## **Allergist Brandon**

Allergist Brandon - Food allergies are normally mean an adverse immune response to a food protein. Responses are different from other adverse reactions to food like for instance toxin-mediated reactions, pharmacological reactions and food intolerance.

Usually, a protein present in the food is the main allergic component. These types of allergies occur when the body's immune system mistakenly identifies a protein as a harmful substance. Various fragments of proteins are resistant to digestion. Those proteins which are not properly broken down during the digestive process are tagged by the IgE or the Immunoglobulin. These tags trick the immune system into thinking that the protein is harmful. When the immune system thinks that immune system is under attack, an allergic response is triggered. These responses range from mild to severe. Several kinds of allergic responses include respiratory distress, gastrointestinal distress and dermatitis life-threatening anaphylactic responses such as biphasic anaphylaxis and vasodilatation. These are extreme responses which require immediate emergency intervention.

Amongst the many common non-food protein allergies, one main allergy is a latex sensitivity. Sufferers of this particular protein allergy should avoid whatever contact with the problematic protein. There are various medications which could help treat, minimize or prevent protein allergy responses. Avoidance is among the main treatment options as well as immunotherapy and desensitization. Many people who suffer from a diagnosed food allergy opt to have an injectable type of epinephrine such as an EpiPen or Twinject. They usually put on some kind of medic alert jewelry to be able to inform individuals around them in the event they become incapacitated by their allergy.

## **Common Indications**

There are many ways in which allergies can present. For example, hives on the back are a common allergy indication. Classic IgE or immunoglobulin-E mediated food allergies are classified as type-I immediate Hypersensitivity reactions. These allergic reactions have an acute onset, normally showing up within seconds of contact to one hour and may consist of: itching of throat, lips, skin, mouth, tongue, skin eyes or other parts, swelling of whole face, eyelids, tongue or lips, a runny or congested nose, difficulty swallowing, hoarse voice, nausea, shortness of breath or wheezing, vomiting, light-headedness, fainting, stomach cramps or abdominal pain. Clearly, symptoms differ from individual to individual. The amount of exposure to the allergic substance likewise varies from individual to individual.

Peanuts are one of the most common allergies. This sensitivity belongs to a member of the bean family. Several children with peanut allergies do outgrow them, although, these allergies may be severe and life threatening. Tree nuts like pistachios, pine, walnuts and pecans are also common allergens. Individuals who have an allergy to tree nuts could be sensitive to just one or perhaps many types within the tree nut family. Some seeds like sesame seed and poppy seeds contain certain oils that have protein present. This could likewise bring out an allergic response. About 1 in 50 children is allergic to eggs. This particular kind of allergy is usually outgrown by children when they reach the age of five years old. Usually in the case of egg allergies, the sensitivity is to the proteins in the egg white rather than those in the yolk.

There are a lot of common allergies to dairy. For much of the population, cow, sheep and goat's milk is a common allergen. A lot of these sufferers are intolerant to different dairy products like yogurt, ice cream and cheese. Approximately a small portion of kids, who have a milk allergy, about 10%, will also have a response to beef, since beef contains a small amount of protein that is found in cow's milk. Other common allergenic proteins are found within the following foods: fish, soy, wheat, spices, fruits, shellfish, vegetables, natural and synthetic colors and chemical additives such as MSG.

The top eight food allergies are: eggs, milk, peanuts, tree nuts, shellfish, seafood, wheat and soy. These account for over 90% of the food allergies within the United States. Sesame seeds are becoming a more popular allergen too. There has also been a noted surplus of rice allergies in Eastern Asia where rice forms a big part of the local diet.

Examples of Allergy Testing Comprise:

Skin prick testing is one of the most common types of allergy testing. The results are immediately available and the test is easy to perform. An allergist would typically utilize a bifurcated needle, that resembles a fork two prongs. Others could use a multi-test, that can resemble a small board that has numerous pins sticking out of it. During these tests, a small amount of the suspected allergen is put onto the skin or into a testing device. The device is then placed on the skin to be able to prick and go through the top skin layer. This places a small amount of allergen under the skin. If the individual is allergic, a hive would form at the spot.

This test generally yields a positive or negative result. It is positive for quickly learning if a person is allergic to a certain food or not as it detects allergic antibodies called IgE. Skin tests are unable to predict if a reaction will occur if a person ingests a particular allergen or even what kind of reaction will occur with ingestion. Then again, skin tests can confirm an allergy according to a person's history of responses with a certain food. Non-IgE mediated allergies could not be detected by this method.

Blood tests are one more diagnostic tool used for testing IgE-mediated food allergies. The blood test called RAST for short is the RadioAllergoSorbent Test. This test detects the presence of IgE antibodies to a certain allergen. A CAP-RAST test is a specific type of RAST test which can show the amount of IgE found in each and every allergen.

Researchers have been able to determine "predictive values" for certain foods. These predictive values could be then compared to the RAST blood test results. For instance, if a person's RAST score is higher than the predictive value for that particular food, there is a ninety-five percent possibility the person would have an allergic reaction if they eat that particular food. This is limited to anaphylaxis and rash reactions. There are currently predictive values accessible for soy, peanut, milk, egg, wheat and fish. Blood tests enable hundreds of allergens to be screened from one sample. This consists of food allergies as well as inhalants. It is vital to note that non-lgE mediated allergies cannot be detected by this method.

Referred to as DBPCFC or otherwise referred to as double-blind placebo-controlled food challenges are considered to be the gold standard for diagnosing food allergies, and for various non-IgE mediated reactions. Blind food challenges are given to the individual. This includes packaging the suspected allergen into a capsule and giving it to the individual and observing them for any signs or symptoms of an allergic reaction. Usually, these challenges take place in a hospital environment under the supervision of a physician due to the possibility of anaphylaxis. For the evaluation of non-IgE or eosinophilic responses, diagnostic means like endoscopy, biopsy and colonoscopy are usually used.