

MEDIA STATEMENT

5 August 1999

DIETARY APPROACH TO FOOD ALLERGY AND INTOLERANCE

The British Dietetic Association is concerned that ongoing public and media interest in food allergy and intolerance is causing much confusion. In some instances, unnecessary and potentially dangerous dietary restrictions are being followed, not only on a 'do-it-yourself' basis, but also by 'practitioners' acting without the specialised medical and dietetic knowledge needed to make accurate diagnosis and to ensure safe treatment.

Food intolerance can be allergic or non-allergic. Non-allergic food intolerance is far more common than food allergy. Such reactions may be due to a number of mechanisms such as the lack of a particular enzyme needed to digest a certain food e.g. lactase deficiency means that milk and milk products cannot be well tolerated.

The term food allergy should be reserved for reactions that involve an abnormal response of the body's immune system. In such circumstances, a food protein (allergen) which is generally considered harmless for the majority of people acts as an 'antigen' and provokes a reaction whenever the food is eaten.

Although 2 in 10 of the population believes they are 'allergic' to certain foods, in reality reproducible intolerance can be demonstrated in less than 10% of these (i.e. 1-2% of the population), and only a minority of these are true allergic reactions.

Currently there is no totally accurate and reliable diagnostic test for food allergy. Even medically recognised tests for food intolerance such as RAST and skin prick tests can give false negative and positive results, but they may be useful as an aid to diagnosis. There are an increasing number of food allergy tests advertised in the media and health food shops that have no scientific validation. The only reliable way to investigate food allergy and intolerance is by monitored withdrawal and re-challenge of suspected foods. However this approach should not be used if reactions could be life threatening.

Dietary restrictions from an unqualified practitioner may put people at risk of:

- Inaccurate diagnosis of a medical condition
- Nutritional deficiencies
- Unnecessary personal expense - both in monetary and psychological terms
- False hope of an answer to their health problems
- Being caught up in a spiral of anxiety about the effect of food on their health
- Disordered eating such as binge eating, food obsessions or food restriction - having to control eating patterns causes great stress to some individuals.

To protect the public from these potential problems, and to ensure that individuals with true food allergy or intolerance receive the standard of treatment they require, The British Dietetic Association recommends that:

- State Registered Dietitians are involved in the management of food allergy or intolerance to ensure that dietary restrictions are not used inappropriately or dangerously.
- Tailored individual advice is given by a State Registered Dietitian experienced in dealing with food allergies and intolerance. Any test results, along with a thorough medical and dietary history, should be used to determine suitable treatment.
- Dietary treatment for food allergy or food intolerance involves liaison between a State Registered Dietitian and a referring medical practitioner.

- Initial assessment, diagnosis, treatment and regular follow-up arrangements must be made. Regular monitoring is essential to ascertain the effectiveness of treatment, how the client is coping with the required dietary change and if it is necessary to continue the dietary change.
- All clients receive comprehensive and up-to-date information on the social and practical aspects of diagnosing and treating food allergy or intolerance. This includes food lists, recipe information, where to buy alternative foods, vitamin or mineral supplements or prescription items (where necessary), eating away from home, reintroduction of foods and keeping food and symptom records.
- Nutritional adequacy is a major consideration in the planning of diets for all clients, but especially for people in 'at risk' groups, including children and pregnant women.
- Children are assessed, advised and checked regularly by an experienced paediatric State Registered Dietitian and Paediatrician. This is because it is essential to monitor adequate growth and changing nutritional requirements with age. Also, food allergies may disappear or change with age.
- People with allergies that could lead to life threatening reactions such as anaphylactic shock (e.g. to peanuts), receive careful monitoring from a State Registered Dietitian and Consultant.

For Further information contact: