

# Food allergy



# or fashion victim?

## Fact or fiction?

Studies have shown that 20% of adults and 28% of parents suspect that they, or their children, suffer from a food hypersensitivity but the real figure is around 2% of adults and 8% of children.

This large discrepancy between the number of people who believe they suffer from a food allergy and official figures highlights the problem of self-diagnosis.

Often people decide to remove a food from their diet based on one bad experience. For example eating cheese

and then later developing a headache may lead someone to conclude that the cheese is responsible for causing their headache. Sometimes people chose to eliminate foods from their diets simply because another family member suspects that they have a food allergy, or because a magazine article describes symptoms that appear similar to their own.

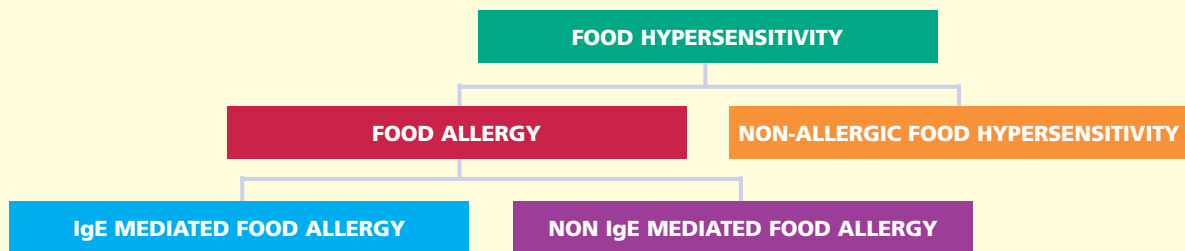
**This lack of understanding added to the confusion about where to go for help often leads to self-diagnosis and a restricted diet.**

## Allergy versus intolerance

People use the term 'food allergy' to explain all types of adverse reactions to foods.

The correct term is in fact 'food hypersensitivity', an umbrella term which covers different types of food

hypersensitivity. This classification is summarised below. By classifying reactions in this way we can provide a diagnosis and suitable plan to manage these conditions.



(Johansson et al 2004)

## Table 1.0: Types of Food Hypersensitivity

The table below shows how different types of food hypersensitivity can have similar symptoms. In other words the way to diagnose a condition and identify the culprit foods is not always clear; another reason to seek advice from the GP.

To help with the process of diagnosis it is useful to have information about possible culprit foods, the quantity eaten and access to food labels and ingredients used in dishes and recipes.

Probably the most talked about food hypersensitivity is peanut allergy. This is usually an IgE mediated food allergy which tends to be quick in onset with only small amounts of a food being required to produce a reaction. Typical allergic symptoms include asthma, urticaria (hives), swelling and in extreme cases anaphylaxis.

It is diagnosed by a simple blood test or skin prick test alongside a thorough assessment from a doctor. Management advice is then given alongside appropriate

medication if required. An adrenaline injector will be prescribed for those at risk of anaphylaxis.

Any food can cause an IgE mediated food allergy but the most common ones are cow's milk, egg, nuts, peanuts, wheat, soya, fish, and shellfish. Cow's milk and egg are particularly common to the under 6 age group but fortunately most children outgrow this sensitivity.

There are many other types of reaction to foods, many of which are delayed and require much larger amounts of the offending food before a reaction is seen.

**The only way to diagnose most types of food hypersensitivity is by exclusion and reintroduction diets alongside avid food and symptom diary keeping and under the supervision of a registered dietitian. Undertaking of high street testing is NOT recommended as in most cases this has no scientific basis and is not proven.**

## Food exclusion and reintroduction

The suspected food is excluded for a period of time and symptoms observed and recorded. If symptoms improve then the suspect food is reintroduced. If symptoms return then this would indicate that there is a problem with that particular food. This can be very time consuming. It is best carried out under the supervision of a registered dietitian, especially if children are involved. It is important to ensure a well balanced nutritional intake during the test period and in the design of a diet where major food groups are excluded (e.g. dairy or wheat).

Patients who 'self-diagnose' food hypersensitivity reactions without any medical consultation are putting themselves at risk of nutritional deficiency and risking misdiagnosis.

**Table 1.0**

Type of food hypersensitivity	Basis of reaction observed	Presenting symptoms	Common triggers
Food allergy	Any reaction with an immunological mechanism		
IgE mediated food allergy	Reaction is usually immediate and can be life threatening in extreme case. Anaphylaxis is the most severe form of allergic disease	Asthma Anaphylaxis Swellings Itchy raised rash Short of breath Rhinitis Abdominal pains Diarrhoea Vomiting	Cow's milk Egg Nuts Peanuts Wheat Soya Fish Shellfish
Non-IgE mediated food allergy	Reaction is usually delayed	Eczema Colic Constipation Diarrhoea Reflux Vomiting Coeliac disease	Cow's milk Egg Gluten Wheat
Non-allergic food hypersensitivity  (Many of these mechanisms are not well understood)	Non immunological Toxic reactions (Microbiological) Food aversions Enzyme defects Pharmacological	Food poisoning Irritable bowel syndrome (IBS) Lactose intolerance Inflammatory bowel disease Ulcerative colitis	Alcohol Amines Caffeine Gluten Histamine Lactose Monosodium-glutamate Salicylates Sulphites

