

Reducing Risk of Food Allergy in Your Baby

This resource includes steps to reduce a baby's risk of developing food allergy. It is intended for babies at increased risk.

What is food allergy?

Food allergy occurs when the immune system mistakes a specific protein (an allergen) in a food as harmful. Once a person has a food allergy, an allergic reaction occurs every time they eat that food.

About 7% of babies and young children have food allergy. Children can outgrow some food allergies.

The foods that most commonly cause food allergy are called common food allergens. They include:

- Milk (and milk products)
- Egg
- Peanut
- Tree nuts (e.g. almonds, cashews, walnuts)
- Soy
- Seafood (fish, shellfish, and crustaceans)
- Wheat
- Sesame

What are some possible symptoms of an allergic reaction?

Symptoms of an allergic reaction to a food can range from mild to severe. Reactions often appear within minutes after exposure to the food. Examples include:

- Hives, swelling, redness or rash
- Stuffy or runny nose with itchy watery eyes
- Vomiting
- Cough

Although less common, vomiting, sometimes together with diarrhea, can also occur hours later.

Severe symptoms of an allergic reaction require immediate attention. Examples include:

- Swelling of the mouth, tongue or throat
- Hives that are spreading
- Any difficulty breathing, repetitive coughing or wheezing
- Difficulty swallowing or hoarse voice or cry
- Pale or blue colour of the face or lips
- Faintness, weakness or passing out

Call **9-1-1** or the local emergency number right away if signs of a severe allergic reaction occur.

If you are concerned a food is causing an allergic reaction, stop giving the food to your baby and talk to your baby's doctor. You can continue to offer other new foods.

Is my baby at increased risk of developing food allergy?

A baby is at increased risk of developing food allergy if:

- A parent, sister or brother has been diagnosed with an allergic condition like food allergy, eczema, asthma or hay fever. Allergic conditions tend to run in families.
- A baby has severe eczema.

Talk to your baby's health care provider to find out if they are at increased risk of developing food allergy.

What is severe eczema?

Severe eczema is a very bad itchy, dry, oozing or crusted rash that does not go away with the proper use of medicated ointments and daily moisturizing as directed by the baby's doctor or nurse practitioner.

Having food allergy does not cause eczema. Rather, having severe eczema may increase the risk of developing food allergy.

Most babies with eczema do not have severe eczema. If you are unsure if your baby has severe eczema, talk to your baby's doctor or nurse practitioner.

What can I do to reduce my baby's risk of developing food allergy?

If your baby is at increased risk of developing food allergy, there are some steps that you can take that will help reduce your baby's risk.

Keep your baby's eczema under good control. If your baby has eczema, try to keep it well controlled. This means keeping the inflammation down. If you need help to control your baby's eczema, talk to your baby's doctor or nurse practitioner. If needed, they can refer your baby to a pediatric allergist or pediatric dermatologist.

If you can, breastfeed your baby. Breastfeeding your baby may help prevent the development of food allergy. Since breastfeeding is linked to many other health benefits, Health Canada recommends breastfeeding until 2 years of age and beyond.

Questions you may have:

- **Should I avoid certain foods during pregnancy or while breastfeeding?**

There is no need to avoid specific foods during your pregnancy or while you are breastfeeding to prevent food allergy in your baby. In fact, restricting your diet during pregnancy can make it harder to get the calories and nutrients you need to support the growth and development of your baby.

- **If I offer formula, can I offer a regular infant formula?**

If you offer infant formula to your baby, you can use a regular store bought cow-milk based product. Current research shows that regular formulas do not appear to increase the risk of developing milk allergy compared to modified formulas. Modified formulas include extensively hydrolyzed casein and partially hydrolyzed whey formulas.

Introduce the foods that commonly cause food allergy at around 6 months of age.

Introduce the common food allergens when your

baby has shown they're ready for solid foods. For most babies this is at about 6 months of age. A recent study showed the risk of developing peanut allergy was much lower in babies who had peanut introduced at about 6 months of age.

Introduce the common food allergens one at a time to your baby. There is no research to show that you need to wait a certain number of days between them.

You can start with the common food allergens your family eats often. You do not have to introduce the foods your family does not eat, such as fish if your family is vegetarian. If you have questions about introducing the common food allergens, talk to your baby's nurse or doctor or a registered dietitian.

