### FOOD ALLERGIES AND FOOD INTOLERANCE



### What is the Difference between a Food Allergy and a Food Intolerance?

Food allergies are quite uncommon and normally causes symptoms within a few minutes of eating the trigger food or being in contact with the relevant substance. Food intolerance (non-allergic hypersensitivity) is much more common. The onset of food intolerance symptoms is usually slower and may be delayed by many hours after eating the trigger food; the symptoms may also last for many hours, even into the next day. Some common food intolerances include lactose intolerance; gluten intolerance and histamine intolerance.

### What are food allergies?

Most food allergies affect children under the age of 3 years. The majority of children who have food allergies to milk, eggs, soya and wheat in early life with grow out of them by the time they start school. The foods which most commonly cause an allergic reaction in children are eggs, milk, soya, wheat, gluten and peanuts. Even a tiny trace of a food can cause a reaction in someone who is allergic to it.

# WHAT DOES AN ALLERGIC REACTION LOOK LIKE?

Allergic reactions can vary but any of the following may be symptoms:

- Diarrhoea or vomiting
- A cough
- Wheezing or shortness of breath
- Itchy skin or throat
- A rash
- Swollen lips and throat
- Runny or blocked nose
- Sore, red and itchy eyes.



In the most extreme cases, swelling of the throat can occur. A life-threatening allergic reaction is called anaphylaxis or an anaphylactic shock. If a parent or carer thinks their child shows any symptoms that may be related to food allergy, suggest that they talk to their GP for advice, or call NHS Direct on 111 for non-urgent medical enquiries. In rare cases there can be a severe anaphylactic reaction that can be life-threatening. If you think a baby is suffering a severe allergic reaction, always call 999 and ask for a paramedic.

You can find out more at www.nhs.uk/ conditions/baby/weaning-and-feeding/foodallergies-in-babies-and-young-children/

# THERE ARE 14 ALLERGENS COVERED BY THIS REQUIREMENT

- **1.** Celery
- **2.** Cereals containing gluten (including wheat, rye, barley and oats)
- **3.** Crustaceans (including prawns, crab and lobster)
- 4. Eggs
- 5. Fish
- 6. Lupin
- 7. Milk
- Molluscs (including squid, mussels, cockles, whelks and snails)
- Mustard
- **10.** Nuts
- 11. Peanuts
- **12.** Sesame seeds
- 13. Soya beans
- **14.** Sulphur dioxide/sulphites (at levels above 10mg/kg)



#### **Food Allergy Labelling**

All pre-packaged food must show a list of ingredients which clearly identifies all the ingredients.

Any business that produces prepacked for direct sale (PPDS) food is required to label it with the name of the food and a full ingredients list, with allergenic ingredients emphasised within the list. This comes under the requirement of Natasha's Law. Prepacked for direct sale or PPDS is food that is packaged at the same place it is offered or sold to consumers and is in this packaging before it is ordered or selected. It can include food that consumers select themselves (e.g. from a display unit), as well as products kept behind a counter and some food sold at mobile or temporary outlets.

There are different regulations for foods that are not pre-packaged and which are prepared on-site in smaller food businesses e.g. a cafe, sandwich shop or deli. There is still a requirement to provide information on the ingredients and allergen content but how this information is shared is up to the individual business.

It is important to remember that **children can** have allergies to foods and ingredients not covered by this list above (and which therefore won't be highlighted in bold on product ingredients lists), and the same procedure should be followed where a child has an allergy to a food not included on this list, to ensure appropriate and safe meals and snacks are provided for them.

#### What are food intolerances?

Food intolerances are not the same as food allergies. Food intolerances do not involve the immune system, and symptoms tend to occur more slowly than with food allergies, often hours after eating the food. Symptoms may also depend on the amount of the food that has been eaten, and some people may be able to eat small quantities of foods they are intolerant to.

If you suspect that a child has a food allergy, encourage parents or carers to seek advice and diagnosis from their doctor.

