

Expert panel issues clinical guidelines to prevent peanut allergy

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Credit: Daniele Pellati/public domain

An expert panel sponsored by the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health, issued clinical guidelines today to aid health care providers in early introduction of peanut-containing foods to infants to prevent the development of peanut allergy.

Peanut allergy is a growing health problem for which no treatment or cure exists. People living with [peanut allergy](#), and their caregivers, must be vigilant about the foods they eat and the environments they enter to avoid allergic reactions, which can be severe and even life-threatening. The allergy tends to develop in childhood and persist through adulthood. However, recent scientific research has demonstrated that introducing peanut-containing foods into the diet during infancy can prevent the development of peanut allergy.

The new Addendum Guidelines for the Prevention of Peanut Allergy in the United States supplement the [2010 Guidelines for the Diagnosis and Management of Food Allergy in the United States](#).

The addendum provides three separate guidelines for infants at various levels of risk for developing peanut allergy and is targeted to a wide variety of [health care](#) providers, including pediatricians and family practice physicians.

"Living with peanut allergy requires constant vigilance. Preventing the development of peanut allergy will improve and save lives and lower health care costs," said NIAID Director Anthony S. Fauci, M.D. "We expect that widespread implementation of these guidelines by health care providers will prevent the development of peanut allergy in many susceptible children and ultimately reduce the prevalence of peanut allergy in the United States."

Addendum Guideline 1 focuses on infants deemed at high risk of developing peanut allergy because they already have severe eczema, [egg allergy](#) or both. The expert panel recommends that these infants have peanut-containing foods introduced into their diets as early as 4 to 6 months of age to reduce the risk of developing peanut allergy. Parents and caregivers should check with their infant's [health care provider](#) before feeding the infant peanut-containing foods. The health care provider may choose to perform an allergy blood test or send the infant to a specialist for other tests, such as a skin prick test or an oral food challenge. The results of these tests will help decide if and how peanut should be safely introduced into the infant's diet.

Guideline 2 suggests that infants with mild or moderate eczema should have peanut-containing foods introduced into their diets around 6 months of age to reduce the risk of peanut allergy. Guideline 3 suggests that infants without eczema or any [food allergy](#) have peanut-containing foods freely introduced into their diets.

In all cases, infants should start other solid foods before they are introduced to peanut-containing foods.

Development of the Addendum Guidelines was prompted by emerging data suggesting that peanut allergy can be prevented by the early introduction of peanut-containing foods. [Clinical trial results reported in February 2015](#) showed that regular peanut consumption begun in infancy and continued until 5 years of age led to an 81 percent reduction in development of peanut allergy in infants deemed at high risk because they already had severe eczema, egg allergy or both. This finding came from the landmark, NIAID-funded Learning Early About Peanut Allergy (LEAP) study, a randomized clinical trial involving more than 600 infants.

"The LEAP study clearly showed that introduction of peanut early in life significantly lowered the risk of developing peanut allergy by age 5. The magnitude of the benefit and the scientific strength of the study raised the need to operationalize these findings by developing clinical recommendations focused on peanut allergy prevention," said Daniel Rotrosen, M.D., director of NIAID's Division of Allergy, Immunology and Transplantation.

In 2015, NIAID established a coordinating committee representing 26 professional organizations, advocacy groups and federal agencies to oversee development of the Addendum Guidelines to specifically address the prevention of peanut allergy. The coordinating committee convened a 26-member expert panel comprising specialists from a variety of relevant clinical, scientific and public health areas. The panel, chaired by Joshua Boyce, M.D., professor of medicine and pediatrics at Harvard Medical School, used a literature review of food allergy prevention research and their own expert opinions to prepare draft guidelines. The draft guidelines were available on the NIAID website for public comment from March 4 to April 18, 2016. The [expert panel](#) and coordinating committee reviewed the 104 comments received to develop the final Addendum Guidelines.

More information: The Addendum Guidelines will be published January 5 in the *Journal of Allergy and Clinical Immunology* and co-published in the *Annals of Allergy, Asthma and Immunology*; *Journal of Pediatric Nursing*; *Pediatric*

Dermatology; *World Allergy Organization Journal*; and *Allergy, Asthma and Clinical Immunology*. [DOI: 10.1016/j.jaci.2016.10.010](#)

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