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Food Allergies: Why They're So Common Today + What You Can Do



Growing up, I don't remember my friends and classmates having food allergies. In fact, there was one kid in my entire elementary school with a peanut allergy — it was so unusual we all knew who he was.

Today? The prevalence of food allergies has skyrocketed, and it's estimated that 8% of children and adolescents 18 and under have been diagnosed. Amazingly, 30% of these kids have multiple allergies. Equally concerning is that the severity of reactions has worsened over time.

What's going on and what can you do about it? Here are answers to five questions many people have about food allergies:

1. Why are more people food allergic now?

While we don't know for certain, two main theories exist. One gives credit to the fact that food allergies are more prevalent in industrialized countries, the "hygiene hypothesis," which states that we're not allowing our kids to develop normal exposure to certain microbes in their environment that help us develop balanced immune systems. Another theory is that our SAD (standard American diet) is to blame. We are eating too many processed and inflammatory foods; in fact, certain highly allergenic foods like peanuts may be more likely to trigger reactions based on how they are grown and processed.

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1. Why are more people food allergic now?

While we don't know for certain, two main theories exist. One, given that food allergies are more prevalent in industrialized countries, the "hygiene hypothesis" posits that we are too clean. In other words, we're not allowing our kids to develop normal exposure to dirt — microbes in the environment — that help us develop balanced immune systems. Another theory is that our SAD (standard American diet) is to blame. We are eating too many processed and inflammatory foods; in fact, certain highly allergenic foods like peanuts may be more likely to trigger reactions based on how they are grown and processed.

2. What are the most common food allergens?

Peanut is the most prevalent allergen, followed by milk and then shellfish. Rounding out the top eight (not in any particular order) are tree nuts, egg, wheat, soy and fish. Peanuts not only are the most common allergen but typically cause the most severe reactions.

3. How do I know if I'm allergic?

Relying on your clinical symptoms — rashes, trouble breathing, digestive upset — is often the surest way, but several tests exist that can help you determine if you're truly allergic or just sensitive to foods. What does that mean? Sometimes we have reactions to foods (we don't feel well) that are not true allergies.

For example, gluten sensitivities (even celiac disease) are severe food reactions that are not actually allergies. Both skin and blood tests can be useful tools but must be interpreted in the context of how you react physically and with a knowledgeable practitioner's guidance. A food elimination diet can be the best way to really figure out if you are reacting to one specific food or another.

4. OK, I'm food allergic. What I can do to limit my child's chances of developing food allergies?

This is an area with lots of speculation and controversy. Here's what we know, recognizing that guidelines change every few years based on new data. Remember, this is about prevention, not treating with allergic symptoms that develop. One, what a mom eats during pregnancy and while breast-feeding doesn't seem to matter. Two, exclusive breast-feeding for 4 to 6 months is protective. Three, waiting to start solids food until at least 4 months is recommended.

Is it better to wait until 6 months? Depends on who you ask. WHO and European guidelines say yes, American experts say no. Four, avoidance of highly allergenic foods after 4 to 6 months does not seem to matter.

5. I've heard taking probiotics can prevent allergies. True or false?

While it appears that babies exposed to antibiotics have higher rates of allergic disorders, there's not clear evidence that taking probiotics early in life can limit the development of food allergies. There are, however, a number of compelling studies that demonstrate that probiotics, especially if taken during pregnancy and by breast-feeding moms during lactation, can greatly reduce the incidence of allergic eczema in children.

Does eating fermented and cultured foods or drinks have the same effect? What strains and colony counts are needed for maximal impact? We really don't know yet, but research is ongoing and hopefully can help answer these questions in the near future.

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