YOU’RE WATCHING YOUR KID at the playground, waiting at jury duty, or stuck on a commuter train, and—after some audible stomach growls—you grab a nutty snack bar from your bag and rip it open. Maybe you feel a twinge of guilt: You just read a Facebook post from a mom whose kid has a deadly nut allergy. Squelching the passing thought, you wolf down the bar, considerately ensuring no crumbs get left on a public surface. But shouldn’t you do the neighborly thing and not carry a snack that, while harmless to you, could kick off a dangerous reaction in someone else?

You may be surprised to learn that many doctors and educated food allergy families don’t expect the world to change how it eats—and wouldn’t expect you to stop carrying around your favorite energy bar. (Though many schools do institute rules to keep allergic kids safe—more on that later.) These situations can be “highly nuanced and emotional,” says David Stukus, MD, a pediatric allergist at Nationwide Children’s Hospital in Columbus, Ohio. “They require careful discussion of actual versus perceived risk, shared decision-making, and education surrounding food allergen exposure.” If we understood more about the science and everyday reality of living with food allergies, we might be a little kinder, a little more inclusive, and a little more willing to take small steps that could help.

A RECORd NUMBER OF KIDS AND ADULTS ARE IN DANGER OF SUFFERING SERIOUS ALLERGIC REACTIONS TO EVERYDAY FOODS THE REST OF US EAT WITHOUT A SECOND THOUGHT. HERE’S HOW TO BE A GOOD NEIGHBOR AND MAKE OUR SHARED SPACES SAFE AND FUN FOR EVERYONE.

By Esther Landhuis

A GROWING YET INVISIBLE SCOURGE

An estimated 32 million Americans are living with food allergies—about 5.6 million are under age 18—and cases are rising here and around the world. Airlines are required to allow passengers with severe food allergies to preboard so they can wipe down surfaces around their seats, and many schools reserve lunch tables for allergic kids. In January, the FDA approved the first food allergy treatment: a set of daily capsules that can make the immune system less reactive to peanuts over time. And at least 15 more companies are developing remedies, including vaccines, probiotics, and even a toothpaste. While these therapies could bring relief, they are not cures. Allergic individuals still need to watch what they eat and carry epinephrine for emergency reactions.

Despite increased attention to this global health concern, many families with food allergies feel overlooked or misunderstood. Unlike, say, cat allergies or seasonal allergies, which can usually be managed with readily available over-the-counter and prescription treatments, food allergies can require years of self-education and experimentation to find a system that works.

Gwen Smith, founder of the news website Allergic Living, first suspected she had food allergies in her 20s, when she got hives after eating shrimp. By the time a friend drove her to a hospital less than 10 minutes away, “I could barely breathe,” Smith says. “They had the crash cart, and my blood pressure was dropping.” After getting diagnosed with shellfish and soy allergies, she realized she’d had symptoms before—but she had mistaken them for signs of...
Kids with food allergies are more likely to be bullied at school and show symptoms of isolation and anxiety.

“Now I know to think, ‘How long ago did I eat? Could this be related?’”

People with food allergies produce antibodies called immunoglobulin E (IgE), which can trigger a range of symptoms, including digestive problems, itching, hives, wheezing, and sometimes life-threatening anaphylactic shock. The risk of getting a severe reaction can provoke anxiety, says Corinne Keet, MD, PhD, a pediatric allergist-immunologist at the Johns Hopkins University School of Medicine.

For many parents, guarding against these reactions in their food-allergic children is a daily task. “Everything was a scrutiny for us,” says Nina Aggarwal of Foster City, California, whose 8-year-old had an anaphylactic reaction to an egg during infancy. “We had to read every label. I would pack him a picnic everywhere we went. It was very isolating.” Alicia Bales of Los Angeles remembers discovering her 2-year-old’s food allergies and feeling like no one else was worried. “It felt like my son’s diagnosis was invisible,” she says. “I could watch him really carefully all the time, but I didn’t think other people would be as careful.”

Feeling left out or different can hurt allergic kids’ emotional well-being, says Tamara Hubbard, the flu, food poisoning, or stomach trouble. “Now I know to think, ‘How long ago did I eat? Could this be related?’”

