

ORAL FOOD CHALLENGE PARENT GUIDE

Your child is scheduled to have a food challenge. Small but increasing amounts of the food will be given to your child and we will be observing your child for any changes related to eating the food both during the challenge and for about 1-4 hours after the challenge. Typically, there are 5 steps to a graded challenge, but the challenge for your child could be a little different, depending on the circumstances.

Please follow through with the following instructions:

1. Food

- Avoid, if possible, giving the child anything to eat/drink for 4 hours prior to the challenge. If this is not practical, a small meal 2 hours prior is okay. Try to have your child arrive hungry.
- Please bring with you a full serving of the food to be challenged on the day of the challenge appointment (see below). You may want to consider bringing multiple options of the food in case your child refuses to eat something. You also may want to consider bringing strongly-flavored foods that the child likes and regularly eats, such as chocolate pudding or ice cream, cinnamon, fruit yogurt, or jam to use as a vehicle to disguise the taste of the challenge food. Do not mix the vehicle with the challenge food ahead of time. Instead, come to the clinic with the vehicle and the food to be challenged, where the nurses will help with this mixing.
- We do not have the capacity to do any “cooking” in our clinic, but we do have a safe microwave available to reheat foods that are brought in from home.
- Bring safe snacks/drinks for your child to eat/drink, if necessary, after the challenge, while they are waiting.

2. Games to keep child busy

- There is a lot of waiting involved in a food challenge. Bring enough play and game activities to occupy the child for 2-4 hours.
- If necessary, come with "prizes" or “rewards” to encourage your child to cooperate with each step of the challenge.

3. Medications prior to food challenge

- Discontinue antihistamines [e.g. hydroxyzine (Atarax), cetirizine (Zyrtec), fexofenadine (Allegra), loratadine (Claritin)] 5 days before the food challenge ; just 2 days for diphenhydramine (Benadryl). Discuss with your doctor ahead of time, if this cannot be easily done.
- Do not stop regular asthma therapy (e.g. Singulair, Flovent, QVar, Pulmicort, Asmanex, Advair, Symbicort, Dulera).
- It is okay to use albuterol MDI, or by nebulizer, as needed, but if possible, try to withhold for 4 – 6 hours before the food challenge.

Examples of foods for challenges:

Cow's milk challenge – Bring 8 oz. liquid cow's milk. This is most convenient for the challenge. Bring bottles or “sippy” cups so your child can drink from something familiar. Also consider powdered milk which can be added to many foods. The fat content and flavor does not matter.

Egg challenge – The easiest challenge is with scrambled egg. Bring 2 whole scrambled eggs with you to the clinic. We can warm it in the microwave.

Soy challenge – It is easiest to use 8 oz. soy milk.

Wheat challenge – Consider 2 slices of bread (check for milk and/or egg ingredients if you are avoiding those), or a serving of whole wheat cereal such as Wheat Chex, Frosted Mini Wheat's (again check the label for other ingredients you may be avoiding), or Cream of Wheat cereal.

Peanut challenge – Easiest to use is peanut butter. The “dose” is 2 tablespoons of peanut butter. Most of the major label peanut butter (examples: Jiff, Skippy) do not carry a “may contain nuts” label. The peanut butter can be spread on safe bread, crackers, celery or any other safe vehicle when here in the office.

Tree nut challenges – It is easiest to use nut butter, if a butter is available for the nut that needs to be tested. If not available, a whole nut can be used. You need a nut that is not contaminated with peanut or other nuts if your child is avoiding peanut or other tree nuts. The best way to assure there is not contamination is to purchase the nuts in the shell and crack them at home. Please be aware that you cannot buy cashews in the shell. The serving size will vary with the type. Nuts can be sprinkled on top of pudding or yogurt if either of those foods is safe for your child. This should be done in the office by your nurse.

