NYC (5 boroughs)

**Audience:** Parents

**Focus:** Asthma & Food Allergy

**Meeting Location:** 35 East 35th Street

**Meetings:** Contact for information

**Coordinator:** Caren Sanger

**Medical Advisor:** Paul Ehrlich, MD

**Phone Number:** (212) 889-3507

**Fax Number:** supportgroups@aafa.org

**E-mail:** [carsanger@aol.com](mailto:carsanger@aol.com)

**Website:** [N/A](#)

If you're based in Canada, you can subscribe to a free web alerts service run by the [Canadian Food Inspection Service](#) which will keep you posted on all food recall and the latest allergy updates. As the service is completely free, it is definitely worth taking a look at.

## **Common sense precautions**

If you are a parent of a child who has been diagnosed as being allergic to peanuts or tree nuts, then there are some sensible, common sense precautions that you should take.

Firstly, as soon as they are old enough to understand, you should educate your child in exactly what their condition means. In particular, you should teach them that they cannot eat any foods that might possibly be contaminated with peanuts or tree nuts, and once they are able to read, show them what the words look like.

In this way, you can get them to begin to read food labels themselves as soon as possible, which is excellent training for a condition that could affect them for the rest of their lives.

Make sure that all of the adults with whom they come into regular contact are aware of your child's condition. While you cannot tell every adult that they ever going to come into contact with about it, there will, in all likelihood, be a small group of adults with whom they regularly spend time. It could, for example, be that your children sleepover at a particular friend's house every week. In this case, that friend's parents must know about your child's condition, and what to do about it.

In the same way, make certain that your child's school is fully aware of their condition and the fact that your child cannot eat or come into contact with foods or objects that might be tainted with peanut or tree nut extract.

Make sure that all of the staff at your child's school are able to recognize the initial signs of the onset of an allergic reaction. Strive to make them completely aware of what to do in the event that your child suffers an allergic reaction as well.

## Conclusion

The first and perhaps most important thing to appreciate after reading this book is that while both children and adults can suffer from an allergic reaction to both peanuts and tree nuts, the number of people who actually do so is still relatively small.

You should not, therefore, allow this book to convince you that your child has an allergy to peanuts or tree nuts at the first sign of a sniffle or mild stomach ache, or that the condition which you have been suffering from yourself for so many years is exactly what you have just read about.

Allergies come in all shapes and sizes, and it is probably only the fact that the public at large has become far more conscious of both peanut and tree nut allergies in the past few years that has made them so 'notorious'. Indeed, it is sometimes difficult to read of anything related to peanuts or tree nuts that does not mention the fact that some people are allergic to either or both of these.

While 1.5 million possible peanut allergy sufferers in the USA sounds a great deal, as a percentage of the overall population, it is still a relatively small number of people.

However, after reading this book, you should now be able to recognize the possible onset of an allergic reaction in both adults and children. You should also appreciate that the most important thing to do in the circumstances is to take action.

Do not, however, jump to conclusions. Just because someone occasionally has wheezing fits or a pain in the stomach, it does not necessarily mean that they are allergic to something.

It does, however, suggest that they might have some form of allergy, and that this is the right time to seek appropriate medical advice.

It is much easier to deal with and treat any medical condition when you know what it is and how to deal with it because it has been properly diagnosed, so now is the time to investigate.

Finally, remember that if you or a family member has been diagnosed as being allergic to peanuts or tree nuts, there is one simple rule which you must always follow. When it comes to foodstuffs - when in doubt, don't eat it!