TIPS FOR FOOD ALLERGY PARENTS

PREVENT ALLERGIES WITH EARLY INTRODUCTION Parents used to be advised not to feed babies peanut products and other top allergens until age 1 or 2. But in the past five years, large, rigorous clinical trials have shown that early introduction of peanuts reduces the chance of developing an allergy; other trials support the early introduction of eggs and milk. These findings “turned everything upside down,” says Erika Cravanas, MD, a pediatrician in Louisville, Kentucky. Now she and other doctors urge parents to feed babies peanut products and other potential allergens early and consistently, starting as young as 4 to 6 months. This is an especially good move for babies with egg allergies or eczema, who are at high risk of developing more allergies. If the eczema is severe, though, consult a doctor to make sure your child doesn’t already have a particular food allergy before you introduce the allergen, says Hugh A. Sampson, MD, an allergist and professor of pediatrics at the Icahn School of Medicine at Mount Sinai in New York City.

SEE A FOOD ALLERGY EXPERT

Blood and skin-prick tests can be tricky to interpret. About half the time, the tests “could be positive, but if you actually ate the food, you wouldn’t react,” says allergist Tina Sindher, MD, clinical assistant professor of allergy and immunology at Stanford University School of Medicine. This can make people cut out foods needlessly. Bottom line: Find an informed allergist to help you navigate the diagnosis.

USE DISCRETION WITH SOCIAL MEDIA

Support groups can be beneficial. But since they’re often populated by people who need help, you may not hear as much from people who are successfully managing their food allergies and doing well, says Sakina Bajowala, MD, of Kaneland Allergy & Asthma Center in North Aurora, Illinois. “You are more likely to get a bit of a skewed perspective because you tend to see worst-case scenarios.”

EXPLORE TREATMENT OPTIONS

Oral immunotherapy (OIT) involves ingesting a culprit food, such as peanuts, eggs, tree nuts, milk, wheat, or shellfish, daily to desensitize immune cells. The only FDA-approved food allergy treatment—Aimmune Therapeutics’ peanut-flour capsules, called Palforzia—is a form of OIT. A small number of allergists have developed OIT regimens using commercial food products. For some families, gaining the ability to safely eat one or two peanuts, for example, can be transformative. Before her daughters did OIT, Jessika Welcome of San Carlos, California, says they had to “stay away from any food labels that said ‘may contain’ or ‘made on shared equipment’—which rules out a lot of stuff.” After OIT, they “could ignore those warnings. It opened up Halloween in a whole different way.”
Fewer Allergens, More Smoosh

Don’t let cat allergens hold you back from spending time with those we love. Be closer with them—and your kitty—with these simple steps.

1. Choose the Right Cleaning Tools
A vacuum with a High-Efficiency Particulate Air (HEPA) filter or a simple damp cloth will effectively pick up dust and dander without stirring it up.

2. Steer Clear of Soft Surfaces
Make cleaning easier. Replace soft furniture with hard wood or leather cushioned pieces and avoid carpeting.

3. Reduce the Allergens in Cat Hair and Dander Before They Spread to the Environment
Feed your cat Purina Pro Plan LiveClear—the first and only cat food designed to neutralize the allergen at its source on the cat, resulting in fewer allergens spread to the environment.

Hover your phone’s camera over this smart code to learn more about Purina Pro Plan LiveClear

BROUGHT TO YOU BY PURINA

REAL ALLERGISTS

A licensed clinical professional counselor in Long Grove, Illinois, and the founder of the website Food Allergy Counselor, which offers mental health resources and a national directory of food-allergy-informed counselors. Compared with their nonallergic peers, children with food allergies are 25 percent more likely to be bullied at school, and they more often show symptoms of isolation, depression, and anxiety, according to a 2018 study in the Journal for Nurse Practitioners.

Sometimes teachers, neighbors, and other well-meaning individuals flat-out misunderstand the situation. After hearing about her son’s food allergies, Aggarwal says, “everyone will just be like, ‘No peanut, no peanut.’ They don’t think about other allergens.” (Her son does fine with peanuts but has allergies to tree nuts and kiwis, as well as eggs.)

Cultural and generational differences in perspective are also hard to resolve. Depending on where and when someone grew up, “maybe they didn’t hear about food allergies that often,” Hubbard says. Even when people mean to be helpful, she adds, many “don’t seem to understand the seriousness.”