# GPs slam 'fashionable' food elimination diets

90% of GPs agreed that women are putting their health at real risk by adopting 'fashionable' diets – which eliminate foods (such as wheat or dairy products) without any medical consultation. GPs believe that the increasing trend of women 'self-diagnosing' and making uninformed changes to their diets can lead to problems such as nutrient

deficiency, osteoporosis, reduced mental performance and immune problems. GPs pointed the finger towards the 'questionable' and 'potentially harmful' advice provided by unregistered nutritionists and blamed celebrity diets (Grain Information Service GP Survey, 2002).

## Checklist – reasons not to eliminate food from your diet

### TO LOSE WEIGHT

- Many people mistakenly think carbohydrates including bread are fattening – it's what you add to the bread that can increase the calories.
- Cut down on calories, reduce intake of fat and portion sizes and increase intake of wholegrain starchy foods, fruits and vegetables.

### BECAUSE A CELEBRITY HAS DONE IT

- Celebrity diets aren't always developed by a qualified Dietitian so should be treated with caution.
- The only proven strategy for weight control is a healthy balanced diet, low in fat and high in wholegrain starchy foods, fruits and vegetables, together with a suitable level of physical activity.

### AN UNQUALIFIED PRACTITIONER RECOMMENDED IT

- Always seek advice from a qualified health professional such as a GP, or a registered dietitian\*. If you are tempted to follow a diet never do so for more than 2 weeks without supervision from a doctor or dietitian.

*\*you can check with the Health Professionals Council (HPC) to ensure they are registered.*

### BECAUSE IT'S "UNHEALTHY"

- Unhealthy diets should be avoided but all foods are ok to eat if taken in moderation. It is what is eaten most of the time that should be the main concern and focus. An occasional treat can be part of an overall balanced diet.

### SELF-DIAGNOSIS

- Self-diagnosis can be dangerous and may obscure the real reason for a health problem which at worst may be dangerous to our health if other conditions remain undiagnosed.
- Tests carried out in health food shops or over the web are not always based on scientific evidence and can lead to misleading results.

### TO DETOX

- There is no scientific evidence to support detox diet claims.
- The body is designed to rid itself of unwanted toxins without a detoxification programme. If you still wish to follow one then do so for only a short time.

## The view of the experts

*"Cutting out wheat is almost always an extremely bad idea – at best it will lead to mental and physical underperformance but at its worst this type of fashionable fad will set women on the slippery slope towards an eating disorder. The quality of a diet is all about what you include not what you cut out."*

Prof Tom Sanders,  
Department of Nutrition & Dietetics,  
King's College London

*"Elimination diets are only used by health professionals for very short periods of time, with the specific intention of isolating a problematic food through a process of carefully re-introducing*

*foods over no more than two weeks. This very controlled diagnostic process has been misapplied by unqualified individuals who now preach elimination diets as a long term dietary solution for everything from weight loss to intolerance. Women should be extremely cautious of any diets like these and especially wary where they are given no advice on how to replace the nutrients they will be losing with alternative foods. Tablets or supplements are not a desirable or healthy alternative."*

Professor Judy Buttriss,  
Director General,  
British Nutrition Foundation

## Food Labelling

European Union (EU) legislation decrees that all pre-packaged foods sold within the EU must be labelled with the following 14 foods:

Cow's milk, eggs, crustaceans, molluscs, fish, soya, peanuts, tree nuts, wheat and gluten containing grains, sesame, mustard, celery, sulphites, lupin.

Outside the EU many of these foods can be legally hidden on a label or not labelled at all so care should be taken. Also it should be remembered that in the UK foods that are sold

loose such as delicatessen, bakery and butchers' products have no label so ingredients are actually unknown.

When following a restricted diet the level of exclusion is a major consideration. If the food is to be avoided even in trace amounts then food labels should be read carefully. There are others who are able to control their symptoms by just cutting down on certain foods but can tolerate small amounts in manufactured foods.

### For further information please consult the following websites:

Grain Information Service  
[www.wheatintolerance.co.uk](http://www.wheatintolerance.co.uk)

British Nutrition Foundation  
[www.nutrition.org.uk](http://www.nutrition.org.uk)

British Dietetic Association  
[www.bda.uk.com](http://www.bda.uk.com)  
(look for the food facts)

[www.bdaweightwise.com](http://www.bdaweightwise.com)

[www.teenweightwise.com](http://www.teenweightwise.com)

Coeliac Society  
[www.coeliac.org.uk](http://www.coeliac.org.uk)

## Help and advice

If you suspect that you have a food hypersensitivity seek medical advice from your GP. You may be referred to an allergy clinic if you have a food allergy, a Registered

Dietitian if you require an exclusion diet or another specialist depending on the investigations you require.



Grain **Information** Service