NOTE: manufacturer-guaranteed pure almond butter Barney Butter (www.barneybutter.com also www.justalmonds.com)

Meat or fish challenges – a serving of meat or fish is usually about the size of a deck of cards. Make sure the meat/fish is not processed or packaged with foods such as soy or milk. Delicatessens can contaminate foods if they share equipment between cheese and meats. Fish can be cross-contaminated if it is packaged or stored with other seafood. Don't forget to bring condiments such as ketchup, mustard or BBQ sauce if those foods are safe for your child.

In addition, consider a fruit-based "smoothie" as the vehicle. The icy texture can hide the crunchiness of tree nuts or sesame seeds and the coldness decreases the taste associated with soy or cow's milk. To make home-made smoothies, use about a cup of fresh or frozen berries, peaches, banana or any other fruit that is "safe". Add crushed iced and blend in a food processor or blender until smooth. Freeze the smoothie in a plastic container with a tight fitting lid. Make sure your child tastes and enjoys the smoothie at home without the challenge food before attempting to use it during the challenge. Bring the smoothie and the challenge substance to the visit. If your child tolerates milk or soy, you can add milk-based or soy-based yogurt to the smoothie to give it a better base.

Baked food items for milk or egg challenges – See the Jiffy muffin handout for the recipe for baked egg challenge or baked milk challenge. The recipe renders 6 muffins. The serving goal for the challenge is 2 muffins. Bake the muffins according to the appropriate recipe for your type of challenge and bring in 2 whole muffins. The nursing staff will divide the muffins into portions in our office.

What is an Oral Food Challenge?

An oral food challenge test is used to help determine whether someone has a current food allergy. It is most commonly recommended when an allergy test result and/or medical history indicates that you or your child no longer has an allergy to a certain food.

The oral food challenge involves eating a serving of the allergic food in a slow, graded fashion under medical supervision. The food challenge procedure is the most accurate test to determine whether a food needs to be avoided.

The food challenge is undertaken when a person is in generally good health, and when they are able to discontinue antihistamines for a brief period (usually 5 days) before the test. Persons with asthma should be doing well with their asthma.

What will happen during the Oral Food Challenge?

During the food challenge, you or your child will be initially given a very small amount of specific food being tested. If tolerated, increasing amounts of the challenge food will be given over a few hours, with close observation at each stage.

You or your child will be observed for symptoms such as itching, rash, abdominal pain, difficulty breathing, or other allergic symptoms. If any symptoms develop, you or your child will be treated immediately and the challenge will be stopped. In most cases, this will involve the use of Benadryl or epinephrine to prevent any allergic reactions from getting worse. It is not uncommon for children and adults to develop mild symptoms during a food challenge that require these treatments. Very rarely, other treatments are needed for more serious reactions.

In some cases, the food challenge is performed by masking the food to hide the taste, and using food that looks/tastes the same but does not contain the food being tested (placebo). These procedures reduce the possibility that we would misjudge a reaction to the food that could occur from fear or distaste of the new food.

What are the risks or discomforts of an Oral Food Challenge?

The discomforts associated with the food challenge are generally no more than those encountered when eating the food. Symptoms usually are short-lived (less than 2 hours). Symptoms may include an itchy skin rash, nausea, abdominal discomfort, vomiting, diarrhea, stuffy “runny” nose, sneezing, or wheezing.

The major and most concerning risks involved with a food challenge are severe breathing difficulties and rarely a drop in blood pressure. While a severe outcome such as death is theoretically possible, it is extremely rare for it to occur from a well-conducted and medically supervised oral food challenge. The risk of a reaction is reduced by starting the challenge with very small amounts of food, administering the food over a prolonged time period and stopping the challenge at the first sign of a reaction, and by not giving any food suspected to cause a major reaction.

Medications, personnel and equipment will be immediately available to treat allergic reactions should they occur.

What are alternatives to an Oral Food Challenge?

If you choose not to have the oral food challenge, the safest thing to do is completely restrict the food in question from your or your child’s diet.