That may be because food allergies change the family dynamic. In many families, “someone expresses love for someone else by stuffing their face with food,” Bales says. Her son is allergic to dairy, eggs, tree nuts, and some seeds. “After the diagnosis, suddenly these foods were associated with fear instead of comfort, illness instead of nourishment,” she says. “It’s where a lot of my emotional distress came from.”

HOW TO BE A FOOD ALLERGY ALLY

Parents and doctors say one of the best ways to help is to simply acknowledge the emotional toll that managing food allergies can take on a family—especially the kids. Just a bit of support can greatly impact families with food allergies and decrease the fear they may feel, Hubbard says.

IN SCHOOL

Notice who is not eating. Rachael Becker of Austin, Texas, was touched when another mom asked her if her son had food allergies, after observing that he never ate the snack served at the after-school math program. The mom then made allergy-safe brownies for the whole group, using egg and dairy substitutes. “She told me all the ingredients so I would feel comfortable, and she sent me photos of everything,” Becker says. “It was such a lovely gesture and one I won’t forget. Neither will my son. He had never gotten to enjoy a brownie before and loved eating it.”

Lead with empathy.
Some parents may feel annoyed when one kid’s allergy dictates what the entire class can have for a snack. “Just remember this is probably one of 10 to 20 times this week I will have to figure something out related to allergies,” says Kaia Mahlke of Victoria, Minnesota, whose son is allergic to peanuts, tree nuts, eggs, peas, and lentils. “When someone makes one of those times easier for us, it is so appreciated.”
Listen, look, and learn.

Aggarwal arms herself with photos and facts to make food allergies relatable. Her son’s school had a policy of storing medications only in the office. To persuade the staff to keep her son’s asthma inhaler and epinephrine autoinjector in the classroom, Aggarwal presented concrete scenarios—for example, what if he had an allergic reaction or began wheezing during an extended lockdown? She also showed photos of her son’s hives and swollen eyes after he accidentally touched mayonnaise. “That garnered empathy from teachers,” Aggarwal says. “They were like, ‘Oh my God, that looks very scary.’ ”

Seek out opportunities to educate. If you volunteer in the classroom, make an effort to learn about the unique situation of each child with a food allergy, Aggarwal suggests. “Be the liaison who coordinates food-related activities at class parties and emails the class about allergens and safe brands and products.”

Become the cafeteria lunch buddy. Even if a child’s school reserves a lunch table for kids with allergies, it doesn’t mean they don’t feel alone or different. “This is my daughter’s first year eating lunch at school,” says Ellen Polston of Rocky River, Ohio. “The moms of two of her friends decided to not pack my daughter’s allergens in their daughters’ lunches so she would always have friends to sit next to.”

AT PARTIES AND PLAYDATES

Share the menu ahead of time. “Other families have been so supportive by notifying us about what foods will be served at birthday parties—not so we do or don’t go based on our allergens, but so I can send along an appropriate replacement,” says Katie Price of Portland, Oregon. “I’m so grateful when friends give me the heads-up so we can prepare and my 4-year-old son doesn’t feel left out.”

Offer one safe snack. “This happens disappointingly rarely and can be as simple as changing the snack to one the allergic child can eat,” says Christine Anna, a New York City mom whose son is allergic to dairy, tree nuts, and sunflower seeds. “It makes such a difference for our children to feel included.”

Hand out nonfood treats. Many schools have already banned or heavily restricted food at school parties. If yours has not, consider replacing food-based prizes with puzzles, stickers, and small toys. This is particularly helpful if multiple kids have different food allergies, says Nili Patel, a mom of two in Raleigh, North Carolina.

ON PLAYGROUNDS AND AIRPLANES

Wash hands and wipe tables after eating. This could help protect others from accidentally exposing themselves to food allergens through crumbs and oils—especially people with so many allergies that it’s hard to avoid all problematic foods, says Amy DiElsi of Malvern, Pennsylvania, whose son is allergic to wheat, eggs, milk, peanuts, tree nuts, and sesame. (This habit is, of course, good protection against viruses, bacteria, and irritants as well.) Another tip: Teach your kids to eat at designated tables rather than on playground equipment.