

Home food introduction for foods such as eggs and milk

A guide for parents and children

Food for home Challenge:

.....

What is home food introduction?

Home food introduction is the introduction of a food that we believe your child is **not** allergic to into your child's diet at home.

Why are we recommending a home food introduction for your child?

We have performed allergy tests which make us believe that your child is either not allergic to, or has grown out of being allergic to, the food that we are recommending you introduce at home. These tests could be skin prick tests and/or blood tests.

This leaflet will guide you through the home food introduction process.

When to perform the home food introduction?

- Ensure your child is well with no illness.
- Ensure that their eczema, asthma or hay-fever has not flared up.
- If your child has needed to use a salbutamol (Ventolin) or terbutaline (Bricanyl) blue inhaler in the last three days then delay the introduction until their acute wheezing episode has settled down.

Medications

It is important that your child is not currently taking certain medicines before you proceed.

Antihistamines:

1. Short acting antihistamines e.g. chlorphenamine (also known as Piriton or Allerief), alimemazine (Vallergan), promethazine (Phenergan)
 - These must be stopped 48 hours prior to a home challenge
2. Long acting antihistamines e.g. cetirizine (Zirtek), loratadine (Claritin) and fexofenadine (Telfast)

Some other over the counter medicines, such as cough mixtures and cold remedies, also contain antihistamines. If in doubt check with us or ask your pharmacist.

Long acting antihistamines need to be stopped five days before a home challenge. Again, check with us or ask your pharmacist if you are not sure.

Continue to give your child any other regular medications that they are taking or applying; such as emollients and topical steroids, inhalers, eye drops or nasal sprays.

Where shall I perform the home introduction of food?

Perform the home introduction in your home on a day that you have time to dedicate to your child and observe them after they have eaten the food.

Please ensure you have easy access to your child’s emergency medications, as stated on your child’s emergency plan, in case of an allergic reaction.

Start food introduction before 2pm.

How to perform the home introduction of food?

Only introduce one food at a time, and leave at least three days between separate food introductions.

If your child refuses to eat the food do not force them. Try again another day.

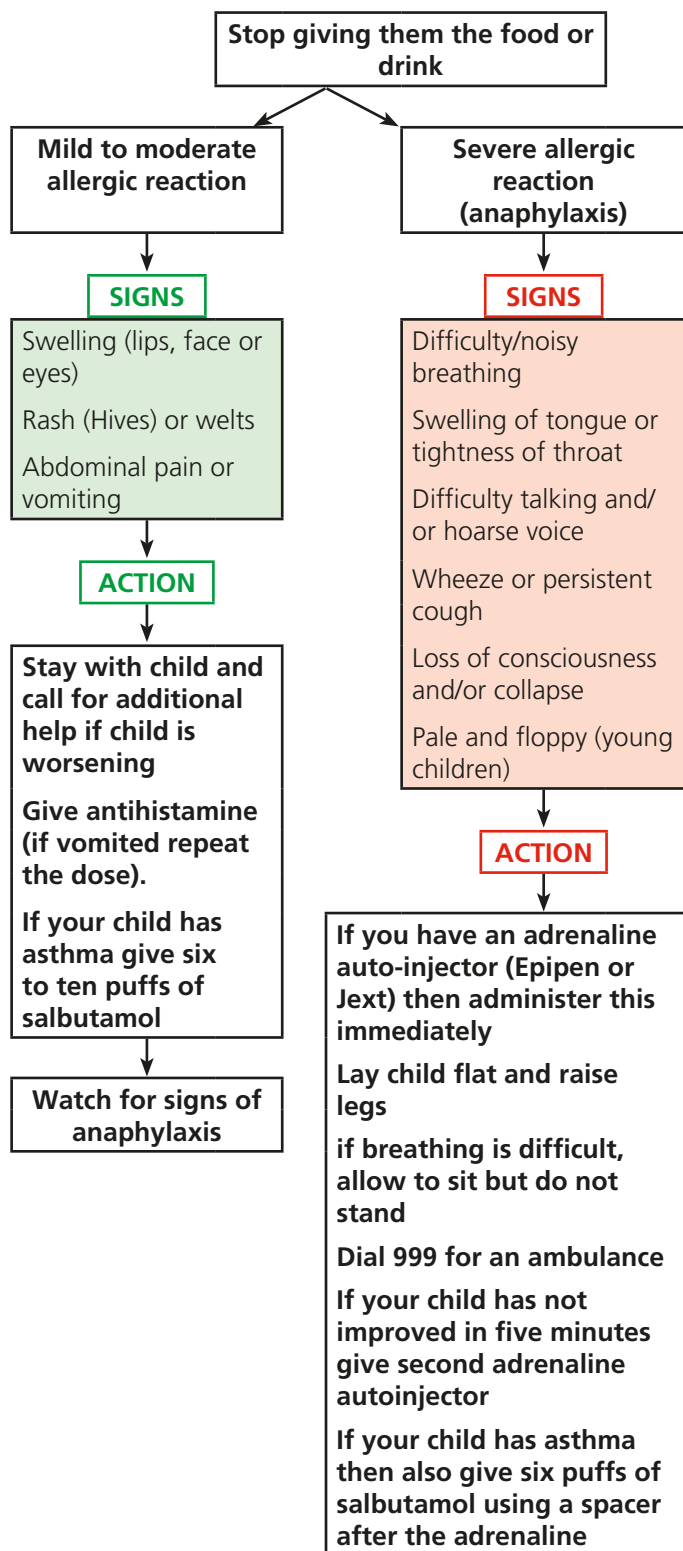
- Start by rubbing a small amount of the food onto your child’s inner lip, and wait for five to ten minutes. **Don’t** rub or place on their skin anywhere else before hand
- If there is no reaction, give your child a pin-head size or one drop of the food () and wait ten to fifteen minutes.
- If there is no reaction, give your child a pea sized portion of food to eat or half a teaspoon to drink and wait ten to fifteen minutes.
- Double the dose every ten to fifteen minutes until they have eaten either:
 - two heaped tablespoons in total of a solid food
 - 180ml (six ounces) to drink
 - or as much as they can hold in their hand (age appropriate portion)

