anaphylactic reaction to food. Onset of the reactions occurred shortly after ingestion (5 to 30 minutes). In most of the children, the reactions did not begin with skin signs, such as hives, red rash, and flushing, but rather mimicked an acute asthma attack (wheezing, decreased air movement in airways, dyspnea). Watch children with food anaphylaxis closely, because a biphasic response has been recorded in a number of cases in which there is an immediate response, apparent recovery, and then acute recurrence of symptoms (Simons, 2009). Children with extremely sensitive food allergies should wear a medical identification bracelet and have an injectable epinephrine cartridge (EpiPen) readily available (see Anaphylaxis, Chapter 23). Any child with a history of food allergy or previous severe reaction to food should have a written emergency treatment plan, as well as an EpiPen. Note that diphenhydramine and cetirizine are effective for cutaneous and nasal manifestations but not for airway manifestations (Keet, 2011).

Although the reason is unknown, many children "outgrow" their food allergies (Nowak-Wegrzyn, Sampson and Sicherer, 2016). Children who are allergic to more than one food may develop tolerance to each food at a different time. The most common allergens, such as peanuts, are outgrown less readily than other food allergens. Because of the tendency to lose the hypersensitivity, allergenic foods should be reintroduced into the diet after a period of abstinence (usually ≥1 year) to evaluate whether the food can be safely added to the diet. Foods that are associated with severe anaphylactic reactions (e.g., peanuts) continue to present a lifelong risk and must be avoided.

Nursing Alert

Indications for the administration of **intramuscular** epinephrine in a child with a life-threatening anaphylactic reaction or one who is experiencing severe symptoms include any one of the following (Simons, Ardusso, Bilò, et al, 2011):

- Itching sensation or tightness in throat; hoarseness
- "Barky" cough
- Difficulty swallowing; dyspnea