Tip:

Consider introducing peanut and egg before the other common food allergens.

Research suggests introducing peanut and cooked egg (such as hard boiled) at about 6 months of age is particularly helpful for reducing the risk of a food allergy developing to these foods. You can introduce them to your baby's diet before introducing the other common food allergens.

If your baby has severe eczema or egg allergy, talk to your baby's doctor or nurse practitioner. Babies with severe eczema or egg allergy may benefit from having peanut introduced to their diets between 4 to 6 months of age. This may be the best age for reducing their chance of developing peanut allergy. Talk to your baby's doctor or nurse practitioner before you try offering peanut. Ask them to consider referring your baby to a pediatric allergist before offering peanut.

Offer tolerated common food allergens regularly. Offer the common food allergens your baby tolerates several times a week, or more often if you like. This will help your baby maintain tolerance to these foods (prevent a food allergy from developing).

What recipes can I try?

Whole peanuts and globs of peanut butter are choking hazards for children under 4 years of age. The recipes below are suggestions of how to prepare peanut and egg for your baby. Offer

your baby as much or as little as they want.

When your baby is ready for solid foods:

Peanut butter in infant cereal	Add 15 mL (1 tablespoon) of warm water to 15 mL of smooth peanut butter. Mix until smooth and no lumps. Stir into 30 mL (2 tablespoons) of infant cereal prepared according to package instructions.
Peanut butter in apple sauce	Add 15 mL (1 tablespoon) of warm water to 15 mL of smooth peanut butter. Mix until smooth and no lumps. Stir into 30 mL (2 tablespoons) of apple sauce or other pureed or mashed fruit.
Hard-boiled egg	Blend or mash a hard-boiled egg with a fork. Add a few teaspoons of water to moisten as needed.

When your baby is ready for more textures:

Peanut butter on toast	Spread 15 mL (1 tablespoon) of smooth peanut butter thinly on a piece of toast. Cut into strips.
Scrambled egg	Beat together an egg and a small amount of water. Scramble in an oiled pan, until egg is completely cooked. Mash larger pieces of scrambled egg with a fork before offering to your baby.
French toast	Beat together an egg, 30 mL (2 tablespoons) of milk and some cinnamon. Soak a slice of bread in the egg mixture. Fry each side of the bread in an oiled pan until the egg is completely cooked. Cut into cubes.

What other foods should I offer my baby?

In addition to the common food allergens, offer your baby other foods, especially foods rich in iron. Offer iron rich foods 2 or more times each day. Examples include:

- Well-cooked meat, poultry and fish
- Cooked egg, lentils, beans and tofu

- Iron-fortified infant cereal

Some common food allergens are also sources of iron. These include peanut, tree nut and sesame seed butters.

Yogurt and cheese are recommended for your baby starting at 6 months of age. To help your baby maintain good iron status, delay offering milk to drink until 9 to 12 months of age.

Additional Resources

For more information, visit the resources listed below:

- Eczema and Food Allergy in Babies and Young Children
www.healthlinkbc.ca/healthy-eating/eczema-allergy-baby-children
- HealthLinkBC File #69c Baby's First Foods www.healthlinkbc.ca/healthlinkbc-files/babys-first-foods
- HealthLinkBC File #69d Helping Your 1 to 3 Year Old Child Eat Well
www.healthlinkbc.ca/healthlinkbc-files/helping-your-1-3-year-old-child-eat-well
- Baby's Best Chance
www.health.gov.bc.ca/library/publications/year/2015/babys-best-chance-2015.pdf (PDF 16.66 MB)
- Toddler's First Steps
www.health.gov.bc.ca/library/publications/year/2015/toddlers-first-steps-2015.pdf (PDF 7.68 MB)
- Public Health Agency of Canada - The Sensible Guide to a Healthy Pregnancy
www.phac-aspc.gc.ca/hp-gs/guide-eng.php

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For more information about healthy eating and nutrition, visit www.HealthLinkBC.ca/healthy-eating or call **8-1-1** (toll-free) to speak with a registered dietitian. For deaf and hearing-impaired assistance, call **7-1-1**. Translation services are available in more than 130 languages on request.