Observe your child for two hours after giving them their final dose.

There are some suggested foods and more specific amounts in the table below.

Home food introduction	Suggested food to introduce	Build up to final dose:
Plain/cooked egg	Hard boiled medium sized egg (10 minutes in boiling water)	30 grams or 1 hardboiled egg
Milk	Shop bought full fat pasteurized cow’s milk	180ml (6 ounces)
Soya	Shop bought fresh soya milk e.g. Alpro, Provamel, Tesco’s own, Sainsbury’s own	180ml (6 ounces)
Wheat	Weetabix, plain dried pasta	1 Weetabix (37.5g/biscuit) or 20 grams
Sesame	Hummus, sesame seed snaps (not appropriate for children under two years old) or plain Halva	10 grams (two teaspoons)

What do I do if my child has an allergic reaction to the food?



***If you are unsure whether your child is having an allergic reaction, stop giving the food.**

If your child is unwell but it is not an emergency please contact your GP. If your child is acutely unwell and needs urgent medical care please call 999 and have them seen in hospital.

What to do if my child has a delayed allergic reaction to the food?

Delayed allergic reactions usually occur at least two hours after consuming the food but can occur up to 72 hours after the food has been introduced.

Delayed reactions include worsening eczema, stomach pains, vomiting or loose stools.

If your child is having a delayed reaction, go back to the dose of the proposed food that they previously tolerated. If you are unsure please contact us.

Children's Allergy service

Following your home challenge if there are any problems, or concerns that you would like to discuss please contact the Allergy Clinical Nurse Specialists on: **01392 402682**

If you have any concerns, complaints or commendations about the children's allergy service please contact the Patients Advice Liaison Service (PALS). Tel: 01392 402093 (Available from 9:30am - 4:30pm) Email: **rde-tr.PALS@nhs.net**

This information can be offered in other formats on request, including a language other than English and Braille.

RD&E (Eastern Services) main switchboard: 01392 411611

NDDH (Northern Services) main switchboard: 01271 322577

For Royal Devon services log on to: <https://royaldevon.nhs.uk>

Smoking and second-hand smoke causes harm to patients and staff, and is not allowed on any Trust sites.

The Trust cannot accept any responsibility for the accuracy of the information given if the leaflet is not used by Royal Devon staff undertaking procedures at the Royal Devon hospitals.

© Royal Devon University Healthcare NHS Foundation Trust

Designed by Graphics (Print & Design), RD&E (Heavitree)